

**COMMITTEE ON NATURAL RESOURCES**  
**Disclosure Form**  
**As required by and provided for in House Rule XI, clause 2(g) and**  
**the Rules of the Committee on Natural Resources**

**American-Made Energy and Infrastructure Jobs Act Hearing**  
**November 18, 2011**

\* \* \* \* \*

For Witnesses Representing Organizations:

1. Name: Erik G. Milito
  
2. Name of Organization(s) You are Representing at the Hearing: American Petroleum Institute
  
3. Business Address: 1220 L Street NW, Washington, DC, 20005
  
4. Business Email Address: [Information redacted for privacy]
  
5. Business Phone Number: [Information redacted for privacy]

Name/Organization: Erik Milito/American Petroleum Institute

Title/Date of Hearing: American-Made Energy and Infrastructure Jobs Act Hearing, November 18, 2011

a. Any training or educational certificates, diplomas or degrees or other educational experiences that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing.

See attached bio for information that addresses the questions a, b and c on this page.

b. Any professional licenses, certifications, or affiliations held that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing.

See attached bio for information that addresses the questions a, b and c on this page.

c. Any employment, occupation, ownership in a firm or business, or work-related experiences that relate to your qualifications to testify on or knowledge of the subject matter of the hearing.

See attached bio for information that addresses the questions a, b and c on this page.

d. Any federal grants or contracts (including subgrants or subcontracts) from the Department of the Interior (and/or other agencies invited) that you have received in the current year and previous four years, including the source and the amount of each grant or contract.

None.

e. A list of all lawsuits or petitions filed by you against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed.

None.

f. Any other information you wish to convey that might aid the Members of the Committee to better understand the context of your testimony.

Nothing additional.

Name/Organization: Erik Milito/American Petroleum Institute

In addition, for witnesses representing organizations:

g. Any offices, elected positions, or representational capacity held in the organization(s) on whose behalf you are testifying.

Group Director, Upstream & Industry Operations

h. Any federal grants or contracts (including subgrants or subcontracts) from the *Department of the Interior (and /or other agencies invited)* that were received in the current year and previous four years by the organization(s) you represent at this hearing, including the source and amount of each grant or contract for each of the organization(s).

None

i. A list of all lawsuits or petitions filed by the organization(s) you represent at the hearing against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed for each of the organization(s).

Please see the attached litigation table for the cases that API has participated in against the federal government in the past four years.

j. A list of any countries from which the organization(s) you represent at the hearing have received foreign donations and the total amount of donations received from each country, for the current year and the previous four years, by each organization.

None.

k. For tax-exempt organizations and non-profit organizations, copies of the three most recent public IRS Form 990s (including Form 990-PF, Form 990-N, and Form 990-EZ) for each of the organization(s) you represent at the hearing (not including any contributor names and addresses or any information withheld from public inspection by the Secretary of the Treasury under 26 U.S.C. 6104)). Attached.

Form **990**

# Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

## 2009

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

**A For the 2009 calendar year, or tax year beginning and ending**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type.  See Specific Instructions.	<b>C Name of organization</b> <b>AMERICAN PETROLEUM INSTITUTE</b>	<b>D Employer identification number</b> <b>13-0433430</b>
		<b>Doing Business As</b>	<b>E Telephone number</b> <b>(202) 682-8000</b>
		<b>Number and street (or P.O. box if mail is not delivered to street address) Room/suite</b> <b>1220 L STREET, NW</b>	<b>G Gross receipts \$</b> <b>361,188,817.</b>
		<b>City or town, state or country, and ZIP + 4</b> <b>WASHINGTON, DC 20005</b>	<b>H(a) Is this a group return for affiliates?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b) Are all affiliates included?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) <b>H(c) Group exemption number</b> ▶
<b>F Name and address of principal officer:</b> <b>JACK N. GERARD</b> <b>SAME AS C ABOVE</b>		<b>J Tax-exempt status:</b> <input checked="" type="checkbox"/> 501(c) ( 6 ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	
<b>J Website:</b> ▶ <b>WWW.API.ORG</b>		<b>K Form of organization:</b> <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	
<b>L Year of formation:</b> <b>1919</b>		<b>M State of legal domicile:</b> <b>DC</b>	

### Part I Summary

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>SEE SCHEDULE O</b>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>56</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>55</b>
	<b>5</b> Total number of employees (Part V, line 2a)	<b>5</b>	<b>271</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>6200</b>
	<b>7a</b> Total gross unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>4,083,104.</b>
<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	<b>216,667.</b>	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b>	<b>Current Year</b>
	<b>9</b> Program service revenue (Part VIII, line 2g)	<b>199,786,415.</b>	<b>187,780,057.</b>
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>3,852,995.</b>	<b>2,661,621.</b>
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<b>323,158.</b>	<b>8,354,461.</b>
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>203,962,568.</b>	<b>198,796,139.</b>
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<b>6,168,701.</b>	<b>3,642,922.</b>
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<b>41,094,491.</b>	<b>44,511,285.</b>
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)		
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶		
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	<b>146,092,748.</b>	<b>138,100,297.</b>
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<b>193,355,940.</b>	<b>186,254,504.</b>
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	<b>10,606,628.</b>	<b>12,541,635.</b>	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>21</b> Total liabilities (Part X, line 26)	<b>111,646,922.</b>	<b>122,167,885.</b>
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	<b>87,554,847.</b>	<b>79,076,589.</b>
		<b>24,092,075.</b>	<b>43,091,296.</b>

### Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Sign Here** ▶ *Jack Gerard* Signature of officer Date **11/15/10**

▶ **JACK N. GERARD, PRESIDENT AND CEO**  
Type or print name and title

**Paid Preparer's Use Only**

Preparer's signature ▶ *Nebojha G. Kosina* Date **11/15/10** Check if self-employed  Preparer's identifying number (see instructions)

Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ **TATE AND TRYON**  
**805 15TH STREET, NW SUITE 900**  
**WASHINGTON, DC 20005**

EIN ▶ \_\_\_\_\_ Phone no. ▶ **(202) 293-2200**

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

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission: THE MISSION OF THE AMERICAN PETROLEUM INSTITUTE (API) IS TO INFLUENCE PUBLIC POLICY IN SUPPORT OF A STRONG, VIABLE U.S. OIL AND NATURAL GAS INDUSTRY ESSENTIAL TO MEET THE ENERGY NEEDS OF CONSUMERS IN AN EFFICIENT, ENVIRONMENTALLY RESPONSIBLE MANNER.

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 \$ including grants of \$ ) (Revenue \$ ) ADVOCACY- API SPEAKS FOR THE PETROLEUM INDUSTRY BEFORE CONGRESS, THE EXECUTIVE BRANCH OF GOVERNMENT, STATE LEGISLATURES, AND THE NEWS MEDIA. IT NEGOTIATES WITH REGULATORY AGENCIES, REPRESENTS THE INDUSTRY IN COURT AND PARTICIPATES IN COALITIONS -- BUILDING THE GRASSROOTS SUPPORT THAT PRODS CONGRESS, THE WHITE HOUSE AND STATE LEGISLATORS TO ACT. API ALSO STRIVES TO ENHANCE CREDIBILITY ON THE ENVIRONMENT, HEALTH AND SAFETY ISSUES THAT ARE CENTRAL TO THE PUBLIC'S PERCEPTION OF THE INDUSTRY AND ITS PRODUCTS.

4b (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ ) INFORMATION- API IS THE SOURCE FOR INFORMATION ABOUT THE PETROLEUM INDUSTRY. IT UNDERTAKES THE SCIENTIFIC AND ECONOMIC ANALYSIS THAT IS THE FOUNDATION FOR THE INDUSTRY'S STANCE ON THE CURRENT ISSUES. IT COLLECTS AND COMPILES STATISTICS AND IS WITHOUT PEER IN FINDING AND PROVIDING INDUSTRY-SPECIFIC INFORMATION FOR PEOPLE WHO NEED IT.

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ ) INDUSTRY OPERATIONS- API HAS SET STANDARDS FOR THE U.S. PETROLEUM INDUSTRY SINCE ITS FOUNDING IN 1919. IN THE GLOBAL MARKETPLACE, THESE SAME STANDARDS ARE BECOMING INTERNATIONAL STANDARDS, AND API'S INVOLVEMENT IN INTERNATIONAL EVENTS AND ORGANIZATIONS IS GROWING. MORE THAN 500 API STANDARDS ARE NOW USED THROUGHOUT THE WORLD. MANY OF THESE STANDARDS ARE NOW A PART OF BOTH FEDERAL AND STATE REGULATIONS.

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

4e Total program service expenses \$

**Part IV Checklist of Required Schedules**

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>	N/A	
5	<b>Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.</b> Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>	X	
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? <i>If "Yes," complete Schedule D, Part I</i>		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11	Is the organization's answer to any of the following questions "Yes"? <i>If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	X	
	<ul style="list-style-type: none"> <li>• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i></li> <li>• 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? <i>If "Yes," complete Schedule D, Part VII.</i></li> <li>• 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? <i>If "Yes," complete Schedule D, Part VIII.</i></li> <li>• 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? <i>If "Yes," complete Schedule D, Part IX.</i></li> <li>• Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i></li> <li>• 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? <i>If "Yes," complete Schedule D, Part X.</i></li> </ul>		
12	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i>	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional</i>		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	X	
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? <i>If "Yes," complete Schedule F, Part I</i>	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>		X
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? <i>If "Yes," complete Schedule G, Part I</i>		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>21</b> 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? If "Yes," complete Schedule I, Parts I and II	X	
<b>22</b> 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? If "Yes," complete Schedule I, Parts I and III		X
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	X	
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
<b>25a Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	N/A	
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	N/A	
<b>26</b> 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? If "Yes," complete Schedule L, Part II		X
<b>27</b> 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? If "Yes," complete Schedule L, Part III		X
<b>28</b> 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):		
<b>a</b> A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	X	
<b>c</b> 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 direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1		X
<b>35</b> Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		X
<b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	N/A	
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	X	

**Note.** All Form 990 filers are required to complete Schedule O.

**Part V** Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		
	1a	208	
<b>b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
	1b	0	
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
<b>2a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a	271	
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	X	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	X	
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	X	
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	X	
<b>b</b>	If "Yes," enter the name of the foreign country: <b>CHINA</b> See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
<b>c</b>	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
<b>6a</b>	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?	X	
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	X	
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b> N/A		
<b>a</b>	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>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
<b>e</b>	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
<b>g</b>	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
<b>h</b>	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? N/A		
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the organization make any taxable distributions under section 4966? N/A		
<b>b</b>	Did the organization make a distribution to a donor, donor advisor, or related person? N/A		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12 N/A	10a	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>a</b>	Gross income from members or shareholders N/A	11a	
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	12a	
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	

Form 990 (2009)



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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body		
<b>1b</b>	Enter the number of voting members that are independent		
<b>2</b>	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	X	
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
<b>4</b>	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
<b>5</b>	Did the organization become aware during the year of a material diversion of the organization's assets?		X
<b>6</b>	Does the organization have members or stockholders?	X	
<b>7a</b>	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	X	
<b>7b</b>	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>8a</b>	a The governing body?	X	
<b>8b</b>	b Each committee with authority to act on behalf of the governing body?	X	
<b>9</b>	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		X

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

		Yes	No
<b>10a</b>	Does the organization have local chapters, branches, or affiliates?	X	
<b>10b</b>	b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	X	
<b>11</b>	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?		X
<b>11A</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b>	Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
<b>12b</b>	b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
<b>12c</b>	c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
<b>13</b>	Does the organization have a written whistleblower policy?	X	
<b>14</b>	Does the organization have a written document retention and destruction policy?	X	
<b>15</b>	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?		
<b>15a</b>	a The organization's CEO, Executive Director, or top management official	X	
<b>15b</b>	b Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
<b>16b</b>	b 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 **NONE**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  
 Own website     Another's website     Upon request
- 19** Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **▶**  
**JOHN E. ROBERTSON - (202) 682-8000**  
**1220 L STREET NW, WASHINGTON, DC 20005**

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

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

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

Check this box if the organization did not compensate any current officer, director, or trustee.

(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			
ALI A. ABUALI BOARD MEMBER	0.50	X						0.	0.	0.
WILLIAM E. ALBRECHT BOARD MEMBER	0.50	X						0.	0.	0.
TOFIG AL-GABSANI BOARD MEMBER	0.50	X						0.	0.	0.
PHILIP F. ANSCHUTZ BOARD MEMBER	0.50	X						0.	0.	0.
MORTEN ARNTZEN BOARD MEMBER	0.50	X						0.	0.	0.
THOMAS A. BANNIGAN BOARD MEMBER	0.50	X						0.	0.	0.
DALTON J. BOUTTE BOARD MEMBER	0.50	X						0.	0.	0.
JOHN A. CARRIG BOARD MEMBER	0.50	X						0.	0.	0.
CLARENCE CAZALOT BOARD MEMBER AND TREASUR	0.50	X		X				0.	0.	0.
GERMAN CURA BOARD MEMBER	0.50	X						0.	0.	0.
PATRICK D. DANIEL BOARD MEMBER	0.50	X						0.	0.	0.
CHADWICK C. DEATON BOARD MEMBER	0.50	X						0.	0.	0.
MICHAEL J. DOLAN BOARD MEMBER	0.50	X						0.	0.	0.
RANDALL K. ERESMAN BOARD MEMBER	0.50	X						0.	0.	0.
TIMOTHY C. FELT BOARD MEMBER	0.50	X						0.	0.	0.
BRUCE C. GOTTWALD BOARD MEMBER	0.50	X						0.	0.	0.
JAMES T. HACKETT BOARD MEMBER	0.50	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
FREDERIC C. HAMILTON BOARD MEMBER	0.50	X						0.	0.	0.
GARY R. HEMINGER BOARD MEMBER	0.50	X						0.	0.	0.
KEVIN M. HOSTLER BOARD MEMBER	0.50	X						0.	0.	0.
PAUL HOWES BOARD MEMBER	0.50	X						0.	0.	0.
RAY L. HUNT BOARD MEMBER	0.50	X						0.	0.	0.
W. HERBERT HUNT BOARD MEMBER	0.50	X						0.	0.	0.
RAY R. IRANI BOARD MEMBER	0.50	X						0.	0.	0.
SIDNEY J. JANSMA BOARD MEMBER	0.50	X						0.	0.	0.
A.V. JONES BOARD MEMBER	0.50	X						0.	0.	0.
JAMES F. JUSTISS BOARD MEMBER	0.50	X						0.	0.	0.
<b>1b Total</b>								9,855,066.	0.	3,318,671.

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

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- 3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
- 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3	X	
4	X	
5		X

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
DANIEL J. EDELMAN, INC, 1875 EYE ST. NW, STE 900, WASHINGTON, DC 20006	ADVERTISING/PUB. RELATIONS	68,732,735.
CIGNA HEALTH CARE, CGLIC-BLOOMFIELD EASC, 5082 COLLECTION CTR DR, CHICAGO, IL 6	INSURANCE COVERAGE	5,590,932.
ADVOCATES INC DC, LTD., 11256 INGLISH MILL DR., GREAT FALLS, VA 22066	COALITION BUILDING	3,138,667.
COORDINATING RESEARCH COUNCIL, INC., 3650 MANSELL RD, STE 140, ALPHARETTA, GA 30222	RESEARCH	2,748,694.
MOODY INTERNATIONAL, INC 24900 PITKIN ROAD # 200, SPRING, TX 77386	CERTIFICATION AUDITS	2,016,543.

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

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

**Part VIII Statement of Revenue**

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
<b>Contributions, gifts, grants and other similar amounts</b>	<b>1 a</b> Federated campaigns	<b>1a</b>					
	<b>b</b> Membership dues	<b>1b</b>					
	<b>c</b> Fundraising events	<b>1c</b>					
	<b>d</b> Related organizations	<b>1d</b>					
	<b>e</b> Government grants (contributions)	<b>1e</b>					
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>					
	<b>g</b> Noncash contributions included in lines 1a-1f: \$						
	<b>h Total.</b> Add lines 1a-1f						
<b>Program Service Revenue</b>	<b>2 a</b> MEMBERSHIP DUES	Business Code 900099	153,594,124.	153,594,124.			
	<b>b</b> CERTIFICATION PROGRAM	900099	25,660,027.	25,660,027.			
	<b>c</b> CERTIFICATION FEES	541900	4083104.		4,083,104.		
	<b>d</b> MEETING REVENUE	900099	2994285.	2994285.			
	<b>e</b> SUBSCRIPTIONS	900099	1273200.	1273200.			
	<b>f</b> All other program service revenue	900099	175,317.	175,317.			
	<b>g Total.</b> Add lines 2a-2f		187,780,057.				
	<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts)		1783737.			1,783,737.
<b>4</b> Income from investment of tax-exempt bond proceeds							
<b>5</b> Royalties			8196319.	8196319.			
<b>6 a</b> Gross Rents		(i) Real	(ii) Personal				
		<b>d</b> Net rental income or (loss)					
<b>7 a</b> Gross amount from sales of assets other than inventory		(i) Securities	(ii) Other				
		163,267,587.	2,975.				
		<b>b</b> Less: cost or other basis and sales expenses		162,392,678.			
		<b>c</b> Gain or (loss)		874909.	2,975.		
<b>d</b> Net gain or (loss)			877,884.			877,884.	
<b>8 a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18		<b>a</b>					
		<b>b</b> Less: direct expenses	<b>b</b>				
		<b>c</b> Net income or (loss) from fundraising events					
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19	<b>a</b>						
	<b>b</b> Less: direct expenses	<b>b</b>					
	<b>c</b> Net income or (loss) from gaming activities						
<b>10 a</b> Gross sales of inventory, less returns and allowances	<b>a</b>						
	<b>b</b> Less: cost of goods sold	<b>b</b>					
	<b>c</b> Net income or (loss) from sales of inventory						
<b>Miscellaneous Revenue</b>		<b>Business Code</b>					
<b>11 a</b> MISCELLANEOUS REVENUE	900099	158,142.			158,142.		
<b>b</b>							
<b>c</b>							
<b>d</b> All other revenue							
<b>e Total.</b> Add lines 11a-11d		158,142.					
<b>12 Total revenue.</b> See instructions.		198,796,139.	191,893,272.	4,083,104.	2,819,763.		

**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	3,332,922.			
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	310,000.			
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	11,430,710.			
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	22,899,357.			
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,228,470.			
9 Other employee benefits	6,775,182.			
10 Payroll taxes	2,177,566.			
11 Fees for services (non-employees):				
a Management	7,584.			
b Legal	4,033,667.			
c Accounting	882,755.			
d Lobbying	8,308,616.			
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	227,185.			
g Other	29,941,359.			
12 Advertising and promotion	57,944,042.			
13 Office expenses	651,955.			
14 Information technology	352,815.			
15 Royalties				
16 Occupancy	4,420,113.			
17 Travel	2,158,699.			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	2,129,430.			
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,556,319.			
23 Insurance	354,729.			
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 UNRELATED BUSINESS INCOME	282,366.			
b STUDIES, RESEARCH, AND	14,886,800.			
c NET PENSION EXPENSE	7,812,798.			
d NET PERIODIC RETIREMENT	1,088,345.			
e POSTRETIREMENT BENEFIT	570,629.			
f All other expenses	490,091.			
25 Total functional expenses. Add lines 1 through 24f	186,254,504.			
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation ...				

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....		<b>1</b>	
	<b>2</b> Savings and temporary cash investments .....	36,393,474.	<b>2</b>	42,612,294.
	<b>3</b> Pledges and grants receivable, net .....		<b>3</b>	
	<b>4</b> Accounts receivable, net .....	4,200,863.	<b>4</b>	5,736,236.
	<b>5</b> Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....		<b>5</b>	
	<b>6</b> 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 .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....	52,638.	<b>8</b>	43,781.
	<b>9</b> Prepaid expenses and deferred charges .....	1,216,074.	<b>9</b>	2,323,862.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 15,609,432.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 6,734,372.		
	<b>11</b> Investments - publicly traded securities .....	9,695,705.	<b>10c</b>	8,875,060.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	60,088,168.	<b>11</b>	62,576,652.
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>12</b>	
	<b>14</b> Intangible assets .....		<b>13</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....		<b>14</b>	
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	111,646,922.	<b>15</b>	122,167,885.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	18,603,890.	<b>16</b>	22,867,262.
	<b>18</b> Grants payable .....		<b>17</b>	
	<b>19</b> Deferred revenue .....	16,169,068.	<b>18</b>	16,907,597.
	<b>20</b> Tax-exempt bond liabilities .....		<b>19</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>20</b>	
	<b>22</b> Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		<b>21</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>22</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>23</b>	
	<b>25</b> Other liabilities. Complete Part X of Schedule D .....	52,781,889.	<b>24</b>	39,301,730.
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 .....	87,554,847.	<b>25</b>	79,076,589.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets .....	24,092,075.	<b>26</b>	43,091,296.
	<b>28</b> Temporarily restricted net assets .....		<b>27</b>	
	<b>29</b> Permanently restricted net assets .....		<b>28</b>	
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
<b>33</b> <b>Total net assets or fund balances</b> .....	24,092,075.	<b>32</b>	43,091,296.	
<b>34</b> <b>Total liabilities and net assets/fund balances</b> .....	111,646,922.	<b>33</b>	122,167,885.	

**Part XI** Financial Statements and Reporting

**1** Accounting method used to prepare the Form 990:  Cash  Accrual  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? \_\_\_\_\_

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

**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? \_\_\_\_\_

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

**d** 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:

Separate basis  Consolidated basis  Both consolidated and separate 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? \_\_\_\_\_

**b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. \_\_\_\_\_

	Yes	No
<b>2a</b>		X
<b>2b</b>	X	
<b>2c</b>	X	
<b>3a</b>		X
<b>3b</b>		

Form 990 (2009)

**SCHEDULE C**  
**(Form 990 or 990-EZ)**

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

OMB No. 1545-0047

**2009**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

▶ **Complete if the organization is described below.**  
▶ **Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.**

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

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

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

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

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

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

Name of organization <b>AMERICAN PETROLEUM INSTITUTE</b>	Employer identification number <b>13-0433430</b>
---	---

**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

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

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

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

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

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

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

**For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule C (Form 990 or 990-EZ) 2009**  
LHA



**Part II-A** Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

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

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

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
<b>2a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> Grassroots lobbying expenditures					

**Part II-B** Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

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

**Part III-A** Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

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

**Part III-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes."

<b>1</b> Dues, assessments and similar amounts from members	<b>1</b>	153,594,124.
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
<b>a</b> Current year	<b>2a</b>	57271350.
<b>b</b> Carryover from last year	<b>2b</b>	21099052.
<b>c</b> Total	<b>2c</b>	78370402.
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	<b>3</b>	69117356.
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	<b>4</b>	9,253,046.
<b>5</b> Taxable amount of lobbying and political expenditures (see instructions)	<b>5</b>	

**Part IV** Supplemental Information

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

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**Schedule D**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

▶ **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.**

OMB No. 1545-0047

**2009**

**Open to Public Inspection**

Name of the organization **AMERICAN PETROLEUM INSTITUTE** Employer identification number **13-0433430**

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....		
2 Aggregate contributions to (during year) .....		
3 Aggregate grants from (during year) .....		
4 Aggregate value at end of year .....		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds 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? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

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

2 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 Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after 8/17/06 .....	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 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 section 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 acquisition, 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 organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

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

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

	Amount
1c	
1d	
1e	
1f	

c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

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.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

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

- a Board designated or quasi-endowment  \_\_\_\_\_ %
- 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:

	Yes	No
(i) unrelated organizations		
(ii) related organizations		
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?		

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

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		7,997,637.	1,994,161.	6,003,476.
d Equipment		6,381,005.	3,703,269.	2,677,736.
e Other		1,230,790.	1,036,942.	193,848.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				8,875,060.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Financial derivatives .....		
Closely-held equity interests .....		
Other .....		
<b>Total.</b> (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶		

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

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
<b>Total.</b> (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶		

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

(a) Description	(b) Book value
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 15.) ▶	

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

1. (a) Description of liability	(b) Amount
Federal income taxes	
<b>ACCRUED PENSION LIABILITY</b>	15,496,993.
<b>SUPPLEMENTAL BENEFIT PLANS</b>	3,346,053.
<b>POSTRETIREMENT BENEFITS OTHER THAN PENSION</b>	20,242,017.
<b>FEDERAL INCOME TAXES</b>	216,667.
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶	39,301,730.

2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	198,796,139.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	186,254,504.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	12,541,635.
4	Net unrealized gains (losses) on investments	4	-1,161,945.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	7,619,531.
9	Total adjustments (net). Add lines 4 through 8	9	6,457,586.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	18,999,221.

**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	197407009.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	-1,161,945.
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	-1,161,945.
3	Subtract line 2e from line 1	3	198568954.
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	227,185.
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	227,185.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	198796139.

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

1	Total expenses and losses per audited financial statements	1	186027319.
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	186027319.
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	227,185.
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	227,185.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	186254504.

**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, line 2; 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.

**PART XI, LINE 8 - OTHER ADJUSTMENTS:**

**PENSION-RELATED CHANGES OTHER THAN NET PERIODIC PENSION COSTS: 7619531.**

**FIN 48 FOOTNOTE: EFFECTIVE JANUARY 1, 2009, API APPLIED THE GUIDANCE IN THE FINANCIAL ACCOUNTING STANDARDS BOARD'S (FASB) ACCOUNTING STANDARDS CODIFICATION (ASC) 740, INCOME TAXES, ON THE RECOGNITION AND DISCLOSURE OF UNCERTAIN TAX POSITIONS. FASB ASC 740 REQUIRES THAT A TAX POSITION BE**

**Part XIV Supplemental Information** (continued)

RECOGNIZED OR DERECOGNLZED BASED ON A MORE-LIKELY-THAN-NOT THRESHOLD. THIS APPLIES TO POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. THIS APPLICATION OF THIS GUIDANCE HAD NO IMPACT ON API'S FINANCIAL STATEMENTS. API DOES NOT BELIEVE ITS FINANCIAL STATEMENTS INCLUDE ANY UNCERTAIN TAX POSITIONS. PRIOR TO JANUARY 1, 2009, API RECORDED A LIABILITY FOR INCOME TAXES WHEN IT BELIEVED THAT SUCH AN ACCRUAL WAS WARRANTED BASED ON CURRENT LAW OR GUIDANCE FROM THE APPROPRIATE TAXING AUTHORITIES. API BELIEVES IT IS NO LONGER SUBJECT TO U.S. FEDERAL, STATE AND LOCAL INCOME TAX EXAMINATIONS BY TAXING AUTHORITIES FOR YEARS BEFORE 2006.

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**Schedule F  
(Form 990)**

**Statement of Activities Outside the United States**

OMB No. 1545-0047

**2009**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

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

▶ Attach to Form 990. ▶ See separate instructions.

**Name of the organization** **AMERICAN PETROLEUM INSTITUTE** **Employer identification number** **13-0433430**

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

**1 For grantmakers.** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  **Yes**  **No**

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EAST ASIA AND THE PACIFIC	1	2	PROGRAM SERVICES	CERTIFICATION PROGRAMS	1,516,650.
EUROPE	0	0	GRANTS TO RECIPIENTS		310,000.
EUROPE	0	0	PROGRAM SERVICES	CERTIFICATION PROGRAMS	932,330.
MIDDLE EAST & N. AFRICA	0	0	PROGRAM SERVICES	CERTIFICATION PROGRAMS	107,096.
NORTH AMERICA	0	0	PROGRAM SERVICES	CERTIFICATION PROGRAMS	192,112.
RUSSIAN AND THE CIS	0	0	PROGRAM SERVICES	CERTIFICATION PROGRAMS	119,803.
SOUTH AMERICA	0	0	PROGRAM SERVICES	CERTIFICATION PROGRAMS	78,427.
SOUTH ASIA	0	0	PROGRAM SERVICES	CERTIFICATION PROGRAMS	114,075.
<b>Totals</b>	<b>1</b>	<b>2</b>			<b>3,370,493.</b>

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

Schedule F (Form 990) 2009



AMERICAN PETROLEUM INSTITUTE

13-0433430

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

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

Table with 9 columns: (a) Name of organization, (b) IRS code section and EIN, (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.

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

Form input fields with values 0 and 1

**AMERICAN PETROLEUM INSTITUTE**

13-0433430

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

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)

**Part IV** Supplemental Information

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

SCHEDULE F, PART I, LINE 2: ALL GRANTS ARE ASSIGNED AN API STAFF MEMBER AS THE CONTRACT OFFICER. THE CONTRACT'S OFFICER'S RESPONSIBILITIES INCLUDE MONITORING THE ACTIVITIES OF GRANTEEES, AS WELL AS RECEIPT AND REVIEW OF PERIODIC PROGRESS REPORTS.

SCHEDULE F, PART I, LINE 3: API'S CERTIFICATION PROGRAMS INCLUDE LICENSING OF MANUFACTURERS AND INDIVIDUALS THROUGHOUT THE WORLD. AUDITS OF MANUFACTURERS ARE CONDUCTED THROUGH INDEPENDENT CONTRACTORS, WHICH ARE PRIMARILY COORDINATED THROUGH A U.S.-BASED ENTITY. THE EVALUATION AND GRANT OF LICENSES IS CONDUCTED AT API'S HEADQUARTERS IN WASHINGTON, D.C. SIMILARLY, API'S INDIVIDUAL CERTIFICATION EXAMINATIONS ARE OFFERED AT VARIOUS WORLD-WIDE LOCATIONS, PROCTORED BY A U.S.-BASED INDEPENDENT CONTRACTOR. THE EXAMINATION RESULTS AND CERTIFICATIONS ARE ALSO EVALUATED AND AWARDED AT API'S HEADQUARTERS IN WASHINGTON, D.C.

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**

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

OMB No. 1545-0047

**2009**

**Open to Public  
Inspection**

Name of the organization

**AMERICAN PETROLEUM INSTITUTE**

Employer identification number  
**13-0433430**

**Part I General information on Grants and Assistance**

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALLIANCE TO SAVE ENERGY 1850 M STREET, NW, SUITE 600 WASHINGTON, DC 20036	52-1082991	501 C 3	100,000.	0.			ENERGY EDUCATION
AMERICAN CHEMISTRY COUNCIL INC 1300 WILSON BLVD ARLINGTON, VA 22209	53-0104410	501 C 6	24,000.	0.			GENERAL SUPPORT
AMERICAN COUNCIL FOR CAPITAL FORMATION - 1750 K STREET, NW, SUITE 400 - WASHINGTON, DC 20006	52-0991278	501 C 6	50,000.	0.			EVENT SPONSORSHIP
AMERICAN ENTERPRISE INSTITUTE 1150 SEVENTEETH STREET, NW WASHINGTON, DC 20036	53-0218495	501 C 3	25,000.	0.			GENERAL SUPPORT
AMERICAN GI FORUM OF THE UNITED STATES - 5551 VEGA DRIVE - FORT WORTH, TX 76133	77-0632503	501 C 3	25,000.	0.			EVENT SPONSORSHIP
AMERICAN INSTITUTE OF CHEMICAL ENGINEERS (AICHE) - 3 PARK AVE., 19TH STREET - NEW YORK, NY 10016	13-1623892	501 C 3	10,000.	0.			GENERAL SUPPORT

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

**3** Enter total number of other organizations

▶ **53.**  
▶ **20.**

Schedule I (Form 990) 2009

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

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

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

SCHEDULE I, PART I, LINE 2: ALL GRANTS ARE ASSIGNED AN API STAFF MEMBER AS THE CONTRACT OFFICER. THE CONTRACT OFFICER'S RESPONSIBILITIES INCLUDE MONITORING THE ACTIVITIES OF GRANTEES, AS WELL AS THE RECEIPT AND REVIEW OF PERIODIC PROGRESS REPORTS.

Name of the organization

Employer identification number  
**13-0433430**

**AMERICAN PETROLEUM INSTITUTE**

**Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)**

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN LEGISLATIVE EXCHANGE 1101 VERMONT AVE, NW, 11TH FLOOR WASHINGTON, DC 20005	52-0140979	501 C 3	40,000.	0.			EVENT SPONSORSHIP
AMERICAN TORT REFORM ASSOCIATION 1920 L STREET, NW, SUITE 1200 WASHINGTON, DC 20036	52-1464785	501 C 6	10,100.	0.			ENERGY EDUCATION
AMERICANS FOR PROSPERITY 1726 M STREET, NW, 10TH FLOOR WASHINGTON, DC 20036	75-3148958	501 C 4	43,500.	0.			ENERGY EDUCATION
AMERICANS FOR TAX REFORM 722 12TH STREET, NW, 4TH FLOOR WASHINGTON, DC 20005-3966	52-1403587	501 C 4	50,000.	0.			ENERGY EDUCATION
AMERICA'S WETLAND FOUNDATION 1055 ST. CHARLES AVENUE, SUITE 100 NEW ORLEANS, LA 70130	30-0192739	501 C 3	50,000.	0.			GENERAL SUPPORT
ARIZONA STATE UNIVERSITY P.O. BOX 879309 TEMPE, AZ 85287-9309	86-0196696	SEC 115	25,000.	0.			SUPPORT - PETRO-CHEMICAL RESEARCH
BUILDING & CONSTRUCTION TRADES DEPT., AFL-CIO - 815 16TH STREET, NW, SUITE 600 - WASHINGTON, DC 20006	53-0025755	501 C 5	10,000.	0.			EVENT SPONSORSHIP
BUSINESS INDUSTRY POLITICAL ACTION COMMITTEE (BIPAC) - 888 SIXTEENTH STREET, NW - WASHINGTON, DC 20006	13-1985476	501 C 3	250,000.	0.			ENERGY EDUCATION

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

Schedule I-1 (Form 990) 2009

Name of the organization

**AMERICAN PETROLEUM INSTITUTE**

Employer identification number  
**13-0433430**

**Part I** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CALIFORNIA CLIMATE ACTION REGISTRY (CLIMATE ACTION RESERVE) - 523 WEST 6TH STREET, SUITE 428 - LOS ANGELES, CA 90014	68-0477330	501 C 3	10,000.	0.			GENERAL SUPPORT
CITIZENS AGAINST GOVERNMENT WASTE 1301 CONNECTICUT AVENUE, NW, #400 WASHINGTON, DC 20036	52-1363952	501 C 3	25,000.	0.			GENERAL SUPPORT
COASTAL AMERICA FOUNDATION 100 MURON AVENUE BELLINGHAM, MA 02019	04-3408825	501 C 3	20,000.	0.			EVENT SPONSORSHIP
COLORADO STATE UNIVERSITY A203 ENGINEERING BUILDING, 1372 CAMPUS DELIVERY - FT. COLLINS, CO 80523-2002	23-7098397	501 C 3	10,000.	0.			SUPPORT - PETRO-CHEMICAL RESEARCH
COMMON GROUND ALLIANCE 1421 PRINCE STREE, SUITE 410 ALEXANDRIA, VA 22314	41-1984081	501 C 3	10,000.	0.			EVENT SPONSORSHIP
COMPETITIVE ENTERPRISE INSTITUTE 1899 L STREET, NW 12TH FLOOR WASHINGTON, DC 20036	52-1351785	501 C 3	25,000.	0.			GENERAL SUPPORT
CONGRESSIONAL COALITION ON ADOPTION INSTITUTE - 311 MASSACHUSETTS AVENUE, NW - WASHINGTON, DC 20002	54-2035617	501 C 3	10,000.	0.			GENERAL SUPPORT
CONGRESSIONAL HISPANIC CAUCUS INSTITUTE - 911 SECOND STREET, NE - WASHINGTON, DC 20002	52-1114225	501 C 3	55,000.	0.			EVENT SPONSORSHIP

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

Schedule I-1 (Form 990) 2009

Name of the organization

**AMERICAN PETROLEUM INSTITUTE**

Employer identification number  
**13-0433430**

**Part I** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CONGRESSIONAL SPORTSMEN'S FOUNDATION - 110 NORTH CAROLINA AVE, SE - WASHINGTON, DC 20003	52-1686163	501 C 3	10,000.	0.			EVENT SPONSORSHIP
CONSERVATIVE POLITICAL ACTION CONFERENCE - 1007 CAMERON STREET - ALEXANDRIA, VA 22314	52-1294680	501 C 3	20,000.	0.			EVENT SPONSORSHIP
CONSUMER ENERGY ALLIANCE 2211 NORFOLK STREET, SUITE 614 HOUSTON, TX 77098	26-1658339	501 C 4	67,500.	0.			EVENT SPONSORSHIP
ENERGY POLICY RESEARCH FOUNDATION, INC - 1201 WISCONSIN AVENUE - WASHINGTON, DC 20007	13-1512139	501 C 6	30,000.	0.			ENERGY POLICY RESEARCH
EVERYBODY WINS! DC 666 11TH STREET, NW, SUITE 1030 WASHINGTON, DC 20001	52-1938281	501 C 3	7,200.	0.			GENERAL SUPPORT
FOUNDATION FOR AMERICAN COMMUNICATIONS (FACS) - 85SOUTH GRAND AVENUE - PASADENA, CA 91105	51-0198837	501 C 3	10,000.	0.			GENERAL SUPPORT
FREEDOM WORKS 601 PENN AVE NW NORTH BLDG #700 WASHINGTON, DC 20004	52-1349353	501 C 4	55,000.	0.			GENERAL SUPPORT
GROUND WATER PROTECTION COUNCIL 7728 EAST 98TH PLACE TULSA, OK 74133	73-1210455	501 C 6	47,500.	0.			ENERGY POLICY RESEARCH

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

Schedule I-1 (Form 990) 2009



Name of the organization

Employer identification number  
**13-0433430**

**AMERICAN PETROLEUM INSTITUTE**

**Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)**

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HEALTH EFFECTS INSTITUTE 101 FEDERAL STREET, SUITE 500 BOSTON, MA 02110-1817	04-2708045	501 C 3	380,000.	0.			PETRO-CHEMICAL HEALTH EFFECT RESEARCH
HISPANIC ALLIANCE FOR PROSPERITY INSTITUTE - 1101 PENNSYLVANIA AVENUE, NW, 7TH FLOOR - WASHINGTON, DC 20004	20-0803586	501 C 3	25,000.	0.			GENERAL SUPPORT
HISPANIC ASSOCIATION ON CORPORATE RESPONSIBILITY - 1444 I STREET, NW, SUITE 850 - WASHINGTON, DC 20005	85-0356947	501 C 3	15,000.	0.			EVENT SPONSORSHIP
INDEPENDENT PETROLEUM ASSOCIATION OF AMERICA - 1201 15TH STREET, NW, SUITE 300 - WASHINGTON, DC 20005	73-0296927	501 C 6	60,000.	0.			ENERGY EDUCATION
INDEPENDENT PETROLEUM ASSOCIATION OF MOUNTAIN STATES - 410 SEVENTEENTH STREET, SUITE 700 - DENVER, CO 80202	84-0700841	501 C 6	61,000.	0.			ENVIRONMENTAL RESEARCH
INSTITUTE FOR ENERGY RESEARCH 1100 H STREET, NW, SUITE 400 WASHINGTON, DC 20005	76-0149778	501 C 3	50,000.	0.			ENERGY POLICY RESEARCH
INTERNATIONAL CONSERVATION CAUCUS FOUNDATION - 3250 PROSPECT ST., NW - WASHINGTON, DC 20007	83-0449176	501 C 3	50,000.	0.			GENERAL SUPPORT
ENV. COUNCIL OF THE STATES/I TRC 444 N. CAPITOL STREET, NW, #445 WASHINGTON, DC 20001	36-3962169	501 C 3	15,000.	0.			SUPPORT FOR THE ITRC BIO-BASED FUELS TEAM

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

Schedule I-1 (Form 990) 2009

Name of the organization

**AMERICAN PETROLEUM INSTITUTE**

Employer identification number  
**13-0433430**

**Part I** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II).

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE KEYSTONE CENTER 1628 STS. JOHN ROAD KEYSTONE, CO 80435	84-0688506	501 C 4	80,000.	0.			ENERGY EDUCATION
MASSACHUSETTS INSTITUTE OF TECHNOLOGY (MIT) - 77 MASSACHUSETTS AVENUE - CAMBRIDGE, MA 02139	04-2103594	501 C 3	33,000.	0.			ENERGY EDUCATION
MICHIGAN STATE UNIVERSITY 300 SPARTAN WAY EAST LANSING, MI 48824-1005	38-6005984	501 C 3	50,000.	0.			ENVIRONMENTAL RESEARCH
MONTANA DEPARTMENT OF ENVIRONMENTAL QUALITY (MDEQ) - 1100 NORTH LAST CHANCE GULCH - HELENA, MT 59620-0901	81-0302402	SEC 115	34,974.	0.			PETRO-CHEMICAL RESEARCH
NATIONAL BLACK CHAMBER OF COMMERCE 1350 CONNECTICUT AVE NW #405 WASHINGTON, DC 20036	35-1889294	501 C 3	45,000.	0.			GENERAL SUPPORT
NATIONAL BOARD OF PROFESSIONAL TEACHING STANDARDS - 1525 WILSON BLVD., SUITE 500 - ARLINGTON, VA 22209-2451	52-1512323	501 C 3	15,000.	0.			GENERAL SUPPORT
NATIONAL FOREIGN TRADE COUNCIL 1625 K STREET, NW, SUITE 200 WASHINGTON, DC 20006	13-5266965	501 C 6	15,000.	0.			EVENT SPONSORSHIP
NATIONAL MARINE SANCTUARY FOUNDATION - 8601 GEORGIA AVE, SUITE 501 - SILVER SPRING, MD 20910	94-3370994	501 C 3	10,000.	0.			ENERGY EDUCATION

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Schedule I-1 (Form 990) 2009

Name of the organization

**AMERICAN PETROLEUM INSTITUTE**

Employer identification number  
**13-0433430**

**Part I** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEBRASKA ETHANOL BOARD 301 CENTENNIAL MALL SOUTH #4 LINCOLN, NE 68501	47-0491233	SEC 115	26,000.	0.			PETRO-CHEMICAL RESEARCH
NM ASSOCIATION CONSERVATIVE DISTRICTS - 163 TRAIL CANYON ROAD - CARLSBAD, NM 88220	85-0411367	501 C 3	50,000.	0.			GENERAL SUPPORT
NORTH AMERICAN METALS COUNCIL 1203 19TH ST NW #300 WASHINGTON, DC 20036-2401	20-1320884	501 C 6	7,000.	0.			PETRO-CHEMICAL RESEARCH
NORTH CAROLINA AGRICULTURAL FOUNDATION - NC STATE BOX 7645 - RALEIGH, NC 27695	56-6049304	501 C 3	28,000.	0.			ENVIRONMENTAL RESEARCH
NORTHWESTERN UNIVERSITY SCHOOL OF LAW - 357 EAST CHICAGO AVENUE - CHICAGO, IL 60611	36-2167817	501 C 3	40,000.	0.			CIVIL JUSTICE ISSUES
NICHOLLS STATE UNIVERSITY FOUNDATION - P.O. BOX 2062 - THIBODEAUS, LA 70310	72-6031425	501 C 3	10,000.	0.			EVENT SPONSORSHIP
OIL AND NATURAL GAS INDUSTRY LABOR MANAGEMENT COMMITTEE - 101 N UNION STREET, SUITE 305 - ALEXANDRIA, VA 22134	27-0567842	501 C 6	292,500.	0.			GENERAL SUPPORT
PA CHAMBER OF BUSINESS & INDUSTRY 417 WALNUT STREET HARRISBURG, PA 17101	23-0961100	501 C 6	5,333.	0.			EVENT SPONSORSHIP

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

Schedule I-1 (Form 990) 2009

**SCHEDULE I-1  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)  
▶ Attach to Form 990 to list additional information for  
Schedule I (Form 990), Part II or Part III.**

OMB No. 1545-0047

**2009**  
**Open to Public  
Inspection**

Name of the organization

**AMERICAN PETROLEUM INSTITUTE**

Employer identification number  
**13-0433430**

**Part I** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
REBUILDING TOGETHER NATIONAL OFFICE - 1536 16TH STREET, NW - WASHINGTON, DC 20036-1402	52-1585880	501 C 3	100,000.	0.			ENERGY EFFICIENT HOMES
REGENTS OF UNIVERSITY OF CALIFORNIA - 1111 FRANKLIN STREET, 10 FLOOR - OAKLAND, CA 94607-5201	94-3067788	501 C 3	30,000.	0.			ENERGY EDUCATION
SAN ANTONIO HISPANIC CHAMBER 318 WEST HOUSTON STREET, SUITE 300 SAN ANTONIO, TX 78205	74-2370616	501 C 3	6,000.	0.			EVENT SPONSORSHIP
SMALL BUSINESS AND ENTERPRENEURSHIP COUNCIL - 2944 HUNTER MILL ROAD, SUITE 204 - OAKTON, VA 22124	36-3756240	501 C 4	25,000.	0.			GENERAL SUPPORT
STANFORD UNIVERSITY TERMAN ENGINEERING CENTER, ROOM 452 STANFORD, CA 94305-4026	94-1156365	501 C 3	15,000.	0.			EVENT SPONSORSHIP
STRONGER 13308 N. MACARTHUR OKLAHOMA CITY, OK 73142	31-1666039	501 C 3	100,000.	0.			GENERAL SUPPORT
AMERICAN CONSERVATIVE UNION 1007 CAMERON STREET ALEXANDRIA, VA 22134	52-0810813	501 C 3	25,000.	0.			GENERAL SUPPORT
THE ANNAPOLIS CENTER FOR SCIENCE-BASED PUBLIC POLICY - 410 ROWE BOULEVARD - ANNAPOLIS, MD 21401	52-1759134	501 C 3	40,000.	0.			ENERGY EDUCATION

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

Schedule I-1 (Form 990) 2009

Name of the organization

**AMERICAN PETROLEUM INSTITUTE**

Employer identification number  
**13-0433430**

**Part I** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE BRYCE HARLOW FOUNDATION 1701 PENNSYLVANIA AVE NW #400 WASHINGTON, DC 20006	52-1266620	501 C 3	7,500.	0.			EVENT SPONSORSHIP
THE FUND FOR PEACE 1720 EYE STREET, 7TH FLOOR WASHINGTON, DC 20006	13-2550978	501 C 3	15,000.	0.			EVENT SPONSORSHIP
THE JAMES MADISON INSTITUTE 2017 DELTA BOULEVARD, SUITE 102 TALLAHASSEE, FL 32303	59-2811908	501 C 3	30,000.	0.			GENERAL SUPPORT
THE SIXTY PLUS ASSOCIATION 515 KING STREET, SUITE 315 ALEXANDRIA, VA 22314	54-1564919	501 C 4	35,000.	0.			ENERGY EDUCATION
UNIV. OF HOUSTON-CLEAR LAKE 2700 BAY AREA BLVD HOUSTON, TX 77058	74-6001399	SEC 115	19,000.	0.			ENERGY EDUCATION
UNIVERSITY OF CALIFORNIA, DAVIS 1 SHEILDS AVENUE DAVIS, CA 95616	94-6036494	SEC 115	45,000.	0.			PETRO-CHEMICAL HEALTH EFFECT RESEARCH
UNIVERSITY OF ILLINOIS AT URBANA-CHAMPAIGN - 205 NORTH MATHEWS AVENUE - URBANA, IL 61801	37-6000511	SEC 115	30,000.	0.			PETRO-CHEMICAL RESEARCH
UNIVERSITY OF OKLAHOMA 66 PARRINGTON OVAL NORMAN, OK 73019	73-6017987	SEC 115	27,620.	0.			PETRO-CHEMICAL RESEARCH

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Schedule I-1 (Form 990) 2009

Name of the organization

**AMERICAN PETROLEUM INSTITUTE**

Employer identification number  
**13-0433430**

**Part I** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF ROCHESTER 575 ELMWOOD AVENUE, BOX EHSC ROCHESTER, NY 14642	16-0743209	SEC 115	23,695.	0.			SUPPORT - EDUCATIONAL
US CHAMBER OF COMMERCE P.O. BOX 1200 WASHINGTON, DC 20013	53-0045720	501 C 6	136,500.	0.			EVENT SPONSORSHIP
WESTERN GOVERNORS' ASSOCIATION 1600 BROADWAY, SUITE 1700 DENVER, CO 80202	84-0747227	501 C 6	35,000.	0.			ENERGY EDUCATION

**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Compensation Information**

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

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

**2009**

**Open to Public Inspection**

Name of the organization

**AMERICAN PETROLEUM INSTITUTE**

Employer identification number

**13-0433430**

**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use          |
| <input checked="" type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence          |
| <input checked="" type="checkbox"/> Tax indemnification and gross-up payments | <input checked="" 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)          |

**b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

**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?

**3** Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

- |   |   |
|---|---|
| <input type="checkbox"/> Compensation committee                         | <input checked="" type="checkbox"/> Written employment contract                     |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input checked="" type="checkbox"/> Form 990 of other organizations     | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** 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.

**Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.**

**5** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" to line 5a or 5b, describe in Part III.

**6** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" to line 6a or 6b, describe in Part III.

**7** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

**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

**9** If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b	X	
2	X	
4a	X	
4b	X	
4c		X
5a		
5b		
6a		
6b		
7		
8		
9		

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

Schedule J (Form 990) 2009

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

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

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

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) 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				
JACK N. GERARD	(i) 2053843.	400,000.	83,910.	1,741,540.	30,586.	4,309,879.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
JAMES E. FORD	(i) 418,021.	108,000.	117,789.	267,253.	13,200.	924,263.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
JIM C. CRAIG	(i) 357,399.	101,500.	150,778.	260,725.	19,257.	889,659.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
BRENDA S. HARGETT	(i) 339,779.	75,000.	81,721.	78,549.	32,503.	607,552.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
MICHELE E. RINN	(i) 168,370.	38,500.	20,606.	15,692.	26,097.	269,265.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
HARRY M. NG	(i) 286,497.	62,500.	62,378.	51,128.	19,496.	481,999.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
ROBERT L. GRECO	(i) 282,313.	55,000.	88,278.	49,716.	32,503.	507,810.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
DOUGLAS M. MORRIS	(i) 240,929.	38,500.	40,214.	88,823.	32,644.	441,110.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
JOHN D. MODINE	(i) 214,897.	29,000.	3,224.	28,580.	18,422.	294,123.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
ERIN P. THOMPSON	(i) 179,397.	35,000.	19,183.	13,887.	9,203.	256,670.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
ALVIS TRUMAN HUNT	(i) 271,784.	48,000.	66,175.	138,263.	26,512.	550,734.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
MICHAEL L. PLATNER	(i) 225,529.	29,500.	6,081.	54,276.	32,148.	347,534.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
JOHN C. FELMY	(i) 222,980.	21,000.	2,402.	37,621.	18,825.	302,828.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
DREW P. COBBS	(i) 206,111.	16,000.	2,431.	52,539.	29,964.	307,045.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
JOHN P. KEREKES	(i) 204,885.	12,000.	4,062.	73,649.	25,070.	319,666.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
BYRON M. CAVANEY	(i) 0.	0.	2363600.	0.	0.	2,363,600.	2,363,600.
	(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.

PART I, LINE 1A: FIRST CLASS OR CHARTER TRAVEL- FIRST CLASS AIR TRAVEL IS LIMITED TO EXECUTIVE STAFF MEMBERS. OTHER STAFF MEMBERS MAY TRAVEL FIRST OR BUSINESS CLASS ONLY WHEN ACCOMPANYING AN EXECUTIVE STAFF MEMBER, A MEMBER COMPANY EXECUTIVE OR GOVERNMENTAL OFFICIAL WHO TRAVELS FIRST CLASS OR BUSINESS CLASS, OR, FOR INTERNATIONAL FLIGHTS, WHEN EXTENUATING CIRCUMSTANCES JUSTIFYING TRAVELING BUSINESS CLASS. FIRST OR BUSINESS CLASS AIR TRAVEL MUST BE APPROVED IN ADVANCE BY AN EXECUTIVE STAFF MEMBER, AND THE EMPLOYEE MUST PROVIDE THE JUSTIFICATION ON THE EXPENSE REPORT. FIRST CLASS TRAIN PASSAGE IS AN ACCEPTABLE ALTERNATIVE TO COACH AIR FARES OF EQUAL OR GREATER VALUE. IT'S NOT API'S PRACTICE TO CHARTER TRAVEL.

TRAVEL FOR COMPANIONS- INSTANCES IN WHICH A SPOUSE ACCOMPANIES AN EMPLOYEE TRAVELING ON BUSINESS AT API EXPENSE ARE LIMITED AND APPROVED IN ADVANCE. IN SUCH AUTHORIZED CASES, UNLESS THE STRICT LEGAL DEFINITION OF BUSINESS PURPOSE IS MET, THE REIMBURSEMENT IS TREATED AS TAXABLE INCOME TO THE EMPLOYEE.

TAX IDEMNIFICATION AND GROSS UP PAYMENTS- FOR EMPLOYEES WHO QUALIFY TO PARTICIPATE IN THE NON-QUALIFIED RETIREMENT INCOME PLAN, API PAYS TAXES DUE

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.

ON THE ACCRUED BENEFITS AS THEY ARE AWARDED TO THE PARTICIPANTS. THESE TAX PAYMENTS ARE TREATED AS AN ADVANCE AND NETTED FROM THE ACCRUED BENEFITS TO THE PARTICIPANTS UPON DISTRIBUTION.

HEALTH OR SOCIAL CLUB DUES OR INITIATION FEES- REIMBURSEMENT OF CLUB DUES TO AN EMPLOYEE FOR MEMBERSHIP IN ANY CLUB ORGANIZED FOR PLEASURE, RECREATION, OR OTHER SOCIAL PURPOSE (I.E., COUNTRY CLUBS, LUNCHEON CLUBS, AND AIRLINE AND HOTEL CLUBS) IS LIMITED AND REQUIRES EXECUTIVE STAFF APPROVAL. EMPLOYEES WHO HAVE BEEN REIMBURSED FOR CLUB DUES MUST ANNUALLY ACCOUNT FOR THEIR BUSINESS USE, AND NON-BUSINESS USE IS TREATED AS TAXABLE INCOME TO THE EMPLOYEE. API OFFERS ALL WASHINGTON, D.C. EMPLOYEES AN OPPORTUNITY TO JOIN A LOCAL HEALTH CLUB AT A DISCOUNTED RATE. API PAYS A PORTION OF THE DUES (\$13.42 PER SEMI-MONTHLY PAY PERIOD) AND TREATS THIS PORTION AS TAXABLE INCOME TO THE EMPLOYEE.

PART I, LINE 4A: BYRON M. CAVANEY JR.- RETENTION AGREEMENT- \$2,363,600

LINE 4B: PARTICIPANTS IN THE AMERICAN PETROLEUM INSTITUTE SUPPLEMENTAL

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.

BENEFITS PLAN RECEIVED CONTRIBUTIONS IN 2009 AS FOLLOWS:

FORD, JAMES E. - \$120,120

CRAIG, JIM C. - \$151,443

HARGETT, BRENDA S. - \$91,867

RINN, MICHELE E. - \$2,048

NG, HARRY M. - \$75,619

GRECO, ROBERT L. - \$100,656

MORRIS, DOUGLAS W. - \$55,048

PLATNER, MICHAEL L. - \$21,431

MODINE, JOHN D. - \$4,179

HUNT, JR., ALVIS T. - \$77,235

FELMY, JOHN C. - \$3,360

**SCHEDULE J-2**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Continuation Sheet for Form 990**

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

▶ See the Instructions for Form 990.

OMB No. 1545-0047

**2009**

**Open to Public Inspection**

Name of the Organization

**AMERICAN PETROLEUM INSTITUTE**

Employer Identification number

**13-0433430**

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
PETER D. KINNEAR BOARD MEMBER	0.50	X						0.	0.	0.
GEORGE KIRKLAND BOARD MEMBER	0.50	X						0.	0.	0.
VIRGINIA B. LAZENBY BOARD MEMBER	0.50	X						0.	0.	0.
DAVID J. LESAR BOARD MEMBER	0.50	X						0.	0.	0.
STEVE MALCOLM BOARD MEMBER	0.50	X						0.	0.	0.
ANTHONY MAYER BOARD MEMBER	0.50	X						0.	0.	0.
JAMES P. MCGREGOR BOARD MEMBER	0.50	X						0.	0.	0.
LAMAR MCKAY BOARD MEMBER	0.50	X						0.	0.	0.
JOHN MILLER BOARD MEMBER	0.50	X						0.	0.	0.
MERRILL A. (PETE) MILLER BOARD MEMBER	0.50	X						0.	0.	0.
BJOURN MOLLER BOARD MEMBER	0.50	X						0.	0.	0.
JACK B. MOORE BOARD MEMBER	0.50	X						0.	0.	0.
JAMES J. MULVA BOARD MEMBER	0.50	X						0.	0.	0.
J. LARRY NICHOLS CHAIRMAN OF THE BOARD	0.50	X		X				0.	0.	0.
JAMES E. NIELSON BOARD MEMBER	0.50	X						0.	0.	0.
MARVIN ODUM BOARD MEMBER	0.50	X						0.	0.	0.
DAVID J. O'REILY BOARD MEMBER	0.50	X						0.	0.	0.
ROBERT (BOBBY) L. PARKER BOARD MEMBER	0.50	X						0.	0.	0.
LOUIS A. RASPINO BOARD MEMBER	0.50	X						0.	0.	0.
CORBIN J. ROBERTSON BOARD MEMBER	0.50	X						0.	0.	0.

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

Schedule J-2 (Form 990) 2009

**SCHEDULE J-2**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Continuation Sheet for Form 990**

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

OMB No. 1545-0047

**2009**  
**Open to Public Inspection**

Name of the Organization **AMERICAN PETROLEUM INSTITUTE** Employer Identification number **13-0433430**

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
DAVID SEATON BOARD MEMBER	0.50	X					0.	0.	0.	
KATHLEEN SHANAHAN BOARD MEMBER	0.50	X					0.	0.	0.	
REX W. TILLERSON BOARD MEMBER	0.50	X					0.	0.	0.	
HANK A. TRUE BOARD MEMBER	0.50	X					0.	0.	0.	
JOHN S. WATSON BOARD MEMBER	0.50	X					0.	0.	0.	
DAVID W. WILLIAMS BOARD MEMBER	0.50	X					0.	0.	0.	
DAVID M. WOOD BOARD MEMBER	0.50	X					0.	0.	0.	
JOHN M. YEARWOOD BOARD MEMBER	0.50	X					0.	0.	0.	
JACK N. GERARD PRESIDENT AND CEO	40.00	X		X			2,537,753.	0.	1,772,126.	
JAMES E. FORD VICE PRESIDENT	40.00			X			643,810.	0.	280,453.	
JIM C. CRAIG VICE PRESIDENT	40.00			X			609,677.	0.	279,982.	
BRENDA S. HARGETT VICE PRESIDENT	40.00			X			496,500.	0.	111,052.	
MICHELE E. RINN CORPORATE SEC & GRP DIR	40.00			X			227,476.	0.	41,789.	
HARRY M. NG GENERAL COUNSEL & GRP DI	40.00			X			411,375.	0.	70,624.	
ROBERT L. GRECO GROUP DIRECTOR	40.00				X		425,591.	0.	82,219.	
DOUGLAS M. MORRIS GROUP DIRECTOR	40.00				X		319,643.	0.	121,467.	
JOHN D. MODINE DIRECTOR	40.00				X		247,121.	0.	47,002.	
ERIN P. THOMPSON DIRECTOR	40.00				X		233,580.	0.	23,090.	
ALVIS TRUMAN HUNT DIRECTOR	40.00					X	385,959.	0.	164,775.	
MICHAEL L. PLATNER DIRECTOR	40.00					X	261,110.	0.	86,424.	

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

Schedule J-2 (Form 990) 2009

**SCHEDULE J-2**  
**(Form 990)**

**Continuation Sheet for Form 990**

OMB No. 1545-0047

**2009**  
**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

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

▶ **See the Instructions for Form 990.**

Name of the Organization **AMERICAN PETROLEUM INSTITUTE** Employer Identification number **13-0433430**

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
JOHN C. FELMY CHIEF ECONOMIST	40.00					X		246,382.	0.	56,446.
DREW P. COBBS STATE OFFICE EXECUTIVE D	40.00					X		224,542.	0.	82,503.
JOHN P. KERESKES STATE OFFICE EXECUTIVE D	40.00					X		220,947.	0.	98,719.
BYRON M. CAVANEY FORMER PRES/CEO	0.00						X	2,363,600.	0.	0.

SCHEDULE L  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

# Transactions With Interested Persons

▶ Complete if the organization answered  
"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,  
or Form 990-EZ, Part V, line 38a or 40b.  
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

# 2009

Open To Public  
Inspection

Name of the organization **AMERICAN PETROLEUM INSTITUTE** Employer identification number **13-0433430**

### Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ..... ▶ \$ \_\_\_\_\_

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ..... ▶ \$ \_\_\_\_\_

### Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a.

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No

Total ..... ▶ \$ \_\_\_\_\_

### Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount and type of assistance

### Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
VELMA D. MORRIS	SPOUSE OF API KEY E	91,941.	EMPLOYMENT		X

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

Schedule L (Form 990 or 990-EZ) 2009

SEE SCHEDULE O FOR SCHEDULE L CONTINUATIONS

**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

AMERICAN PETROLEUM INSTITUTE

Employer identification number

13-0433430

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

THE MISSION OF THE AMERICAN PETROLEUM INSTITUTE (API) IS TO INFLUENCE  
PUBLIC POLICY IN SUPPORT OF A STRONG, VIABLE U.S. OIL AND NATURAL GAS  
INDUSTRY ESSENTIAL TO MEET THE ENERGY NEEDS OF CONSUMERS IN AN  
EFFICIENT, ENVIRONMENTALLY RESPONSIBLE MANNER.

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

MAINTAINING QUALITY-THE INCREASINGLY INTERNATIONAL NATURE OF THE  
PETROLEUM BUSINESS IS EVIDENT IN API'S APPROACH TO CERTIFYING THAT  
PRODUCTS MEET THE INDUSTRY'S EXACTING STANDARDS OF QUALITY. SINCE  
1924, API HAS LICENSED OIL FIELD EQUIPMENT MANUFACTURERS TO USE THE API  
MONOGRAM, RECOGNIZED AS A MARK OF QUALITY AROUND THE WORLD. API  
LICENSES MOTOR OILS FOR USE IN BOTH GASOLINE AND DIESEL ENGINES. API  
ALSO CERTIFIES INSPECTORS OF STORAGE TANKS, PRESSURE VESSELS, AND  
PIPING.

EDUCATION- API ORGANIZES SEMINARS, WORKSHOPS AND SYMPOSIA ON ISSUES  
VITAL TO THE INDUSTRY'S LIVELIHOOD. IT PROVIDES TRAINING MATERIALS  
THAT HELP PROFESSIONALS IN THE OIL AND GAS BUSINESS MEET REGULATORY  
REQUIREMENTS AND INDUSTRY STANDARDS.

FORM 990, PART VI, SECTION A, LINE 1: API'S EXECUTIVE COMMITTEE CONSISTS  
OF 10 MEMBERS OF THE BOARD. MEMBERS INCLUDE THE API CHAIRMAN, TREASURER OF  
THE BOARD, WITH REPRESENTATION OF THE TOP SIX DUES-PAYING MEMBERS, AND THE  
REMAINING FOUR MEMBERS CHOSEN PRINCIPALLY FROM THE LARGEST DUES-PAYING  
MEMBERS, INCLUDING AS MANY AS TWO INDEPENDENT PETROLEUM PRODUCERS. THE

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

Schedule O (Form 990) 2009

932211  
02-03-10



**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

AMERICAN PETROLEUM INSTITUTE

Employer identification number

13-0433430

EXECUTIVE COMMITTEE HAS THE AUTHORITY TO EXERCISE ALL OF THE POWERS OF THE BOARD OF DIRECTORS IN THE ABSENCE OF ACTION BY THE BOARD, EXCEPT TO AMEND THE BYLAWS OR AS OTHERWISE LIMITED BY LAW. ITS RESPONSIBILITIES INCLUDE LONG-RANGE PLANNING, PROGRAM AND BUDGET DEVELOPMENT, OVERSIGHT, AND ADMINISTRATION.

FORM 990, PART VI, SECTION A, LINE 2: BUSINESS RELATIONSHIP: ALBRECHT, WILLIAM E.; CARRIG, JOHN A.; CAZALOT, CLARENCE P.; DOLAN, MICHAEL J.; HEMINGER, GARY R.; IRANI, RAY R.; KIRKLIND, GEORGE; MULVA, JAMES J.; O'REILLY, DAVID J.; TILLERSON, REX W.; WATSON, JOHN S.  
FAMILY RELATIONSHIP: HUNT, RAY L.; HUNT, W. HERBERT

FORM 990, PART VI, SECTION A, LINE 6: API IS A TRADE ASSOCIATION WITH MEMBERSHIP DRAWN FROM THE OIL AND NATURAL GAS INDUSTRY. AS DESCRIBED BELOW, API'S MEMBERS PARTICIPATE IN THE ELECTION OF THE BOARD. REGULAR ELECTED BOARD MEMBERS HAVE FULL VOTING RIGHTS. API'S PRESIDENT IS AN EX OFFICIO VOTING MEMBER OF THE BOARD. OTHER EX OFFICIO MEMBERS DO NOT HAVE VOTING RIGHTS. HONORARY DIRECTORS HAVE NO VOTING RIGHTS.

FORM 990, PART VI, SECTION A, LINE 7A: ONE-HALF OF THE BOARD MEMBERS IN A GIVEN YEAR ARE ELECTED BY THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 11: API'S FORM 990 WAS PREPARED BY API STAFF AND REVIEWED BY ITS EXTERNAL ACCOUNTING FIRM. PRIOR TO FILING, THE FORM 990 WAS INCLUDED WITH THE MATERIALS FOR THE FINANCE COMMITTEE'S ANNUAL MEETING IN SEPTEMBER 2010, AND REVIEWED DURING THE MEETING. A COPY OF THE

**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

AMERICAN PETROLEUM INSTITUTE

Employer identification number

13-0433430

FORM 990 WAS PROVIDED TO THE EXECUTIVE COMMITTEE PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C: API'S STANDARDS OF CONDUCT POLICY INCLUDES PROVISIONS RELATED TO AVOIDING ANY ACT THAT MAY RESULT IN A CONFLICT OF INTEREST. ON AN ANNUAL BASIS, ALL EMPLOYEES ARE ASKED TO CONFIRM THEIR COMPLIANCE WITH THE STANDARDS OF CONDUCT POLICY. ANY EMPLOYEE WHO IS AWARE OF A VIOLATION OF THIS POLICY MUST TAKE APPROPRIATE ACTION SO THAT THE VIOLATION IS PROMPTLY ADDRESSED. THIS MAY INCLUDE REPORTING A VIOLATION TO AN EXECUTIVE STAFF MEMBER OR TO AN EXTERNALLY-OPERATED ETHICS HOTLINE. ALL REPORTS ARE ASSIGNED TO AN APPROPRIATE EXECUTIVE STAFF MEMBER FOR INVESTIGATION AND RESOLUTION AND A REPORT OF ALL INCIDENTS ARE PROVIDED TO THE FINANCE COMMITTEE EACH YEAR (IN 2009 CALLED AUDIT COMMITTEE). THE BOARD OF DIRECTORS ADOPTED A CONFLICT OF INTEREST POLICY IN 2008 THAT REQUIRES FULL DISCLOSURE OF ALL ACTUAL AND POTENTIAL CONFLICTS. THE DISINTERESTED MEMBERS OF THE API EXECUTIVE COMMITTEE SHALL MAKE A DETERMINATION AS TO WHETHER A CONFLICT EXISTS AND WHAT SUBSEQUENT ACTION IS APPROPRIATE (IF ANY). A COPY OF THE POLICY IS PROVIDED TO ALL BOARD MEMBERS WHO ARE REQUESTED TO COMPLETE AND SIGN AN ACKNOWLEDGMENT AND DISCLOSURE FORM.

FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION FOR API'S PRESIDENT & CEO, OTHER OFFICERS, AND KEY EMPLOYEES ARE REVIEWED AND APPROVED BY THE EXECUTIVE COMMITTEE ON AN ANNUAL BASIS, BASED ON PERFORMANCE REVIEWS, EXTERNAL COMPARABLE DATA OBTAINED FROM CONSULTANTS, AND OTHER RELEVANT INFORMATION. THE PRESIDENT & CEO'S COMPENSATION IS BASED ON A WRITTEN CONTRACT APPROVED BY THE EXECUTIVE COMMITTEE. A REVIEW WAS CONDUCTED IN

**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 **AMERICAN PETROLEUM INSTITUTE** Employer identification number **13-0433430**

2010.

FORM 990, PART VI, SECTION C, LINE 19: NO DOCUMENTS AVAILABLE TO THE  
PUBLIC.

FORM 990, PART XI, LINE 2C  
THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: VELMA D. MORRIS

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

SPOUSE OF API KEY EMPLOYEE DOUGLAS W. MORRIS

(C) AMOUNT OF TRANSACTION \$ 91941.

(D) DESCRIPTION OF TRANSACTION: EMPLOYMENT ARRANGEMENT - COMPENSATED FOR  
HER POSITION AS THE GROUP ADMINISTRATOR FOR THE COMMUNICATIONS  
DEPARTMENT.

(E) SHARING OF ORGANIZATION REVENUES? = NO

FORM 990, PART VI, LINE 10B

API OPERATES STATE PETROLEUM COUNCILS LOCATED IN VARIOUS STATE  
CAPITALS. THESE ARE NOT SEPARATE LEGAL ENTITIES, BUT OPERATE AS BRANCH  
OFFICES OF API UNDER LOCAL TRADE NAMES. THERE ARE ALSO SEVERAL  
UNRELATED LOCAL CHAPTERS THAT EXIST THAT MAY USE THE API NAME BUT THEY  
ARE SEPARATE LEGAL ENTITIES FROM API.

Form **990**

**Return of Organization Exempt From Income Tax**

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

OMB No. 1545-0047

**2010**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

**A** For the 2010 calendar year, or tax year beginning and ending

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

**C** Name of organization: **AMERICAN PETROLEUM INSTITUTE**  
 Doing Business As  
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite: **1220 L STREET, NW**  
 City or town, state or country, and ZIP + 4: **WASHINGTON, DC 20005**  
**F** Name and address of principal officer: **JACK N. GERARD**  
**SAME AS C ABOVE**

**D** Employer identification number: **13-0433430**

**E** Telephone number: **(202) 682-8000**

**G** Gross receipts \$: **322,364,936.**

**H(a)** Is this a group return for affiliates?  Yes  No  
**H(b)** Are all affiliates included?  Yes  No  
 If "No," attach a list. (see instructions)  
**H(c)** Group exemption number ▶

**I** Tax-exempt status:  501(c)(3)  501(c) ( **6** ) ◀ (insert no.)  4947(a)(1) or  527

**J** Website: ▶ **WWW.API.ORG**

**K** Form of organization:  Corporation  Trust  Association  Other ▶ **L** Year of formation: **1919** **M** State of legal domicile: **DC**

**Part I Summary**

**1** Briefly describe the organization's mission or most significant activities: **SEE SCHEDULE O**

**2** Check this box  if the organization discontinued its operations or disposed of more than 25% of its net assets.

<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>38</b>
<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>34</b>
<b>5</b> Total number of individuals employed in calendar year 2010 (Part V, line 2a)	<b>5</b>	<b>286</b>
<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>6000</b>
<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>4,931,084.</b>
<b>7b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	<b>661,277.</b>

	Prior Year	Current Year
<b>8</b> Contributions and grants (Part VIII, line 1h)	0.	0.
<b>9</b> Program service revenue (Part VIII, line 2g)	187,780,057.	170,763,029.
<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,661,621.	1,263,299.
<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	8,354,461.	9,210,249.
<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	198,796,139.	181,236,577.
<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	3,642,922.	3,619,883.
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	44,511,285.	40,122,485.
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>0.</b>		
<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	138,100,297.	141,350,693.
<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	186,254,504.	185,093,061.
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	12,541,635.	-3,856,484.
	<b>Beginning of Current Year</b>	<b>End of Year</b>
<b>20</b> Total assets (Part X, line 16)	122,167,885.	117,727,705.
<b>21</b> Total liabilities (Part X, line 26)	79,076,589.	75,715,888.
<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	43,091,296.	42,011,817.

**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Sign Here** Signature of officer: *Jack N. Gerard* Date: **Nov. 15, 2011**  
**JACK N. GERARD, PRESIDENT AND CEO**  
 Type or print name and title

**Preparer Use Only** Print/type preparer's name: **DEBORAH G. KOSNETT** Preparer's signature: *Deborah G. Kosnett* Date: **11/7/11** Check if self-employed  PTIN  
 Firm's name: **TATE AND TRYON** Firm's EIN: \_\_\_\_\_  
 Firm's address: **2021 L STREET, NW SUITE 400** Phone no.: **(202) 293-2200**  
**WASHINGTON, DC 20036**

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III [X]

1 Briefly describe the organization's mission: THE MISSION OF THE AMERICAN PETROLEUM INSTITUTE (API) IS TO INFLUENCE PUBLIC POLICY IN SUPPORT OF A STRONG, VIABLE U.S. OIL AND NATURAL GAS INDUSTRY ESSENTIAL TO MEET THE ENERGY NEEDS OF CONSUMERS IN AN EFFICIENT, ENVIRONMENTALLY RESPONSIBLE MANNER.

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 \$ including grants of \$ ) (Revenue \$ ) ADVOCACY- API SPEAKS FOR THE PETROLEUM INDUSTRY BEFORE CONGRESS, THE EXECUTIVE BRANCH OF GOVERNMENT, STATE LEGISLATURES, AND THE NEWS MEDIA. IT NEGOTIATES WITH REGULATORY AGENCIES, REPRESENTS THE INDUSTRY IN COURT AND PARTICIPATES IN COALITIONS -- BUILDING THE GRASSROOTS SUPPORT THAT PRODS CONGRESS, THE WHITE HOUSE AND STATE LEGISLATORS TO ACT. API ALSO STRIVES TO ENHANCE CREDIBILITY ON THE ENVIRONMENT, HEALTH AND SAFETY ISSUES THAT ARE CENTRAL TO THE PUBLIC'S PERCEPTION OF THE INDUSTRY AND ITS PRODUCTS.

4b (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ ) INFORMATION- API IS THE SOURCE FOR INFORMATION ABOUT THE PETROLEUM INDUSTRY. IT UNDERTAKES THE SCIENTIFIC AND ECONOMIC ANALYSIS THAT IS THE FOUNDATION FOR THE INDUSTRY'S STANCE ON THE CURRENT ISSUES. IT COLLECTS AND COMPILES STATISTICS AND IS WITHOUT PEER IN FINDING AND PROVIDING INDUSTRY-SPECIFIC INFORMATION FOR PEOPLE WHO NEED IT.

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ ) INDUSTRY OPERATIONS- API HAS SET STANDARDS FOR THE U.S. PETROLEUM INDUSTRY SINCE ITS FOUNDING IN 1919. IN THE GLOBAL MARKETPLACE, THESE SAME STANDARDS ARE BECOMING INTERNATIONAL STANDARDS, AND API'S INVOLVEMENT IN INTERNATIONAL EVENTS AND ORGANIZATIONS IS GROWING. MORE THAN 500 API STANDARDS ARE NOW USED THROUGHOUT THE WORLD. MANY OF THESE STANDARDS ARE NOW A PART OF BOTH FEDERAL AND STATE REGULATIONS.

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

4e Total program service expenses

**Part IV Checklist of Required Schedules**

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> .....		X
2 Is the organization required to complete Schedule B, Schedule of Contributors? .....		X
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> .....		X
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> .....	N/A	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i> .....	X	
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? <i>If "Yes," complete Schedule D, Part I</i> .....		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> .....		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> .....		X
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> .....		X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> .....		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> .....	X	
b 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? <i>If "Yes," complete Schedule D, Part VII</i> .....		X
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i> .....		X
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 in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i> .....		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> .....	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i> .....	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i> .....	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.</i> .....		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> .....		X
14a Did the organization maintain an office, employees, or agents outside of the United States? .....	X	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Parts I and IV</i> .....	X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i> .....	X	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i> .....		X
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? <i>If "Yes," complete Schedule G, Part I</i> .....		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> .....		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> .....		X
20a Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i> .....		X
b <i>If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)</i> .....		

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
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? If "Yes," complete Schedule I, Parts I and II	X	
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? If "Yes," complete Schedule I, Parts I and III		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25		X
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 to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? If "Yes," complete Schedule L, Part I	N/A	
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	N/A	
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? If "Yes," complete Schedule L, Part II		X
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? If "Yes," complete Schedule L, Part III		X
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? If "Yes," complete Schedule L, Part IV		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	X	
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	X	
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)?	X	
a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	N/A	
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	X	

Note. All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

Form 990 (2010) grid with rows 1a-14b and columns for Yes/No and numerical values. Includes questions about backup withholding, employee reporting, foreign accounts, and charitable contributions.



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

Check if Schedule O contains a response to any question in this Part VI

**Section A. Governing Body and Management**

	Yes	No
<b>1a</b> Enter the number of voting members of the governing body at the end of the tax year		
<b>1b</b> Enter the number of voting members included in line 1a, above, who are independent		
<b>2</b> Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	X	
<b>3</b> Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	X	
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets?		X
<b>6</b> Does the organization have members or stockholders?	X	
<b>7a</b> Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	X	
<b>7b</b> Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b> The governing body?	X	
<b>b</b> Each committee with authority to act on behalf of the governing body?	X	
<b>9</b> 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		X

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

	Yes	No
<b>10a</b> Does the organization have local chapters, branches, or affiliates?	X	
<b>10b</b> If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	X	
<b>11a</b> Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?		X
<b>11b</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b> Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
<b>12b</b> Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
<b>12c</b> Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
<b>13</b> Does the organization have a written whistleblower policy?	X	
<b>14</b> Does the organization have a written document retention and destruction policy?	X	
<b>15</b> 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?		
<b>a</b> The organization's CEO, Executive Director, or top management official	X	
<b>b</b> Other officers or key employees of the organization	X	
If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		
<b>16a</b> Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
<b>16b</b> 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 **NONE**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  
 Own website  Another's website  Upon request
- 19** Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **▶**  
**JOHN E. ROBERTSON - (202) 682-8000**  
**1220 L STREET NW, WASHINGTON, DC 20005**

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

Check if Schedule O contains a response to any question in this Part VII

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(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			
WILLIAM E. ALBRECHT BOARD MEMBER	0.50	X					0.	0.	0.	
TOFIG AL-GABSAMI BOARD MEMBER	0.50	X					0.	0.	0.	
MORTEN ARNTZEN BOARD MEMBER	0.50	X					0.	0.	0.	
CLARENCE CAZALOT BOARD MEMBER AND TREASURER	0.50	X		X			0.	0.	0.	
PATRICK D. DANIEL BOARD MEMBER	0.50	X					0.	0.	0.	
CHADWICK C. DEATON BOARD MEMBER	0.50	X					0.	0.	0.	
TIMOTHY C. FELT BOARD MEMBER	0.50	X					0.	0.	0.	
BRUCE C. GOTTWALD BOARD MEMBER	0.50	X					0.	0.	0.	
JAMES T. HACKETT BOARD MEMBER	0.50	X					0.	0.	0.	
FREDERIC C. HAMILTON BOARD MEMBER	0.50	X					0.	0.	0.	
PAUL HOWES BOARD MEMBER	0.50	X					0.	0.	0.	
RAY L. HUNT BOARD MEMBER	0.50	X					0.	0.	0.	
W. HERBERT HUNT BOARD MEMBER	0.50	X					0.	0.	0.	
A.V. JONES BOARD MEMBER	0.50	X					0.	0.	0.	
JAMES F. JUSTISS BOARD MEMBER	0.50	X					0.	0.	0.	
PETER D. KINNEAR BOARD MEMBER	0.50	X					0.	0.	0.	
DAVID J. LESAR BOARD MEMBER	0.50	X					0.	0.	0.	

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule C)	(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			
STEVE MALCOLM BOARD MEMBER	0.50	X					0.	0.	0.	
JAMES P. MCGREGOR BOARD MEMBER	0.50	X					0.	0.	0.	
LAMAR MCKAY BOARD MEMBER	0.50	X					0.	0.	0.	
JOHN MILLER BOARD MEMBER	0.50	X					0.	0.	0.	
BJOURN MOLLER BOARD MEMBER	0.50	X					0.	0.	0.	
JACK B. MOORE BOARD MEMBER	0.50	X					0.	0.	0.	
JAMES J. MULVA BOARD MEMBER	0.50	X					0.	0.	0.	
J. LARRY NICHOLS CHAIRMAN OF THE BOARD	0.50	X		X			0.	0.	0.	
ROD NELSON BOARD MEMBER	0.50	X					0.	0.	0.	
<b>1b Sub-total</b>							0.	0.	0.	
<b>c Total from continuation sheets to Part VII, Section A</b>							11118931.	0.	2,966,174.	
<b>d Total (add lines 1b and 1c)</b>							11118931.	0.	2,966,174.	

**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: **146**

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

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
DANIEL J. EDELMAN, INC, 1875 EYE ST. NW, STE 900, WASHINGTON, DC 20006	ADVERTISING/PUB. RELATIONS	63,228,379.
CIGNA HEALTH CARE, CGLIC-BLOOMFIELD EASC, 5082 COLLECTION CTR DR, CHICAGO, IL 6	INSURANCE COVERAGE	4,939,714.
ADVOCATES INC DC, LTD., 11256 INGLISH MILL DR., GREAT FALLS, VA 22066	COALITION BUILDING	3,843,563.
COORDINATING RESEARCH COUNCIL, INC., 3650 MANSELL RD, STE 140, ALPHARETTA, GA 30222	RESEARCH	3,759,865.
MOODY INTERNATIONAL, INC 24900 PITKIN ROAD # 200, SPRING, TX 77386	CERTIFICATION AUDITS	2,390,284.

**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: **121**

SEE PART VII, SECTION A CONTINUATION SHEETS

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
MARVIN ODUM BOARD MEMBER	0.50	X						0.	0.	0.
ROBERT (BOBBY) L. PARKER BOARD MEMBER	0.50	X						0.	0.	0.
CORBIN J. ROBERTSON BOARD MEMBER	0.50	X						0.	0.	0.
DAVID SEATON BOARD MEMBER	0.50	X						0.	0.	0.
KATHLEEN SHANAHAN BOARD MEMBER	0.50	X						0.	0.	0.
REX W. TILLERSON BOARD MEMBER	0.50	X						0.	0.	0.
HANK A. TRUE BOARD MEMBER	0.50	X						0.	0.	0.
JOHN B. WATSON BOARD MEMBER	0.50	X						0.	0.	0.
DAVID W. WILLIAMS BOARD MEMBER	0.50	X						0.	0.	0.
DAVID M. WOOD BOARD MEMBER	0.50	X						0.	0.	0.
JOHN M. YEARWOOD BOARD MEMBER	0.50	X						0.	0.	0.
JACK N. GERARD PRESIDENT AND CEO	40.00	X		X				4,672,049.	0.	1,756,823.
HARRY M. NG GENERAL COUNSEL & CORP SEC	40.00			X				639,552.	0.	101,980.
JOHN B ROBERTSON VICE PRESIDENT	40.00			X				358,236.	0.	42,366.
MARTIN J. DURBIN EXECUTIVE VICE PRESIDENT	40.00				X			587,738.	0.	82,000.
KYLE B. ISAKOWER VICE PRESIDENT	40.00				X			344,649.	0.	95,535.
LINDA G. ROZETT VICE PRESIDENT	40.00				X			325,817.	0.	46,463.
ROBERT L. GRECO GROUP DIRECTOR	40.00				X			592,818.	0.	113,242.
ERIK G. MILITO GROUP DIRECTOR	40.00				X			284,604.	0.	77,307.
JOHN D. MODINE DIRECTOR	40.00				X			350,546.	0.	59,604.
Total to Part VII, Section A, line 1c										



**Part VIII Statement of Revenue**

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a	Federated campaigns	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				
	g	Noncash contributions included in lines 1a-1f: \$					
	h	<b>Total.</b> Add lines 1a-1f					
Program Service Revenue	2 a	<b>MEMBERSHIP DUES</b>	Business Code 900099	132,919,140.	132,919,140.		
	b	<b>CERTIFICATION PROGRAM</b>	900099	28,865,285.	28,865,285.		
	c	<b>CERTIFICATION FEES</b>	541900	4931084.		4,931,084.	
	d	<b>MEETING REVENUE</b>	900099	2692279.	2692279.		
	e	<b>SUBSCRIPTIONS</b>	900099	1201446.	1201446.		
	f	All other program service revenue	900099	153,795.	153,795.		
	g	<b>Total.</b> Add lines 2a-2f		170,763,029.			
	3	Investment income (including dividends, interest, and other similar amounts)		1475282.			1,475,282.
4	Income from investment of tax-exempt bond proceeds						
5	Royalties		9126462.	9126462.			
Other Revenue	6 a	Gross Rents	(i) Real (ii) Personal				
	b	Less: rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss)					
	7 a	Gross amount from sales of assets other than inventory	(i) Securities (ii) Other	140,916,216. 160.			
	b	Less: cost or other basis and sales expenses		141,128,359.			
	c	Gain or (loss)		-212,143. 160.			
	d	Net gain or (loss)		-211,983.			-211,983.
	8 a	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					
	9 a	Gross income from gaming activities. See Part IV, line 19	a				
b	Less: direct expenses	b					
c	Net income or (loss) from gaming activities						
10 a	Gross sales of inventory, less returns and allowances	a					
b	Less: cost of goods sold	b					
c	Net income or (loss) from sales of inventory						
Miscellaneous Revenue	11 a	<b>MISCELLANEOUS REVENUE</b>	Business Code 900099	83,787.			83,787.
	b						
	c						
	d	All other revenue					
	e	<b>Total.</b> Add lines 11a-11d		83,787.			
12	<b>Total revenue.</b> See instructions		181,236,577.	174,958,407.	4,931,084.	1,347,086.	

**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 VII.	(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 .....	3,474,481.			
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 .....	145,402.			
4 Benefits paid to or for members .....				
5 Compensation of current officers, directors, trustees, and key employees .....	10,531,329.			
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 .....	19,688,769.			
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) .....	1,029,612.			
9 Other employee benefits .....	7,053,451.			
10 Payroll taxes .....	1,819,324.			
11 Fees for services (non-employees):				
a Management .....	46,595.			
b Legal .....	5,528,882.			
c Accounting .....	105,837.			
d Lobbying .....	14,963,705.			
e Professional fundraising services. See Part IV, line 17 .....				
f Investment management fees .....	267,066.			
g Other .....	28,628,267.			
12 Advertising and promotion .....	53,903,014.			
13 Office expenses .....	1,271,937.			
14 Information technology .....	821,491.			
15 Royalties .....				
16 Occupancy .....	4,421,378.			
17 Travel .....	2,117,776.			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .....				
19 Conferences, conventions, and meetings .....	2,203,942.			
20 Interest .....				
21 Payments to affiliates .....				
22 Depreciation, depletion, and amortization .....	1,437,639.			
23 Insurance .....	347,586.			
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.) .....				
a <b>STUDIES, RESEARCH, AND A</b> .....	13,888,403.			
b <b>NET PENSION EXPENSE</b> .....	8,418,981.			
c <b>POSTRETIREMENT BENEFIT</b> .....	1,530,846.			
d <b>MISCELLANEOUS</b> .....	708,526.			
e <b>UNRELATED BUSINESS INCO</b> .....	292,996.			
f All other expenses .....	445,826.			
25 <b>Total functional expenses.</b> Add lines 1 through 24f .....	185093061.			
26 <b>Joint costs.</b> Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation .....				

**Part X Balance Sheet**

		(A) Beginning of year	(B) End of year
<b>Assets</b>	1 Cash - non-interest-bearing		1
	2 Savings and temporary cash investments	42,612,294.	2 10,898,003.
	3 Pledges and grants receivable, net		3
	4 Accounts receivable, net	5,736,236.	4 5,945,512.
	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)), 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)		6
	7 Notes and loans receivable, net		7
	8 Inventories for sale or use	43,781.	8 16,582.
	9 Prepaid expenses and deferred charges	2,323,862.	9 1,693,770.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 16,173,641.	
	b Less: accumulated depreciation	10b 7,523,982.	10c 8,649,659.
	11 Investments - publicly traded securities	8,875,060.	11 90,524,179.
	12 Investments - other securities. See Part IV, line 11	62,576,652.	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 <b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	122,167,885.	16 117,727,705.	
<b>Liabilities</b>	17 Accounts payable and accrued expenses	22,867,262.	17 17,832,465.
	18 Grants payable		18
	19 Deferred revenue	16,907,597.	19 19,126,227.
	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	39,301,730.	25 38,757,196.
	26 <b>Total liabilities.</b> Add lines 17 through 25	79,076,589.	26 75,715,888.
<b>Net Assets or Fund Balances</b>	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	43,091,296.	27 42,011,817.
	28 Temporarily restricted net assets		28
	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 <b>Total net assets or fund balances</b>	43,091,296.	33 42,011,817.
	34 <b>Total liabilities and net assets/fund balances</b>	122,167,885.	34 117,727,705.



**Part XI Reconciliation of Net Assets**

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	181,236,577.
2	Total expenses (must equal Part IX, column (A), line 25)	2	185,093,061.
3	Revenue less expenses. Subtract line 2 from line 1	3	-3,856,484.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	43,091,296.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	2,777,005.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	42,011,817.

**Part XII Financial Statements and Reporting**

Check if Schedule O contains a response to any question in this Part XII

		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?		X
2b	Were the organization's financial statements audited by an independent accountant?	X	
2c	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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
d	If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate 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?		X
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.		

**SCHEDULE C**  
**(Form 990 or 990-EZ)**

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2010**

Open to Public Inspection

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**

▶ **See separate instructions.**

Department of the Treasury  
Internal Revenue Service

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

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

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

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

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35a (Proxy Tax), then

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

Name of organization AMERICAN PETROLEUM INSTITUTE Employer identification number 13-0433430

**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political expenditures ..... ▶ \$ \_\_\_\_\_

3 Volunteer hours .....

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

1 Enter the amount of any excise tax incurred by the organization under section 4955 ..... ▶ \$ \_\_\_\_\_

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ..... ▶ \$ \_\_\_\_\_

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? .....  Yes  No

4a Was a correction made? .....  Yes  No

b If "Yes," describe in Part IV.

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ..... ▶ \$ \_\_\_\_\_

4 Did the filing organization file Form 1120-POL for this year? .....  Yes  No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

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

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

Schedule C (Form 990 or 990-EZ) 2010

LHA

**Part II-A** Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying) .....														
b Total lobbying expenditures to influence a legislative body (direct lobbying) .....														
c Total lobbying expenditures (add lines 1a and 1b) .....														
d Other exempt purpose expenditures .....														
e Total exempt purpose expenditures (add lines 1c and 1d) .....														
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:50%; text-align: left;">If the amount on line 1a, column (a) or (b) is:</th> <th style="width:50%; text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1a, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1a, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e.													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.													
Over \$17,000,000	\$1,000,000.													
g Grassroots nontaxable amount (enter 25% of line 1f) .....														
h Subtract line 1g from line 1a. If zero or less, enter -0- .....														
i Subtract line 1f from line 1c. If zero or less, enter -0- .....														
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No												

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

**Part II-B** Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

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

**Part III-A** Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

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

**Part III-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes."

<b>1</b> Dues, assessments and similar amounts from members	<b>1</b>	136,419,563.
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
<b>a</b> Current year	<b>2a</b>	56308094.
<b>b</b> Carryover from last year	<b>2b</b>	9,253,046.
<b>c</b> Total	<b>2c</b>	65561140.
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	<b>3</b>	75030760.
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	<b>4</b>	
<b>5</b> Taxable amount of lobbying and political expenditures (see instructions)	<b>5</b>	0.

**Part IV** Supplemental Information

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

**FOR ITS YEAR ENDED 12/31/10, API HAD A NEGATIVE LOBBYING EXPENDITURE**

**CARRYOVER OF (\$9,469,620).**

**SCHEDULE D**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

▶ 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.

OMB No. 1545-0047

**2010**

Open to Public  
Inspection

Name of the organization **AMERICAN PETROLEUM INSTITUTE** Employer identification number **13-0433430**

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....		
2 Aggregate contributions to (during year) .....		
3 Aggregate grants from (during year) .....		
4 Aggregate value at end of year .....		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds 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? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or education)  Preservation of an historically important land area

Protection of natural habitat  Preservation of a certified historic structure

Preservation of open space

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

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register .....	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 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? .....

Yes  No

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

7 Amount of expenses incurred in monitoring, 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 section 170(h)(4)(B)(ii)? .....

Yes  No

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

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

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

1a If the organization elected, as permitted under SFAS 116 (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, 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 (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) 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 (ASC 958) 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 acquisition, 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:

	Amount
1c Beginning balance	
1d Additions during the year	
1e Distributions during the year	
1f Ending balance	

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.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

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

- a Board designated or quasi-endowment  %
- 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:

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

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

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		8,006,414.	2,556,257.	5,450,157.
d Equipment		6,041,821.	3,907,781.	2,134,040.
e Other		2,125,406.	1,059,944.	1,065,462.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				8,649,659.

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

(a) Description of security or category (Including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives .....		
(2) Closely-held equity interests .....		
(3) Other .....		
(A) .....		
(B) .....		
(C) .....		
(D) .....		
(E) .....		
(F) .....		
(G) .....		
(H) .....		
(I) .....		
<b>Total.</b> (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶		

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

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) .....		
(2) .....		
(3) .....		
(4) .....		
(5) .....		
(6) .....		
(7) .....		
(8) .....		
(9) .....		
(10) .....		
<b>Total.</b> (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶		

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

(a) Description	(b) Book value
(1) .....	
(2) .....	
(3) .....	
(4) .....	
(5) .....	
(6) .....	
(7) .....	
(8) .....	
(9) .....	
(10) .....	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 15.) ▶	

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

1. (a) Description of liability	(b) Amount
(1) Federal income taxes	
(2) ACCRUED PENSION LIABILITY	13,244,003.
(3) SUPPLEMENTAL BENEFIT PLANS	3,129,224.
(4) POSTRETIREMENT BENEFITS OTHER THAN	
(5) PENSION	22,159,135.
(6) FEDERAL INCOME TAXES	224,834.
(7) .....	
(8) .....	
(9) .....	
(10) .....	
(11) .....	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶	38,757,196.

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	181,236,577.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	185,093,061.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-3,856,484.
4	Net unrealized gains (losses) on investments	4	-67,552.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	2,844,557.
9	Total adjustments (net). Add lines 4 through 8	9	2,777,005.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	-1,079,479.

**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	180901959.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	-67,552.
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	-67,552.
3	Subtract line 2e from line 1	3	180969511.
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	267,066.
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	267,066.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	181236577.

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

1	Total expenses and losses per audited financial statements	1	184825995.
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	184825995.
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	267,066.
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	267,066.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	185093061.

**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, line 2; 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.

**PART X, LINE 2: API BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR ANY**

**TAX POSITIONS TAKEN, AND AS SUCH, DOES NOT HAVE ANY UNCERTAIN TAX**

**POSITIONS THAT ARE MATERIAL TO THE FINANCIAL STATEMENTS. API'S INCOME TAX**

**RETURNS ARE GENERALLY SUBJECT TO EXAMINATION BY THE IRS FOR THREE YEARS**

**AFTER THEY WERE FILED.**

**PART XI, LINE 8 - OTHER ADJUSTMENTS:**

**PENSION-RELATED CHANGES OTHER THAN NET PERIODIC PENSION**





**SCHEDULE F  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Statement of Activities Outside the United States**

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

OMB No. 1545-0047

**2010**

Open to Public Inspection

Name of the organization **AMERICAN PETROLEUM INSTITUTE** Employer identification number **13-0433430**

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

- 1 For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? .....  Yes  No
- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States.
- 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
EAST ASIA AND THE PACIFIC	2	3	PROGRAM SERVICES	CERTIFICATION PROGRAMS	3,578,500.
EUROPE			GRANTS AND CONTRIBUTIONS TO RECIPIENTS		145,402.
EUROPE	0	0	PROGRAM SERVICES	CERTIFICATION PROGRAMS	750,384.
MIDDLE EAST & N. AFRICA	1	0	PROGRAM SERVICES	CERTIFICATION PROGRAMS	365,764.
NORTH AMERICA	0	0	PROGRAM SERVICES	CERTIFICATION PROGRAMS	357,830.
RUSSIA AND THE CIS	0	0	PROGRAM SERVICES	CERTIFICATION PROGRAMS	210,984.
SOUTH AMERICA	0	0	PROGRAM SERVICES	CERTIFICATION PROGRAMS	198,940.
SOUTH ASIA	0	0	PROGRAM SERVICES	CERTIFICATION PROGRAMS	359,715.
3 a Sub-total .....	3	3			5,967,519.
b Total from continuation sheets to Part I .....	0	0			139,163.
c Totals (add lines 3a and 3b) .....	3	3			6,106,682.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule F (Form 990) 2010







**Part IV Foreign Forms**

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926) .....  Yes  No
  
- 2 Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A) .....  Yes  No
  
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see Instructions for Form 5471) .....  Yes  No
  
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621) .....  Yes  No
  
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see Instructions for Form 8865) .....  Yes  No
  
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713) .....  Yes  No

Schedule F (Form 990) 2010

**Part V** Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

SCHEDULE F, PART I, LINE 2: ALL GRANTS ARE ASSIGNED AN API STAFF MEMBER AS THE CONTRACT OFFICER. THE CONTRACT'S OFFICER'S RESPONSIBILITIES INCLUDE MONITORING THE ACTIVITIES OF GRANTEEES, AS WELL AS RECEIPT AND REVIEW OF PERIODIC PROGRESS REPORTS.

SCHEDULE F, PART I, LINE 3: API'S CERTIFICATION PROGRAMS INCLUDE LICENSING OF MANUFACTURERS AND INDIVIDUALS THROUGHOUT THE WORLD. AUDITS OF MANUFACTURERS ARE CONDUCTED THROUGH INDEPENDENT CONTRACTORS, WHICH ARE PRIMARILY COORDINATED THROUGH A U.S.-BASED ENTITY. THE EVALUATION AND GRANT OF LICENSES IS CONDUCTED AT API'S HEADQUARTERS IN WASHINGTON, D.C. SIMILARLY, API'S INDIVIDUAL CERTIFICATION EXAMINATIONS ARE OFFERED AT VARIOUS WORLD-WIDE LOCATIONS, PROCTORED BY A U.S.-BASED INDEPENDENT CONTRACTOR. THE EXAMINATION RESULTS AND CERTIFICATIONS ARE ALSO EVALUATED AND AWARDED AT API'S HEADQUARTERS IN WASHINGTON, D.C.

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

OMB No. 1545-0047

**2010**

Open to Public Inspection

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**

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

Name of the organization  
**AMERICAN PETROLEUM INSTITUTE**

Employer identification number  
**13-0433430**

**Part I** General information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.  
**Part II** Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed. ▶

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COALITION FOR AMERICAN JOBS C/O AMERICAN CHEMISTRY COUNCIL, 700 2ND ST, NE - WASHINGTON, DC 20002	27-5075681	501 C 6	1,000,000.	0.			GENERAL SUPPORT
AMERICAN COUNCIL FOR CAPITAL FORMATION - 1750 E STREET, NW, SUITE 400 - WASHINGTON, DC 20005	52-0991278	501 C 6	50,000.	0.			GENERAL SUPPORT
AMERICAN LEGISLATIVE EXCHANGE 1101 VERMONT AVE, NW, 11TH FLOOR WASHINGTON, DC 20005	52-0140579	501 C 3	10,000.	0.			EVENT SPONSORSHIP
AMERICANS FOR PROSPERITY 2111 WILSON BLVD., SUITE 350 ARLINGTON, VA 22201	75-3148558	501 C 4	25,500.	0.			ENERGY EDUCATION
AMERICANS FOR TAX REFORM 722 12TH STREET, NW, 4TH FLOOR WASHINGTON, DC 20005-3866	52-1403587	501 C 4	50,000.	0.			ENERGY EDUCATION
AMERICA'S WETLAND FOUNDATION 1055 ST. CHARLES AVENUE, SUITE 100 NEW ORLEANS, LA 70130	30-0192739	501 C 3	50,000.	0.			GENERAL SUPPORT

2 Enter total number of section 501(c)(3) and government organizations **32.**

3 Enter total number of other organizations **22.**

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. **Schedule I (Form 990) (2010)**



AMERICAN PETROLEUM INSTITUTE

Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or Government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASSOCIATION FOR ENVIRONMENTAL HEALTH AND SCIENCES - 150 PEARING STREET, SUITE 21 - AMHERST, MA 01002	26-2624347	501 C 3	10,000.	0.			EVENT SPONSORSHIP
BUILDING & CONSTRUCTION TRADES DEPT., AFL-CIO - 815 15TH STREET, NW, SUITE 600 - WASHINGTON, DC 20006	53-0025755	501 C 3	10,000.	0.			EVENT SPONSORSHIP
BUSINESS INDUSTRY POLITICAL ACTION COMMITTEE (BIPAC) - 888 SIXTEENTH STREET, NW - WASHINGTON, DC 20006	13-1985476	N/A	250,000.	0.			ENERGY EDUCATION
CARBON SEQUESTRATION COUNCIL 1155 F STREET, NW, SUITE 700 WASHINGTON, DC 20004	26-2304244	501 C 6	20,000.	0.			GENERAL SUPPORT
COMMON GROUND ALLIANCE 1421 PRINCE STREET, SUITE 410 ALEXANDRIA, VA 22314	41-1984081	501 C 3	10,000.	0.			EVENT SPONSORSHIP
CONGRESSIONAL COALITION ON ADOPTION INSTITUTE - 311 MASSACHUSETTS AVENUE, NW - WASHINGTON, DC 20002	54-2035617	501 C 3	50,000.	0.			GENERAL SUPPORT
CONGRESSIONAL HISPANIC CAUCUS INSTITUTE - 911 SECOND STREET, NE - WASHINGTON, DC 20002	52-1114225	501 C 3	125,000.	0.			EVENT SPONSORSHIP
CONGRESSIONAL SPORTSMEN'S FOUNDATION - 110 NORTH CAROLINA AVE. SE - WASHINGTON, DC 20003	52-1686163	501 C 3	10,000.	0.			EVENT SPONSORSHIP
CONSUMER ENERGY ALLIANCE 2211 NORFOLK STREET, SUITE 614 HOUSTON, TX 77098	26-1658339	501 C 4	35,000.	0.			EVENT SPONSORSHIP

Schedule I (Form 990)

AMERICAN PETROLEUM INSTITUTE

Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ENERGY POLICY RESEARCH 1201 WISCONSIN AVENUE WASHINGTON, DC 20007	13-1512139	501 C 6	30,000.	0.			ENERGY POLICY RESEARCH
ENVIRONMENTAL COUNCIL OF THE STATES - 444 N. CAPITOL STREET, NW, SUITE 305 - WASHINGTON, DC 20001	36-3962169	501 C 3	25,000.	0.			GENERAL SUPPORT
GROUND WATER RESEARCH & EDUCATION FOUNDATION - 13306 N. MACARTHUR BLVD. - OKLAHOMA CITY, OK 73142	73-1271210	501 C 3	10,000.	0.			GENERAL SUPPORT
INDEPENDENT PETROLEUM ASSOCIATION OF AMERICA - 1201 15TH STREET, NW, SUITE 300 - WASHINGTON, DC 20005	73-0296327	501 C 6	100,000.	0.			ENERGY EDUCATION
INSTITUTE FOR ENERGY RESEARCH 1100 H STREET, NW, SUITE 400 WASHINGTON, DC 20005	76-0149778	501 C 3	50,000.	0.			ENERGY POLICY RESEARCH
INTERNATIONAL CONSERVATION CAUCUS FOUNDATION - 3250 PROSPECT ST., NW - WASHINGTON, DC 20007	83-0449176	501 C 3	25,000.	0.			GENERAL SUPPORT
MASSACHUSETTS INSTITUTE OF TECHNOLOGY (MIT) - 77 MASSACHUSETTS AVENUE - CAMBRIDGE, MA 02139	04-2103594	501 C 3	33,000.	0.			ENERGY EDUCATION
MICHIGAN STATE UNIVERSITY 300 SPARTAN WAY EAST LANSING, MI 48824-1005	38-6005984	SEC 115	50,000.	0.			ENVIRONMENTAL RESEARCH
MONTANA DEPARTMENT OF ENVIRONMENTAL QUALITY (MDEQ) - 1100 NORTH LAST CHANCE GULCH - HELENA, MT 59620-0901	81-0302402	SEC 115	66,642.	0.			PETRO-CHEMICAL RESEARCH

Schedule I (Form 990)

AMERICAN PETROLEUM INSTITUTE

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MONTANA ECONOMIC DEVELOPERS ASSOCIATION (MEDA) - 118 E. SEVENTH STREET, SUITE 2A - ANACONDA, MT 59711	81-0488036	501 C 3	10,000.	0.		PETRO-CHEMICAL RESEARCH	
NATIONAL BLACK CHAMBER OF COMMERCE 1350 CONNECTICUT AVE NW #405 WASHINGTON, DC 20036	35-1889294	501 C 3	30,000.	0.		EVENT SPONSORSHIP	
NATIONAL FISH AND WILDLIFE FOUNDATION - 1133 15TH STREET, SUITE 1100 - WASHINGTON, DC 20005	52-1384139	501 C 3	50,000.	0.		GENERAL SUPPORT	
NATIONAL FOREIGN TRADE COUNCIL 1625 K STREET, NW, SUITE 200 WASHINGTON, DC 20006	13-5266965	501 C 6	20,000.	0.		EVENT SPONSORSHIP	
NATIONAL FOUNDATION FOR WOMEN LEGISLATORS, INC. - 910 16TH STREET, NW, SUITE 100 - WASHINGTON, DC 20006	52-1480785	501 C 3	10,000.	0.		EVENT SPONSORSHIP	
NATIONAL PETROCHEMICAL & REFINERS ASSOCIATION - 1667 K STREET, SUITE 700 - WASHINGTON, DC 20006	53-0115870	501 C 6	45,000.	0.		ENERGY EDUCATION	
MCLS FOUNDATION FOR STATE LEGISLATURES - 7700 EAST FIRST PLACE - DENVER, CO 80230	74-2232576	501 C 3	7,500.	0.		EVENT SPONSORSHIP	
NICHOLLS STATE UNIVERSITY FOUNDATION - P.O. BOX 2052 - THIBODEAUX, LA 70310	72-6031425	501 C 3	20,000.	0.		EVENT SPONSORSHIP	
NORTHWESTERN UNIVERSITY SCHOOL OF LAW - 357 EAST CHICAGO AVENUE - CHICAGO, IL 60611	36-2167817	501 C 3	40,000.	0.		CIVIL JUSTICE ISSUES	Schedule I (Form 990)

**AMERICAN PETROLEUM INSTITUTE**

**Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)**

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OFFSHORE ENERGY CENTER 200 N. DAIRY ASHFORD ST., SUITE 411 HOUSTON, TX 77079-1101	75-0280571	501 C 3	10,000.	0.			EVENT SPONSORSHIP
OIL AND NATURAL GAS INDUSTRY LABOR MANAGEMENT COMMITTEE - 101 N UNION STREET, SUITE 305 - ALEXANDRIA, VA 22134	27-0567842	501 C 6	220,000.	0.			GENERAL SUPPORT
REPUBLICAN GOVERNORS PUBLIC POLICY COMMITTEE - 1747 PENNSYLVANIA AVE. NW, SUITE 250 - WASHINGTON, DC 20006	20-0306803	501 C 4	10,000.	0.			GENERAL SUPPORT
SMALL BUSINESS AND ENTREPRENEURSHIP COUNCIL - 2944 HUNTER HILL ROAD, SUITE 204 - OAKTON, VA 22124	36-3756240	501 C 4	25,000.	0.			GENERAL SUPPORT
SOUTHERN CHRISTIAN LEADERSHIP CONFERENCE - 320 AUBORN AVENUE NE - ATLANTA, GA 30303	58-0807748	501 C 4	25,000.	0.			EVENT SPONSORSHIP
STANFORD UNIVERSITY TERMAN ENGINEERING CENTER, ROOM 452 STANFORD, CA 94305-4026	94-1156365	501 C 3	15,000.	0.			EVENT SPONSORSHIP
STRONGER 13308 N. MACARTHUR OKLAHOMA CITY, OK 73142	31-1666039	501 C 3	200,000.	0.			GENERAL SUPPORT
TEXAS OIL AND GAS ASSOCIATION 304 WEST THIRTEENTH ST. - AUSTIN, TX 78701-1823	20-4669692	501 C 6	10,000.	0.			LEGAL ISSUES
THE BRYCE HARLOW FOUNDATION 1701 PENNSYLVANIA AVE NW #400 - WASHINGTON, DC 20006	52-1266620	501 C 3	7,500.	0.			EVENT SPONSORSHIP

AMERICAN PETROLEUM INSTITUTE

Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE SIXTY PLUS ASSOCIATION 515 KING STREET, SUITE 315 ALEXANDRIA, VA 22314	54-1564919	501 C 4	25,000.	0.			ENERGY EDUCATION
UNITED STATES ASSOCIATION FOR ENERGY ECONOMICS (USAEE) - 28790 CHAGRIN BLVD - CLEVELAND, OH 44122	34-1755274	501 C 6	10,000.	0.			EVENT SPONSORSHIP
UNIVERSITY OF CALIFORNIA, DAVIS 1 SHIELDS AVENUE DAVIS, CA 95616	94-6036494	SEC 115	180,000.	0.			PETRO-CHEMICAL HEALTH EFFECT RESEARCH
UNIVERSITY OF CONNECTICUT DEPT. OF PHARMACEUTICAL SCIENCES, 69 N. EAGLEVILLE RD, U- 3092 - STORRS, CT	22-2505202	SEC-115	256,839.	0.			PETRO-CHEMICAL RESEARCH
VIRGINIA SUSTAINABLE BUILDING NETWORK - P.O. BOX 6539 - ARLINGTON, VA 22206	54-1757778	501 C 3	10,000.	0.			EVENT SPONSORSHIP
VOLTA LIVE, INC. 5500 FRIENDSHIP BLVD., #2322 N CHEVY CHASE, MD 20815	25-5291054	N/A	10,000.	0.			EVENT SPONSORSHIP
KASICH-TAYLOR NEW DAY INAUGURAL COMMITTEE - 340 E. GAY STREET - COLUMBUS, OH 43215	27-3902346	N/A	10,000.	0.			EVENT SPONSORSHIP
PENNSYLVANIA INDEPENDENT OIL AND GAS ASSOCIATION (PIOGA) - 115 VIP DRIVE, SUITE 210 - WEXFORD, PA 15090	25-1815131	501 C 6	37,500.	0.			ADVOCACY EFFORTS - PROPOSED TAX
THE CORBETT CAWLEY INAUGURAL COMMITTEE - 200 NORTH THIRD STREET, 13TH FLOOR - HARRISBURG, PA 17101	27-3934993	501 C 4	15,000.	0.			EVENT SPONSORSHIP

LHA

Schedule I (Form 990)

AMERICAN PETROLEUM INSTITUTE

Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GIRL SCOUT COUNCIL OF THE NATION'S CAPITAL - 4301 CONN. AVENUE, NW, SUITE M-2 - WASHINGTON, DC 20008	54-0732966	501 C 3	30,000.	0.			EVENT SPONSORSHIP
NALEO EDUCATION FUND 1122 W. WASHINGTON ROAD, 3RD FLOOR LOS ANGELES, CA 90015	52-1212849	501 C 3	30,000.	0.			EVENT SPONSORSHIP
TRI-STATE BIRD RESCUE AND RESEARCH, INC. - 110 POSSUM HOLLOW ROAD - NEWARK, DE 19711	51-0285807	501 C 3	10,000.	0.			EVENT SPONSORSHIP

**Part III** Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

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

**SCHEDULE I, PART I, LINE 2: ALL GRANTS ARE ASSIGNED AN API STAFF MEMBER AS THE CONTRACT OFFICER. THE CONTRACT OFFICER'S RESPONSIBILITIES INCLUDE MONITORING THE ACTIVITIES OF GRANTEES, AS WELL AS THE RECEIPT AND REVIEW OF PERIODIC PROGRESS REPORTS.**

**SCHEDULE J  
(Form 990)**

**Compensation Information**

OMB No. 1545-0047

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

**2010**

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

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization **AMERICAN PETROLEUM INSTITUTE** Employer identification number **13-0433430**

**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use          |
| <input checked="" type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence          |
| <input checked="" type="checkbox"/> Tax indemnification and gross-up payments | <input checked="" 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)          |

**b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

**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?

**3** Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

- |   |   |
|---|---|
| <input type="checkbox"/> Compensation committee                         | <input checked="" type="checkbox"/> Written employment contract                     |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input checked="" type="checkbox"/> Form 990 of other organizations     | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment from the organization or a related organization?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** 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.

**Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.**

**5** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" to line 5a or 5b, describe in Part III.

**6** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" to line 6a or 6b, describe in Part III.

**7** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

**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 Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

**9** If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1a		
1b	X	
2	X	
3		
4a	X	
4b	X	
4c		X
5a		
5b		
6a		
6b		
7		
8		
9		

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

Schedule J (Form 990) 2010



**Part I 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 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)-(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)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 JACK N. GERARD	(i) 2169760.	2400000.	102,289.	1,724,620.	32,203.	6,428,872.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
2 HARRY M. NG	(i) 298,145.	158,700.	182,707.	82,946.	19,034.	741,532.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
3 JOHN E ROBERTSON	(i) 247,600.	109,900.	736.	30,562.	11,804.	400,602.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
4 MARTIN J. DURBIN	(i) 443,016.	135,000.	9,722.	54,391.	27,609.	669,738.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
5 KYLE B. ISAKOWER	(i) 213,860.	97,700.	33,089.	66,822.	28,713.	440,184.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
6 LINDA G. ROZETT	(i) 229,344.	94,300.	2,173.	42,778.	3,685.	372,280.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
7 ROBERT L. GRECO	(i) 291,953.	143,000.	157,865.	80,975.	32,267.	706,060.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
8 ERIK G. MILITO	(i) 203,860.	80,300.	444.	46,344.	30,963.	361,911.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
9 JOHN D. MODINE	(i) 230,038.	88,400.	32,108.	40,779.	18,825.	410,150.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
10 ALVIS TRUMAN HUNT	(i) 286,403.	106,200.	221,029.	95,652.	26,411.	735,695.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
11 HOWARD J. FELDMAN	(i) 202,680.	70,000.	28,628.	75,114.	26,453.	402,875.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
12 JOHN C. FELMY	(i) 224,250.	59,000.	16,981.	53,903.	17,744.	371,878.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
13 DREW P. COBBS	(i) 216,265.	61,400.	36,539.	81,700.	29,682.	425,586.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
14 JOHN P. KEREKES	(i) 212,613.	44,800.	23,334.	115,164.	24,063.	419,974.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
15 JIM C. CRAIG	(i) 0.	0.	408,039.	0.	6,147.	414,186.	175,823.
	(ii) 0.	0.	0.	0.	0.	0.	0.
16 JAMES E. FORD	(i) 0.	0.	400,052.	0.	0.	400,052.	203,522.
	(ii) 0.	0.	0.	0.	0.	0.	0.

**Part III 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 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				
1	BRENDA S. HARGETT	0.	0.	344,709.	30,338.	8,483.	383,530.	103,915.
2		0.	0.	0.	0.	0.	0.	0.
3								
4								
5								
6								
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11								
12								
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16								

**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.

**PART I, LINE 1A: FIRST CLASS OR CHARTER TRAVEL- FIRST CLASS AIR TRAVEL IS LIMITED TO EXECUTIVE STAFF MEMBERS. OTHER STAFF MEMBERS MAY TRAVEL FIRST OR BUSINESS CLASS ONLY WHEN ACCOMPANYING AN EXECUTIVE STAFF MEMBER, A MEMBER COMPANY EXECUTIVE OR GOVERNMENTAL OFFICIAL WHO TRAVELS FIRST CLASS OR BUSINESS CLASS, OR, FOR INTERNATIONAL FLIGHTS, WHEN EXTENUATING CIRCUMSTANCES JUSTIFYING TRAVELING BUSINESS CLASS. FIRST OR BUSINESS CLASS AIR TRAVEL MUST BE APPROVED IN ADVANCE BY AN EXECUTIVE STAFF MEMBER, AND THE EMPLOYEE MUST PROVIDE THE JUSTIFICATION ON THE EXPENSE REPORT. FIRST CLASS-TRAIN-PASSAGE-IS-AN-ACCEPTABLE-ALTERNATIVE-TO-COACH-AIR-FARES-OF EQUAL OR GREATER VALUE. IT IS NOT API'S PRACTICE TO CHARTER TRAVEL.**

**TRAVEL FOR COMPANIONS- INSTANCES IN WHICH A SPOUSE ACCOMPANIES AN EMPLOYEE TRAVELING ON BUSINESS AT API EXPENSE ARE LIMITED AND APPROVED IN ADVANCE. IN SUCH AUTHORIZED CASES, UNLESS THE STRICT LEGAL DEFINITION OF BUSINESS PURPOSE IS MET, THE REIMBURSEMENT IS TREATED AS TAXABLE INCOME TO THE EMPLOYEE.**

**TAX IDEMNIFICATION AND GROSS UP PAYMENTS- FOR EMPLOYEES WHO QUALIFY TO PARTICIPATE IN THE NON-QUALIFIED RETIREMENT INCOME PLAN, API PAYS TAXES DUE**

**Part II** Supplemental Information

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

ON THE ACCRUED BENEFITS AS THEY ARE AWARDED TO THE PARTICIPANTS. THESE TAX PAYMENTS ARE TREATED AS AN ADVANCE AND NETTED FROM THE ACCRUED BENEFITS TO THE PARTICIPANTS UPON DISTRIBUTION.

HEALTH OR SOCIAL CLUB DUES OR INITIATION FEES- REIMBURSEMENT OF CLUB DUES TO AN EMPLOYEE FOR MEMBERSHIP IN ANY CLUB ORGANIZED FOR PLEASURE, RECREATION, OR OTHER SOCIAL PURPOSE (I.E., COUNTRY CLUBS, LUNCHEON CLUBS, AND AIRLINE AND HOTEL CLUBS) IS LIMITED AND REQUIRES EXECUTIVE STAFF APPROVAL. EMPLOYEES WHO HAVE BEEN REIMBURSED FOR CLUB DUES MUST ANNUALLY ACCOUNT FOR THEIR BUSINESS USE, AND NON-BUSINESS USE IS TREATED AS TAXABLE INCOME TO THE EMPLOYEE. API OFFERS ALL WASHINGTON, D.C. EMPLOYEES AN OPPORTUNITY TO JOIN A LOCAL HEALTH CLUB AT A DISCOUNTED RATE. API PAYS A PORTION OF THE DUES (\$13.42 PER SEMI-MONTHLY PAY PERIOD) AND TREATS THIS PORTION AS TAXABLE INCOME TO THE EMPLOYEE.

PART I, LINES 4A-B: LINE 4A: THE FOLLOWING RECEIVED PAYMENTS BASED ON A SEVERANCE AGREEMENT:

CRAIG, JIM C. - \$195,768

FORD, JAMES E. - \$160,780

**Part II** 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.

HARGETT, BRENDA S. - \$187,354

**LINE 4B: PARTICIPANTS IN THE AMERICAN PETROLEUM INSTITUTE SUPPLEMENTAL**

**BENEFIT PLANS RECEIVED CONTRIBUTIONS IN 2010 AS FOLLOWS:**

GERARD, JACK N. - \$1,807,244 - INCLUDES NON-VESTED ACCRUAL OF \$1,710,819

NG, HARRY M. - \$209,776 - INCLUDES NON-VESTED ACCRUAL OF \$28,593

GRECO, ROBERT L. - \$184,017 - INCLUDES NON-VESTED ACCRUAL OF \$27,991

DURBIN, MARTIN J. - \$80,320 - INCLUDES NON-VESTED ACCRUAL OF \$74,341

ROBERTSON, JOHN E. - \$23,727 - INCLUDES NON-VESTED ACCRUAL OF \$23,477

MODINE, JOHN D. - \$29,724

ISAKOWER, KYLE B. - \$51,930 - INCLUDES NON-VESTED ACCRUAL OF \$19,865

ROZETT, LINDA G. - \$32,603 - INCLUDES NON-VESTED ACCRUAL OF \$31,603

MILITO, ERIC G. - \$21,069 - NON-VESTED ACCRUAL ONLY

HUNT, JR., ALVIS T. - \$213,012

COBBS, DREW P. - \$33,147

FELDMAN, HOWARD J. - \$27,304

FELMY, JOHN C. - \$14,565

KEREKES, JOHN P. - \$17,968

**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.

**LINE 4B: PARTICIPANTS IN THE AMERICAN PETROLEUM INSTITUTE SUPPLEMENTAL**

**BENEFITS PLANS RECEIVED PAYMENTS IN 2010 AS FOLLOWS:**

CRAIG, JIM C. - \$637,009

FORD, JAMES E. - \$570,472

HARGETT, BRENDA S. - \$147,682



**Part IV Business Transactions Involving Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
COALITION FOR AMERICAN JOBS	>35% OWNERSHIP;GERA	1,000,000.	CONTRIBUTIO		X
OIL AND NATURAL GAS LABOR-	>35% OWNERSHIP;GERA	220,000.	CONTRIBUTIO		X

**Part V Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).

**SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:**

(A) NAME OF PERSON: COALITION FOR AMERICAN JOBS

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

>35% OWNERSHIP;GERARD & DURBIN SERVE AS OFFICERS & BOARD MEMBERS

(C) AMOUNT OF TRANSACTION \$ 1,000,000.

(D) DESCRIPTION OF TRANSACTION: CONTRIBUTIONS PROVIDED TO ORGANIZATIONS FOR GENERAL SUPPORT.

(E) SHARING OF ORGANIZATION REVENUES? = NO

(A) NAME OF INTERESTED PERSON:

OIL AND NATURAL GAS LABOR- MANAGEMENT COMMITTEE

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

>35% OWNERSHIP;GERARD,NICHOLS,CAZALOT,&TILLERSON SERVE AS OFFICERS&TRUSTEES

(C) AMOUNT OF TRANSACTION \$ 220,000.

(D) DESCRIPTION OF TRANSACTION: CONTRIBUTIONS PROVIDED TO ORGANIZATIONS FOR GENERAL SUPPORT.

(E) SHARING OF ORGANIZATION REVENUES? = NO



**SCHEDULE O**  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

OMB No. 1545-0047

**2010**

Open to Public  
Inspection

Name of the organization

AMERICAN PETROLEUM INSTITUTE

Employer identification number

13-0433430

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

THE MISSION OF THE AMERICAN PETROLEUM INSTITUTE (API) IS TO INFLUENCE  
PUBLIC POLICY IN SUPPORT OF A STRONG, VIABLE U.S. OIL AND NATURAL GAS  
INDUSTRY ESSENTIAL TO MEET THE ENERGY NEEDS OF CONSUMERS IN AN  
EFFICIENT, ENVIRONMENTALLY RESPONSIBLE MANNER.

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

MAINTAINING QUALITY-THE INCREASINGLY INTERNATIONAL NATURE OF THE  
PETROLEUM BUSINESS IS EVIDENT IN API'S APPROACH TO CERTIFYING THAT  
PRODUCTS MEET THE INDUSTRY'S EXACTING STANDARDS OF QUALITY. SINCE  
1924, API HAS LICENSED OIL FIELD EQUIPMENT MANUFACTURERS TO USE THE API  
MONOGRAM, RECOGNIZED AS A MARK OF QUALITY AROUND THE WORLD. API  
LICENSES MOTOR OILS FOR USE IN BOTH GASOLINE AND DIESEL ENGINES. API  
ALSO CERTIFIES INSPECTORS OF STORAGE TANKS, PRESSURE VESSELS, AND  
PIPING.

EDUCATION- API ORGANIZES SEMINARS, WORKSHOPS AND SYMPOSIA ON ISSUES  
VITAL TO THE INDUSTRY'S LIVELIHOOD. IT PROVIDES TRAINING MATERIALS  
THAT HELP PROFESSIONALS IN THE OIL AND GAS BUSINESS MEET REGULATORY  
REQUIREMENTS AND INDUSTRY STANDARDS.

FORM 990, PART VI, SECTION A, LINE 1: API'S EXECUTIVE COMMITTEE CONSISTS  
OF 12 MEMBERS OF THE BOARD. MEMBERS INCLUDE THE API CHAIRMAN OF THE BOARD  
AND THE CHAIR OF THE FINANCE COMMITTEE, WITH REPRESENTATION OF THE TOP SIX  
(6) DUES-PAYING MEMBERS, AND THE REMAINING FOUR (4) MEMBERS CHOSEN  
PRINCIPALLY FROM THE LARGEST DUES-PAYING MEMBERS, INCLUDING AS MANY AS TWO

Name of the organization

AMERICAN PETROLEUM INSTITUTE

Employer identification number

13-0433430

(2) INDEPENDENT PETROLEUM PRODUCERS. THE EXECUTIVE COMMITTEE HAS THE AUTHORITY TO EXERCISE ALL OF THE POWERS OF THE BOARD OF DIRECTORS IN THE ABSENCE OF ACTION BY THE BOARD, EXCEPT TO AMEND THE BYLAWS OR AS OTHERWISE LIMITED BY LAW. ITS RESPONSIBILITIES INCLUDE LONG-RANGE PLANNING, PROGRAM AND BUDGET DEVELOPMENT, OVERSIGHT, AND ADMINISTRATION.

FORM 990, PART VI, SECTION A, LINE 2: BUSINESS RELATIONSHIP: CAZALOT, CLARENCE P.; TILLERSON, REX W.; NICHOLS, J. LARRY; GERARD, JACK N.; DURBIN, MARTIN J.

FAMILY RELATIONSHIP: HUNT, RAY L.; HUNT, W. HERBERT

FORM 990, PART VI, SECTION A, LINE 4: IN OCTOBER 2010, API'S BOARD OF DIRECTORS APPROVED A RESOLUTION TO MODIFY THE BYLAWS EFFECTIVE JANUARY 1, 2011 TO ACCOMPLISH THE FOLLOWING GOVERNANCE CHANGES: (1) ELIMINATE THE ANNUAL REQUIREMENT TO REPLACE ONE-HALF (1/2) OF THE BOARD; (2) ALLOW SENIOR STAFF EXECUTIVES AUTHORIZED BY THE PRESIDENT TO SIGN, IN THE NAME OF THE INSTITUTE, CONTRACTS AUTHORIZED BY THE BOARD OF THE EXECUTIVE COMMITTEE; AND (3) CREATE TWO ADDITIONAL SEATS ON THE EXECUTIVE COMMITTEE TO BE FILLED BY THE BOARD WHEN CONSIDERED NECESSARY AND APPROPRIATE. CLARIFY THAT UNLESS RENOMINATED BY THE BOARD TO REMAIN ON THE EXECUTIVE COMMITTEE, THE SIX AT-LARGE MEMBERS AND THE GENERAL MEMBERSHIP COMMITTEE MEMBER MAY BE LIMITED TO TWO (2) CONSECUTIVE TERMS OF ONE (1) YEAR EACH.

FORM 990, PART VI, SECTION A, LINE 6: API IS A TRADE ASSOCIATION WITH MEMBERSHIP DRAWN FROM THE OIL AND NATURAL GAS INDUSTRY. AS DESCRIBED BELOW, API'S MEMBERS PARTICIPATE IN THE ELECTION OF THE BOARD. REGULAR ELECTED BOARD MEMBERS HAVE FULL VOTING RIGHTS. API'S PRESIDENT IS AN EX OFFICIO VOTING MEMBER OF THE BOARD. OTHER EX OFFICIO MEMBERS DO NOT HAVE

Name of the organization

AMERICAN PETROLEUM INSTITUTE

Employer identification number

13-0433430

VOTING RIGHTS. HONORARY DIRECTORS HAVE NO VOTING RIGHTS.

FORM 990, PART VI, SECTION A, LINE 7A: THE BOARD MEMBERS ARE ELECTED BY THE BOARD OF DIRECTORS AT THE ANNUAL MEETING. EACH DIRECTOR SHALL HOLD OFFICE FOR A TWO YEAR TERM OR UNTIL THE DIRECTOR HAS CEASED TO HAVE A SUBSTANTIAL FULLTIME CONNECTION WITH THE MEMBER COMPANY THE DIRECTOR SERVED WHEN ELECTED.

FORM 990, PART VI, SECTION B, LINE 11: API'S FORM 990 WAS PREPARED BY API STAFF AND REVIEWED BY ITS EXTERNAL ACCOUNTING FIRM. PRIOR TO FILING, THE FORM 990 WAS INCLUDED WITH THE MATERIALS FOR THE FINANCE COMMITTEE'S ANNUAL MEETING IN OCTOBER 2011, AND REVIEWED DURING THE MEETING. A COPY OF THE FORM 990 WAS PROVIDED TO THE EXECUTIVE COMMITTEE PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C: API'S STANDARDS OF CONDUCT POLICY INCLUDES PROVISIONS RELATED TO AVOIDING ANY ACT THAT MAY RESULT IN A CONFLICT OF INTEREST. ON AN ANNUAL BASIS, ALL EMPLOYEES ARE ASKED TO CONFIRM THEIR COMPLIANCE WITH THE STANDARDS OF CONDUCT POLICY. ANY EMPLOYEE WHO IS AWARE OF A VIOLATION OF THIS POLICY MUST TAKE APPROPRIATE ACTION SO THAT THE VIOLATION IS PROMPTLY ADDRESSED. THIS MAY INCLUDE REPORTING A VIOLATION TO AN EXECUTIVE STAFF MEMBER OR TO AN EXTERNALLY-OPERATED ETHICS HOTLINE. ALL REPORTS ARE ASSIGNED TO AN APPROPRIATE EXECUTIVE STAFF MEMBER FOR INVESTIGATION AND RESOLUTION AND A REPORT OF ALL INCIDENTS ARE PROVIDED TO THE FINANCE COMMITTEE EACH YEAR. THE BOARD OF DIRECTORS ADOPTED A CONFLICT OF INTEREST POLICY IN 2008 THAT REQUIRES FULL DISCLOSURE OF ALL ACTUAL AND POTENTIAL CONFLICTS. THE DISINTERESTED MEMBERS OF THE API EXECUTIVE COMMITTEE SHALL MAKE A DETERMINATION AS TO WHETHER A CONFLICT EXISTS AND WHAT SUBSEQUENT ACTION IS APPROPRIATE (IF ANY). A COPY OF THE

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Employer identification number

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POLICY IS PROVIDED TO ALL BOARD MEMBERS WHO ARE REQUESTED TO COMPLETE AND SIGN AN ACKNOWLEDGMENT AND DISCLOSURE FORM.

FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION FOR API'S PRESIDENT & CEO, OTHER OFFICERS, AND KEY EMPLOYEES ARE REVIEWED AND APPROVED BY THE EXECUTIVE COMMITTEE ON AN ANNUAL BASIS, BASED ON PERFORMANCE REVIEWS, EXTERNAL COMPARABLE DATA OBTAINED FROM CONSULTANTS, AND OTHER RELEVANT INFORMATION. THE PRESIDENT & CEO'S COMPENSATION IS BASED ON A WRITTEN CONTRACT APPROVED BY THE EXECUTIVE COMMITTEE. A REVIEW WAS CONDUCTED IN 2010.

FORM 990, PART VI, SECTION C, LINE 19: NO DOCUMENTS AVAILABLE TO THE PUBLIC.

FORM 990, PART VI, LINE 10B

EXPLANATION OF STATE COUNCILS

API OPERATES STATE PETROLEUM COUNCILS LOCATED IN VARIOUS STATE CAPITALS. THESE ARE NOT SEPARATE LEGAL ENTITIES BUT OPERATE AS BRANCH OFFICES OF API UNDER LOCAL TRADE NAMES. THERE ARE ALSO SEVERAL UNRELATED LOCAL CHAPTERS THAT EXIST THAT MAY USE THE API NAME, BUT THEY ARE SEPARATE LEGAL ENTITIES FROM API.

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

NET UNREALIZED LOSSES ON INVESTMENTS: -67,552.

PENSION-RELATED CHANGES OTHER THAN NET PERIODIC PENSION

COSTS 2,844,557.

TOTAL TO FORM 990, PART XI, LINE 5 2,777,005.

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FORM 990, PART XII, LINE 2C:

THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.





**Part V** Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)

**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
<b>a</b> Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity		X
<b>b</b> Gift, grant, or capital contribution to other organization(s)		X
<b>c</b> Gift, grant, or capital contribution from other organization(s)		X
<b>d</b> Loans or loan guarantees to or for other organization(s)		X
<b>e</b> Loans or loan guarantees by other organization(s)		X
<b>f</b> Sale of assets to other organization(s)		X
<b>g</b> Purchase of assets from other organization(s)		X
<b>h</b> Exchange of assets		X
<b>i</b> Lease of facilities, equipment, or other assets to other organization(s)		X
<b>j</b> Lease of facilities, equipment, or other assets from other organization(s)		X
<b>k</b> Performance of services or membership or fundraising solicitations for other organization(s)		X
<b>l</b> Performance of services or membership or fundraising solicitations by other organization(s)		X
<b>m</b> Sharing of facilities, equipment, mailing lists, or other assets		X
<b>n</b> Sharing of paid employees		X
<b>o</b> Reimbursement paid to other organization for expenses		X
<b>p</b> Reimbursement paid by other organization for expenses		X
<b>q</b> Other transfer of cash or property to other organization(s)		X
<b>r</b> Other transfer of cash or property from other organization(s)		X

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				





