Form S	1911
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Department of the Treasury

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

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

Open to Public

OMB No. 1545-0047

		nue Service			-	/Form990 for	' instru	ictions and	a the latest				inspection
Α	For th	e 2022 calen	dar year, or t	ax year be	ginning	7/01		, 2022	2, and endir	ng 6/3			, 20 2023
В	Check if	applicable:	C								D Employ	er iden	tification number
	Add	dress change	THE INST	ITUTE	FOR AL	VANCED					25-	1843	470
		me change	CATHOLIC								E Teleph		
		ial return	3601 WAT	TT WAY	GFS 30						213	7401	864
			LOS ANGE	LES, C	A 9008	9						1401	.004
		al return/terminated											¢ 442 000
		nended return	F							11/-> 1- 45'	G Gross		
	App	plication pending	F Name and a			REBECCA	KIN	IG CERL	ING	H(a) Is this			103 110
			SAME AS					•		H(b) Are all If "No,"	subordinates attach a list	s include	ed? Yes No structions.
1	Tax-e	exempt status:	X 501(c)(3)	501(c)	() (insert no.)	4947(a)(1) o	or 527				
J	Web	osite: HT	TPS://IA	CS.USC	.EDU					H(c) Group	exemption n	umber	
Κ	Form	of organization:	X Corporation	Trust	Assoc	iation Othe	r	L	Year of forma	tion: 199	9 M :	State of	legal domicile: CA
Pa	rt I	Summar									-		
	1	Briefly descril	be the organi	ization's m	nission or	most signific	ant ac	tivities: c	FF SCHF				
								<u> </u>					
ЭC													
nai													
Ver	2	Check this bo	x if th	le organiz	ation disc	ontinued its	operati	ions or dis	posed of m	ore than 2	5% of its	net as	 sets.
Activities & Governance		Number of vo										3	17
∞		Number of inc										4	17
ies		Total number										5	5
ivit		Total number										6	0
Act		Total unrelate										7a	0.
	b	Net unrelated	business tax	kable inco	me from F	orm 990-T, I	Part I,	line 11				7b	0.
											rior Year		Current Year
	8	Contributions	and grants (Part VIII.	line 1h).						476,5	518	299,933.
ue		Program serv									470,	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	255,555.
Revenue		Investment in		-	•.						371,9	206	142,140.
Be		Other revenue					-					137.	1,133.
_		Total revenue									848,8		443,206.
		Grants and si		-							040,0	501.	443,200.
		Benefits paid		-									
ŝ		Salaries, othe			-	-					502,3	395.	431,886.
Expenses	16a	Professional	fundraising fe	es (Part I	X, columr	n (A), line 11	e)						
bel	b	Total fundrais	ing expense	s (Part IX,	column (D), line 25)		1	91,814.				
ш		Other expens					4e)		,	-	241,6	516	371,584.
		Total expense	•	•		-	,				744,0		803,470.
		Revenue less											
. 0		Revenue less	expenses. c								104,8		-360,264.
Net Assets or Fund Balances	<u>-</u>	Total acceta (Dort V line	16)							ng of Curren		End of Year
asel 3ala	20	Total assets (Total liabilitie		,						8	<u>8,820,0</u>		9,194,608.
at A	21			,						· ·	69,5		46,247.
		Net assets or		es. Subtra	ct line 21	from line 20				8	3,750,5	558.	9,148,361.
Pa	rt II	Signatur	e Block										
Unde	r penalti	ies of perjury, I de	clare that I have	examined this	s return, inclu	iding accompany	ing sche	dules and stat	tements, and to	the best of m	ny knowledge	and bel	ief, it is true, correct, and
comp	olete. De	claration of prepa	rer (other than of	ficer) is base	d on all inform	mation of which p	preparer	has any know	ledge.				
Sid	ın	Signature of	officer							Date			
Sig He	re	REBECC	A KING C	ERLING					Ŧ	EXECUTI	VE DI	RECT	OR
			name and title						-				
		Print/Type p	reparer's name		Prepa	rer's signature			Date		Check	X if	PTIN
. .					-	-					-		
Pai		KEVIN		N LIONO		IN WONG					self-employ	eu	P01421794
rre	epare			N WONG	•								
US	e Onl	Firm's addre				LVD STE	202				Firm's EIN		-3812099
			ARCA	DIA, C	A 9100	6					Phone no.	626	-247-4339

BAA For Paperwork Reduction Act Notice, see the separate instructions.

No

		NSTITUTE FOR ADV			25-18	343470	Page 2
Par		of Program Service A					
			e or note to any line in thi	s Part III			X
1	Briefly describe the or	•					
	SEE_SCHEDULE_C)					
2	Did the organization un	dertake any significant prog	ram services during the yea	r which were not listed on th	e prior		
_	Form 990 or 990-EZ?					Yes	X No
		new services on Schedule					
3	Did the organization c	ease conducting, or make	significant changes in ho	w it conducts, any program	n services?	Yes	X No
	If "Yes," describe these	changes on Schedule O.					
4	Describe the organiza	tion's program service acc	complishments for each o	f its three largest program	services, as m	neasured by e	xpenses.
	Section 501(c)(3) and and revenue, if any, for	501(c)(4) organizations a or each program service r	re required to report the a eported.	amount of grants and alloc	ations to other	s, the total ex	penses,
4a	(Code:) (Expenses \$ 391	977 including grants	of \$) (Revenue	\$)
	SEE SCHEDULE C		<u>/////</u> ///////////////////////////////	· · ·		·	
						_ 	
						4	
4b	(Code:) (Expenses \$	including grants	of \$) (Revenue	\$)
4c	(Code:) (Expenses \$	including grants	of \$) (Revenue	\$)
	/(· · ·		·	
						_ 	
			_				
	0	(D) 'I (C) (I) (C)	<u></u>				
4d		es (Describe on Schedule			. č		
	(Expenses \$		ng grants of \$) (Revenue	9 9	,)
4e	Total program service	expenses	391,977.			Form	990 (2022)

 Form 990 (2022)
 THE INSTITUTE
 FOR ADVANCED

 Part IV
 Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I.</i>	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II.	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II.</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> .	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	Х	
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.			
а	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>	11a		Х
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>	11b		Х
С	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>	11c		Х
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>	11d	Х	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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>	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i> .	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions.	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		Х
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Form 990 (2022) THE INSTITUTE FOR ADVANCED
Part IV Checklist of Required Schedules (continued)

Far			V	N.
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	No 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? <i>If "Yes," complete Schedule J</i> .	23		x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If a "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.	23 24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> .	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV.	28c		Х
	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		Х
	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34		Х
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		
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	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		Х
	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	38	Х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		Yes	· No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 10			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	-	v	
BAA	(gambling) winnings to prize winners?	1c Form	X 990	(2022)
		1 0111		/

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Form	990		HE IN																25-1	84347	0	F	Page 5
Parl	t V	State	ment	s Re	gard	ing	Othe	er IF	RS F	Filin	gs a	nd 1	Гах С	omp	liance	e (CO	ntinı	ued)					
																						Yes	No
2a	Ente ment	r the numbe ts, filed for tl	r of em he cale	iploye ndar	es rep year e	porte endii	ed on ng wit	Forn th or	n W-: withi	3, Tra in the	ansmi e year	ittal o	of Wag ered b	ge and y this	l Tax St return.	ate-	2a			5			
b	lf at	least one is	reporte	d on	line 2	a, d	id the	e orga	aniza	ition f	file al	l requ	uired t	federa	l emplog	ymer	it tax	returns	5?		2b		Х
3a	Did t	he organizat	tion hav	ve uni	relater	d bu	sines	s aro	oss ir	۱com،	e of \$	51.00	0 or n	nore d	uring th	e vea	ar?				3a		Х
b	lf "Yes	s," has it filed a	Form 99	0-T for	this ye	ar? <i>li</i>	f "No" tc	o line 3	3b, pro	ovide a	an expla	anatior	n on Scl	nedule C)						3b		
	At an	ny time during ncial account	the ca	lendar	r year,	did	the or	rganiz	zation	n have	e an ir	nteres	st in, o	r a siq	nature o	r othe	er auth	nority o	ver, a		4a		Х
b	lf "Ye	es," enter th	e name	e of th	ie fore	eign	count	try															
	See i	instructions fo	or filing	requir	ement	ts for	r FinCE	EN F	orm 1	114, F	Report	t of Fo	oreign	Bank	and Fina	ancial	Accou	unts (Fl	BAR).				
5a	Was	the organiza	ation a	party	to a p	oroh	ibited	tax s	shelt	er tra	ansact	tion a	at any	time	during t	he ta	х уеа	r?			5a		Х
b	Did a	any taxable p	barty n	otify th	he orç	ganiz	zation	ı that	it wa	as or	is a r	party	to a p	orohib	ited tax	shelt	er tra	ansactio	on?		5b		Х
с	lf "Ye	es," to line 5	ia or 5t), did	the or	rgan	izatior	n file	: Forr	m 88	86-T?	•									5c		
6a	Does solici	s the organiz it any contrib	ation h	ave a that v	nnual were r	gro not t	ss rec ax de	ceipts educti	s tha ible a	t are as ch	norm aritat	ally of	greate ontribu	r than itions?	\$100,0	00, a	nd di	d the c	rganizat	ion	6a		Х
b	lf "Ye not ta	es," did the or ax deductible	rganizat e?	ion in	clude	with	every	solic	itatio	n an	expres	ss sta	atemer	nt that	such cor	ntribu	tions	or gifts	were		6b		
7	Orga	anizations th	at may	recei	ive de	duc	tible c	contr	ributi	ions	under	r sec	tion 1	70(c).									
а	Did t	he organizat	tion rec	eive a	a payr	men	t in ex	xcess	s of \$	\$75 n	nade	partly	y as a	contr	ibution a	and p	artly	for goo	ods and				
		ices provided																			7a		Х
		es," did the o	-		-							-			•						7b		
С		he organization 18282?																			7c		Х
d		es," indicate																i i			70		
		he organizat								-	-								ract?		7e		Х
		he organizat			-			-			-										7f		Х
		e organization		-	-						-		-										
-	as re	equired?																	n file a		7g		<u> </u>
	Form	n 1098-C?																			7h		
8	•	soring organ				-											-	•	-				
	-	nization have					-		-		-	the y	/ear?.								8		
	-	nsoring orga				-	-																
		the sponsorir					-														9a		
		the sponsorir						ributi	ion to	o a d	onor,	dono	or adv	isor, c	r relate	d per	son?.				9b		
		ion 501(c)(7)	-															i					
		ation fees an															10a						
b	Gros	s receipts, ir	ncludeo	l on F	orm 9	990,	Part \	VIII, I	line 1	12, fc	or pub	olic us	se of (club fa	cilities.		1 0 b						
		ion 501(c)(12																					
		s income fro															11a						
b	Gross agair	s income fron nst amounts	n other due or	source recei	es. (Do	o not rom	net a them.	1mour .)	าts dเ 	ue or	paid t	o oth	er sou	rces			11b						
		ion 4947(a)(•		•						-		-					•	?		12a		
b	lf "Ye	es," enter th	e amou	unt of	tax-e:	xem	pt inte	erest	: rece	eived	or ac	crue	d duri	ng the	year		12b						
13	Secti	ion 501(c)(2	9) qual	ified r	onpre	ofit	health	n insı	uran	ce is	suers												
а	Is the	e organizatio	on licer	ised to	o issu	ie qu	lalified	d hea	alth p	olans	in me	ore tl	han oi	ne sta	te?						13a		
	Note	See the ins	structio	ns for	^r addit	tiona	al info	ormat	ion t	he or	rganiz	atior	n must	repor	t on Sc	hedu	le O.						
	whicl	r the amoun h the organiz	zation i	is lice	nsed t	to is	sue q	qualifi	ied h	nealth	n plans	S					13b						
		r the amoun															13c						
14a	Did t	he organizat	tion rec	eive a	any pa	aym	ents fo	or ind	door	tann	ing se	ervice	es dur	ing the	e tax ye	ar?	· · · · ·	· · · · · ·	· · · · · · · · ·		14a		Х
b	lf "Ye	es," has it fil	led a F	orm 7	20 to	repo	ort the	ese p	aymo	ents?	? If "N	lo," p	orovide	e an e	xplanati	ion oi	n Sch	edule	0		14b		
15	exce	e organizatio ss parachute	e paym	ent(s)) durir	ng th	ne yea	ar?													15		Х
10		es," see the ir											000		hav -	·		· ·			10		X
	lf "Ye	e organizatio es," complet	e Form	n 4720), Sch	edul	le O.														16		^
17	resul	tion 501(c)(2 It in the impo es," complet	osition	of an	excise																17		
BAA										T	TEEA01	05L	09/01/22	2							Form	990	(2022)

	onicer, director, trastee, or key employee?	2		Λ
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents			
	since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		X
-	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more	-		
	members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: SEE SCHEDULE O			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b		Х
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	eveni	le Co	ode.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		Х
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
	Did the organization have a written conflict of interest policy? If "No," go to line 13.	12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a	X	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done SEE SCHEDULE . Q	12c	X	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official. SEE SCHEDULE. O.	15a	Х	
	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16-	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
TOa	taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed CA			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 50 available for public inspection. Indicate how you made these available. Check all that apply.)1(c)(3	3)s on	ly)
	Own website Another's website X Upon request X Other (explain on Schedule O)	SEE S	SCH.	0
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements availate the public during the tax year.	ble to		
20	State the name, address, and telephone number of the person who possesses the organization's books and records.			
	REBECCA KING CERLING 3601 WATT WAY GFS 304 LOS ANGELES CA 90089 213 740-186	4		
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Form 990 (2022) THE INSTITUTE FOR ADVANCED	Form 9	990	(2022)	THE	INSTITUTE	FOR	ADVANCED
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Section A. Governing Body and Management

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- ++: - - - -

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 on Part VI Schedule O. See instructions. Х

1a

1b

Check if Schedule O contains a response or note to any line i	n this Part VI	

1a Enter the number of voting members of the governing body at the end of the tax year..... If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad

b Enter the number of voting members included on line 1a, above, who are independent.....

2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other

authority to an executive committee or similar committee, explain on Schedule O.

17

17

Page 6

No

Yes

Form 990 (2022) THE INSTITUTE FOR ADVANCED	25-1843470	Page 7
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest C Independent Contractors	ompensated Employe	es, and
Check if Schedule O contains a response or note to any line in this Part VII		
Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated	d Employees	
a Complete this table for all persons required to be listed. Report compensation for the calendar year ending wit organization's tax year.		
• List all of the organization's current officers directors trustees (whether individuals or organization	is) regardless of amount of	

ctors, 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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

See the instructions for the order in which to list the persons above.

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

<u> </u>				((C)						
	(A) Name and title		Pos thar is	s both a direo	an of ctor/t	fficer truste	ee)		(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other
		per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-Ź/1099- MISC/1099-NEC)	(W-2/1099- MISC/1099-NEC)	compensation from the organization and related organizations
_(1)	REBECCA KING CERLING	40									
	EXECUTIVE DIR.	0	Х		Х				137,811.	0.	0.
_(2)	JOHN_BESSOLO	1									
	TRUSTEE	0	Х						0.	0.	0.
(3)		1									
	TRUSTEE	0	Х						0.	0.	0.
_(4)	DOMINIC DOYLE	1									
	TRUSTEE	0	Х						0.	0.	0.
_(5)	MICHAEL E ENGH SJ	1									
	TRUSTEE	0	Х						0.	0.	0.
(6)	DANIEL FINN	1									
	TRUSTEE	0	Х						0.	0.	0.
_(7)	RICHARD GRIMES	1									
	TRUSTEE	0	Х						0.	0.	0.
(8)	REV BRYAN HEHIR	1									
	TRUSTEE	0	Х						0.	0.	0.
(9)	REV_DENNIS_HOLTSCHNEIDER_CM	1									
	TRUSTEE	0	Х						0.	0.	0.
(10)	MICHAEL MORELAND	1									
	TRUSTEE	0	Х		Х				0.	0.	0.
(11)	JULIE MCANDREWS MORK	1									
	TRUSTEE	0	Х						0.	0.	0.
(12)	PATRICK PASCAL	1									
	TRUSTEE	0	Х						0.	0.	0.
(13)	BRO BERNARD PLOEGER SM	1									
	TRUSTEE	0	Х						0.	0.	0.
(14)	MAUREEN SHEA	1									
	TRUSTEE	0	Х						0.	0.	0.
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Par	t VII Section A. Officers, Directors, Tru	stees,	Key	Em	plo	bye	es, a	and	d Highest Corr	pensated Emp	loyees (continued)
		(B)			(0	•					
	(A) Name and title	Average hours per	box	, unle	ss pe	erson	e than is both or/trus	h an	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount
		week (list any hours	ord	sul	ŊЮ	Key	Hig	For	the organization (W-2/1099-	related organizations (W-2/1099-	of other compensation from the organization
		for related	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	MISC/1099-NEC)	MISC/1099-NEC)	and related organizations
		organiza - tions	br br	malt		oloye	e				
		below dotted line)	Istee	ruste		¢	ensa				
				¢			ted				
(15)	REV_MARTIN_SOLMA_SM	1_									
(16)	TRUSTEE	0	Х						0.	0.	0.
(10)	PETER STEINFELS	$-\frac{1}{0}$	Х						0.	0.	0.
(17)	MARTIN SKRIP	1									
	TRUSTEE	0	Х						0.	0.	0.
(18)	JASON ZENK	1_									
(10)	TRUSTEE	0	Х						0.	0.	0.
(19)	KYLE BALLARTA TRUSTEE	$-\frac{1}{0}$	х						0.	0.	0.
(20)	REV DORIAN LLWELYN SJ	40							0.	0.	0.
	PRESIDENT	0	Х		Х				0.	0.	0.
(21)											
(22)											
<u>`</u> /_											
(23)											
(24)											
<u></u>											
(25)											
11.	Subtotal								107 011		
	Subtotal Total from continuation sheets to Part VII, Section								<u>137,811.</u> 0.	0.	0.
	Total (add lines 1b and 1c)								137,811.	0.	0.
	Total number of individuals (including but not limited										
	from the organization 1										
											Yes No
3	Did the organization list any former officer, direct on line 1a? If "Yes, "complete Schedule J for such										. 3 X
4	For any individual listed on line 1a, is the sum of	reportab	le co	mne	nsa	tion	and	oth	er compensation	from	
	the organization and related organizations greate such individual	r than \$1	50,00	20?	lf "\	Yes,	" con	nple	ete Schedule J for	•	. 4 X
5	Did any person listed on line 1a receive or accrue										
	for services rendered to the organization? If "Yes	s," comple	ete S	cheo	dule	J f c	or su	ch p	person		. 5 X
Sec	tion B. Independent Contractors Complete this table for your five highest compens	sated ind	onon	dont		atra	otore	tha	t received more th	han \$100,000 of	
	compensation from the organization. Report compens	sation for	the ca	alen	dar y	year	endi	ng v	with or within the or	ganization's tax year	r.
	(A) Name and business addr	ess							(B) Description of		(C) Compensation
2	Total number of independent contractors (including b	ut not lim	ited to	o tho	se l	istec	d abo	ve)	who received more	than	
	\$100,000 of compensation from the organization	0									

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Part VIII Statement of Revenue

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	Check if Schedule O contains a					
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from under section 512-514
<u>ທ</u> 1a	a Federated campaigns	1a				
۲ B	b Membership dues	1b				
<u>م</u>	c Fundraising events	1c				
ar	d Related organizations	1d				
Ē	e Government grants (contributions)	1e				
ρ γ	f All other contributions, gifts, grants, and similar amounts not included above	1f 299,933.				
f, b	q Noncash contributions included in					
and Other Similar Amounts	lines 1a-1f	1g				
	h Total. Add lines 1a-1f	Business Code	299,933.			
22	a	Business Code				
	b					
	c					
	d					
	e					
f	f All other program service revenue.					
2a 	g Total. Add lines 2a-2f					
3	-					
	other similar amounts)		142,140.			142,14
4						
5						
	(i) Rea	(ii) Personal				
	a Gross rents 6 a					
	b Less: rental expenses 6b					
	c Rental income or (loss) 6c d d Net rental income or (loss)					
	(i) Securit					
78	a Gross amount from sales of assets					
Ι.	other than inventory 7a					
1	b Less: cost or other basis and sales expenses 7b					
	c Gain or (loss) 7c					
	d Net gain or (loss)					
	a Gross income from fundraising events					
	(not including \$					
	of contributions reported on line 1c).	- 				
	See Part IV, line 18	8a				
	b Less: direct expenses	8b				
0	c Net income or (loss) from fundrais	ing events				
98	a Gross income from gaming activities. See Part IV, line 19					
		9a				
	b Less: direct expenses	9b				
	c Net income or (loss) from gaming					
1 0 a	a Gross sales of inventory, less returns and allowances	1 0a				
	b Less: cost of goods sold	10a				
	c Net income or (loss) from sales of					
+		Business Code				
_ປ າ1a	a OTHER INCOME		1,133.	1,133.		
	b		_,,	_,		
	c					
ž ,	d All other revenue					
	e Total. Add lines 11a-11d		1,133.			
12	Total revenue. See instructions		443,206.	1,133.	0.	142,14

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	Check if Schedule O contains a r		(B)	(C)	(D)
Do 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and for- eign individuals. See Part IV, lines 15 and 16				
4					
5	Compensation of current officers, directors, trustees, and key employees	137,811.	50,175.	40,892.	46,744.
6	Compensation not included above to	137,011.	50,175.	40,092.	40,744.
0	disqualified persons (as defined under				
	section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7		213,132.	77,599.	63,242.	72,291.
8	Pension plan accruals and contributions	210,102.	11,555.	03,242.	12,291.
Ū	(include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	80,943.	35,849.	29,216.	15,878.
10	Payroll taxes				
	Fees for services (nonemployees):				
	Management				
	Legal				
	Accounting	37,865.	16,770.	13,667.	7,428.
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
	Investment management fees	21,962.		21,962.	
ç	Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule 0.)				
12	Advertising and promotion	17,490.	7,746.	6,313.	3,431.
13	Office expenses	56,937.	25,217.	20,551.	11,169.
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	46,590.	34,554.	4,467.	7,569.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20					
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance Other expenses. Itemize expenses not	11,955.	5,295.	4,315.	2,345.
24	on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.).				
a	HONORARIA	77,872.	77,872.		
	OTHER_EXPENSES	47,078.	39,924.	4,010.	3,144.
c		15,485.	10,369.	3,196.	1,920.
c		12,258.	5,530.	4,252.	2,476.
(e All other expenses	26,092.	5,077.	3,596.	17,419.
25	Total functional expenses. Add lines 1 through 24e	803,470.	391,977.	219,679.	191,814.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Form 990 (2022) THE INSTITUTE FOR ADVANCED

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Part X Balance Sheet

		(A) Beginning of year	(B) End of year
1	Cash – non-interest-bearing	216,123. 1	53,389
2	Savings and temporary cash investments		
3	Pledges and grants receivable, net		261,459
4	Accounts receivable, net	5,152. 4	
5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	% 5	
6	Loans and other receivables from other disqualified persons (as defined section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		
7	Notes and loans receivable, net.		
8	Inventories for sale or use.		
9	Prepaid expenses and deferred charges.		
-	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	15,545.	
	Less: accumulated depreciation	10	c
11	Investments – publicly traded securities.	7,458,873. 11	8,324,618
12	Investments – other securities. See Part IV, line 11		
13	Investments – program-related. See Part IV, line 11		
14	Intangible assets.		
15	Other assets. See Part IV, line 11	752,848. 15	540,708
16	Total assets. Add lines 1 through 15 (must equal line 33)	8,820,058.16	
17	Accounts payable and accrued expenses	726. 17	17,910
18	Grants payable		
19	Deferred revenue		
20	Tax-exempt bond liabilities		
21	Escrow or custodial account liability. Complete Part IV of Schedule D		
22	Loans and other payables to any current or former officer, director, trust key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	ee, 22	
23	Secured mortgages and notes payable to unrelated third parties		
24	Unsecured notes and loans payable to unrelated third parties		
25	Other liabilities (including federal income tax, payables to related third p and other liabilities not included on lines 17-24). Complete Part X of Sch		
26	Total liabilities. Add lines 17 through 25.	69,500. 26	46,247
	Organizations that follow FASB ASC 958, check here X and complete lines 27, 28, 32, and 33.		
27	Net assets without donor restrictions		1,547,641
28	Net assets with donor restrictions		7,600,720
	Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.		
29	Capital stock or trust principal, or current funds		
30	Paid-in or capital surplus, or land, building, or equipment fund		
31	Retained earnings, endowment, accumulated income, or other funds		
32	Total net assets or fund balances	8,750,558. 32	9,148,361
-			

Form	1 990 (2022) THE INSTITUTE FOR ADVANCED 25-	1843470)	Pa	age 12		
Par	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI.						
1	Total revenue (must equal Part VIII, column (A), line 12)	1	4	43,2	206.		
2	Total expenses (must equal Part IX, column (A), line 25)	2	8	03,4	470.		
3	Revenue less expenses. Subtract line 2 from line 1	3			264.		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	8,7	50,5	558.		
5	Net unrealized gains (losses) on investments	5	7	58,0	067.		
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments	8					
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	9,1	48,3	361.		
Par	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII				. X		
				Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or review separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis	ed on a					
b	Were the organization's financial statements audited by an independent accountant?		2b	Х			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis						
С	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?		2c	Х			
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. SEE SCHEDULE O 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform							
	Guidance, 2 C.F.R Part 200, Subpart F?		3a		Х		
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 on Schedule O and describe any steps taken to undergo such audits		3b				
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		Public Chari	ty Status and P	ublic	Supr	ort	OMB No. 1545-0047			
SCHEDULE A (Form 990)	Con	plete if the organiza	tion is a section 501(c) a)(1) nonexempt charita	(3) orga	nization		2022			
		Attac	ch to Form 990 or Form	n 99 0-EZ			Open to Public			
Department of the Treasury Internal Revenue Service	G	o to www.irs.gov/For	m990 for instructions a	and the	latest in	formation.	Inspection			
	THE INSTIT	UTE FOR ADVAN	CED			Employer identific	ation number			
	CATHOLIC S	TUDIES				25-184347				
			organizations must				ctions.			
<u> </u>	•		(For lines 1 through 12,		2	,				
			hurches described in sec tach Schedule E (Form		(b)(1)(A)(i).				
			ization described in se		0(b)(1)(A	Miji).				
	•		unction with a hospital				Inter the hospital's			
name, city,	-									
section 170	5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)									
_ H	ate, or local gov	ernment or governme	ental unit described in s	section 1	1 70(b)(1)	(A)(v).				
An organizat	ion that normally i 70(b)(1)(A)(vi). (receives a substantial p Complete Part II.)	part of its support from a	governm	iental uni	t or from the general pu	blic described			
8 A communit	y trust described	l in section 170(b)(1)((A)(vi). (Complete Part	II.)						
			ction 170(b)(1)(A)(ix) oper e (see instructions). Ente							
investment i	An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)									
11 An organiza	tion organized a	nd operated exclusive	ely to test for public saf	ety. See	e sectior	n 509(a)(4).				
or more pub	licly supported of	organizations describe	ely for the benefit of, to ed in section 509(a)(1) (supporting organization	or sectic	on 509(a)(2). See section 509(a	ut the purposes of one (3). Check the box on			
a Type I. A sup organization(porting organizati	on operated, supervise gularly appoint or elec	ed, or controlled by its sup t a majority of the directo	pported o	organizat	ion(s), typically by giving	g the supported on. You must			
management	upporting organiz of the supporting ete Part IV, Sect	organization vested in	controlled in connection the same persons that c	with its	support manage	ed organization(s), by the supported organizat	having control or tion(s). You			
			tion operated in connectio plete Part IV, Sections	on with, a	nd functio	onally integrated with, its	supported			
d Type III non-functionally	functionally integ	rated. A supporting orgonization generally	ganization operated in col y must satisfy a distribu	nnection Ition req	with its s	supported organization(s) that is not			
e Check this b	ox if the organiz	ation received a writt	ten determination from supporting organization	the IRS	that it is	а Туре I, Туре II, Тур	e III functionally			
f Enter the numb	er of supported	organizations								
g Provide the foll	owing informatio	n about the supporte	d organization(s).							
(i) Name of supported	organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	organiza in your o	Is the tion listed governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)			
				Yes	No					
(A)										
(B)										
(C)										
(D)										
(E)										
_/				1						

Total

THE INSTITUTE FOR ADVANCED

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Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

	org	annz		- iunc	, .0	quanty	una
Castian	Δ.	D .	. . ! .	C		a	

-					1		
	ndar year (or fiscal year nning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,391,444.	652,523.	913,390.	476,520.	299,933.	3,733,810.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	1,391,444.	652,523.	913,390.	476,520.	299,933.	3,733,810.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						1,482,861.
6	Public support.Subtract line 5from line 4						2,250,949.
Sec	tion B. Total Support						
Cale begi	ndar year (or fiscal year nning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	1,391,444.	652,523.	913,390.	476,520.	299,933.	3,733,810.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	371,364.	206,596.	201,413.	371,906.	142,140.	1,293,419.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) SEE PART VI	6,002.	851.		437.	1,133.	8,423.
11	Total support. Add lines 7 through 10						5,035,652.
12	Gross receipts from related activ	vities, etc. (see ins	structions)			12	0.
13	First 5 years. If the Form 990 is organization, check this box and						
Sec	tion C. Computation of Pu	blic Support P	ercentage				
14	Public support percentage for 20						44.70 %
15	Public support percentage from	2021 Schedule A,	Part II, line 14			15	47.06%
16a	33-1/3% support test-2022. If t and stop here. The organization						
b	33-1/3% support test-2021. If th and stop here. The organization						
17a	10%-facts-and-circumstances te or more, and if the organization the organization meets the facts	meets the facts-a	nd-circumstances	test, check this b	ox and stop here	. Explain in Part	VI how
	10%-facts-and-circumstances te or more, and if the organization organization meets the facts-and	meets the facts-and d-circumstances te	nd-circumstances est. The organizati	test, check this b on qualifies as a	ox and stop here publicly supporte	Explain in Part d organization	VI how the
18	Private foundation. If the organized	zation did not che	ck a box on line 1	3, 16a, 16b, 17a,	or 17b, check thi	s box and see ins	structions

Schedule A (Form 990) 2022

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support						
	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in any activity that is						
	related to the organization's						
	tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						
4	Tax revenues levied for the						
	organization's benefit and either paid to or expended on						
5	its behalf The value of services or						
Ũ	facilities furnished by a						
	governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1,						
	2, and 3 received from disqualified persons.						
b	Amounts included on lines 2						
	and 3 received from other than disgualified persons that						
	exceed the greater of \$5,000 or						
	1% of the amount on line 13						
	for the year.						
	Add lines 7a and 7b.						
8	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6						
1 0 a	Gross income from interest, dividends,						
	payments received on securities loans, rents, royalties, and income from						
	similar sources						
b	Unrelated business taxable	-					
	income (less section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included on line 10b, whether or not the business is						
	regularly carried on						
12	Other income. Do not include						
	gain or loss from the sale of capital assets (Explain in						
	Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is	for the organizati	on's first, second,	third, fourth, or	fifth tax year as a	section 501(c)(3)	
	organization, check this box and						
	tion C. Computation of Pul		5				0
	Public support percentage for 20	•					00
_	Public support percentage from						010
Sec	tion D. Computation of Inv					, <u>,</u>	
17	Investment income percentage f			-			00
	Investment income percentage f						0/0
19a	33-1/3% support tests-2022. If i	the organization o	lid not check the	box on line 14, a	nd line 15 is more	than 33-1/3%, and	l line 17
	is not more than 33-1/3%, check						
b	33-1/3% support tests—2021. If the line 18 is not more than 33-1/3%	the organization of the or	lid not check a bo	ox on line 14 or li	ne 19a, and line 1	6 is more than 33-	I/3%, and □
20	Private foundation. If the organi.						
20	i iivate iouiluation. Il the organi			1 -1 , 190, 01 190, 0	CHECK THE DOX 900		• • • • • • • • • • • • • • •

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 Part IV
 Supporting Organizations

 (Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).			
3	a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b	2		
	and 3c below.	3a		
	b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
	c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4	a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
	b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
	c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5	a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5а		
	b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
	c Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9	a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
	b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>	9b		
	c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9с		
10	a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.	1 0 a		
	b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

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Yes

1

2

No

Par	IV Supporting Organizations (continued)			-
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below,			
	the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	1b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.	11c		

Section B. Type I Supporting Organizations

- 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in **Part VI** how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
- 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

Section C. Type II Supporting Organizations

Yes No Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in **Part VI** how control or management of the 1 1 supporting organization was vested in the same persons that controlled or managed the supported organization(s).

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at			
	all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		

Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
 - The organization satisfied the Activities Test. Complete line 2 below. а
 - The organization is the parent of each of its supported organizations. Complete line 3 below. h
 - The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions). С

2 Activities Test. Answer lines 2a and 2b below.

- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

2a

2b

3a

Yes

No

Part V

Page 6

Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 0.035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C – Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.85 of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functionally inte	arated	Type III supporting or	nanization

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions). 7

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Schedule A (Form 990) 2022

Par		ipporting Organiza	ations (continue	ed)	
Sec	tion D – Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exempt pu	rposes		1	
2	Amounts paid to perform activity that directly furthers exempt purposes of	of supported organization	IS,		
	in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purposes of su		3		
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required – provide	details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
_7	Total annual distributions. Add lines 1 through 6.		4-4-11-	7	
8	Distributions to attentive supported organizations to which the organizati in Part VI). See instructions.	on is responsive (provide	e details	8	
9	Distributable amount for 2022 from Section C, line 6			9	
	Line 8 amount divided by line 9 amount			10	
Sec	tion E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributi Pre-2022	ons	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reasonable cause required – <i>explain in Part VI</i>). See instructions.				
3	Excess distributions carryover, if any, to 2022				
а	From 2017				
b	Prom 2018				
c	From 2019				
c	From 2020				
e	Prom 2021				
1	f Total of lines 3a through 3e				
ġ	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
i	i Carryover from 2017 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D, line 7: \$				
а	Applied to underdistributions of prior years				
	Applied to 2022 distributable amount				
c	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j and 4c.				
8	Breakdown of line 7:				
а	Excess from 2018				
b	Excess from 2019				
	Excess from 2020				
c	Excess from 2021				
e	Excess from 2022				

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Schedule A (Form 990) 2022

Part VI

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

PART II, LINE 10 - OTHER INCOME

NATURE AND SOURCE		2022		2021	2020			2019		2018
MISC INCOME TOTAL	\$. \$	1,133. 1,133.	\$ \$	<u>437.</u> 437.	\$	0.	\$ \$	<u>851.</u> 851.	\$ \$	6,002. 6,002.

SCHEDULE D (Form 990) Supplemental Financial Statements Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.					OMB No. 1545-0047		
Depar Intern	tment of the Treasury al Revenue Service		Attach to Form 990. gov/Form990 for instructions and			Open t Inspec	o Public tion
	of the organization				Employer i	dentification n	
CAT	HOLIC STUDI				25-184		
Pa			nor Advised Funds or Oth "Yes" on Form 990, Part IV, line 6.		r Accounts	5.	
		<u></u>	(a) Donor advised fun		b) Funds and	other acco	unts
1	Total number at e	end of year			•		
2	Aggregate value of con	ntributions to (during year)					
3		ants from (during year)					
4	Aggregate value	at end of year					
5	Did the organizat are the organizat	ion inform all donors and dor ion's property, subject to the	nor advisors in writing that the as organization's exclusive legal co	sets held in donor advis ntrol?	sed funds	Yes	No
6	Did the organizat	ion inform all grantees, dono	rs, and donor advisors in writing	that grant funds can be	used only		
	impermissible pri	vate benefit?	of the donor or donor advisor, o			Yes	No
Pa	t II Conser	vation Easements.					
		5	"Yes" on Form 990, Part IV, line 7.				
1			y the organization (check all that				
		of land for public use (for examp	ole, recreation or education)	Preservation of a h	5 1		
		natural habitat		Preservation of a c	ertified histori	c structure	
•		of open space					
2	last day of the ta		neld a qualified conservation contrib	ution in the form of a cor	Held at the		
	Total number of (conservation easements					
			ments				
	0		fied historic structure included in	-			
	I Number of conse	rvation easements included i	n (c) acquired after July 25, 2006	and not on a			
3		5	nsferred, released, extinguished, or		zation during th	ie	
4	Number of states	where property subject to co	onservation easement is located				
5			garding the periodic monitoring, into it holds?		violations,	Yes	No
6	Staff and voluntee	r hours devoted to monitoring, i	inspecting, handling of violations, a	nd enforcing conservatior	n easements di	uring the yea	ar
7	Amount of expense	es incurred in monitoring, inspe	ecting, handling of violations, and er	nforcing conservation eas	ements during	the year	
8	Does each conse and section 170(h	rvation easement reported or n)(4)(B)(ii)?	n line 2(d) above satisfy the requ	irements of section 170	(h)(4)(B)(i)	Yes	No
9	In Part XIII, desc include, if applica conservation eas		oorts conservation easements in i to the organization's financial sta	ts revenue and expensitements that describes	e statement a the organizat	nd balance ion's accou	sheet, and inting for
Pa	t III Organiz	zations Maintaining Co	llections of Art, Historical "Yes" on Form 990, Part IV, line 8.	Treasures, or Othe	er Similar A	ssets.	
1;	If the organization historical treasure Part XIII the text	n elected, as permitted unde es, or other similar assets he of the footnote to its financia	r FASB ASC 958, not to report in Id for public exhibition, education I statements that describes these	its revenue statement a, or research in furthera e items.	and balance s ance of public	sheet works service, p	s of art, rovide in
I	following amount	s relating to these items:	r FASB ASC 958, to report in its or public exhibition, education, or re				
	(i) Revenue incl	uded on Form 990, Part VIII,	line 1		\$		
~							
2	It the organization amounts required	received or held works of art, f to be reported under FASB t on Form 990, Part VIII, line	historical treasures, or other similar ASC 958 relating to these items: 1	assets for financial gain,	provide the fol	lowing	
			L				
BAA	For Paperwork R	Reduction Act Notice, see the	Instructions for Form 990.	TEEA3301L 07/06/22	Scheo	lule D (For	m 990) 2022

		_
BAA For Paperwork Reduction Act Notice	see the Instructions for Form	90
BAA TOTT uper work needed on Act notice,	See the module of 10 10 m	
BAA For Paperwork Reduction Act Notice,	see the Instructions for Form	1

Schedule D (Form 990) 2022 THE					25-1843		Page 2
Part III Organizations Main	taining Collect	tions of Art, His	torical Trea	asures, or	Other Similar As	sets (conti	inued)
3 Using the organization's acquisition items (check all that apply):	, accession, and ot	her records, check a	ny of the follow	ving that make	e significant use of its c	ollection	
a Public exhibition		d Loan d	or exchange p	orogram			
b Scholarly research		e Other					
c Preservation for future gener	ations						
4 Provide a description of the organiz Part XIII.	ation's collections a	and explain how they	further the org	ganization's ex	kempt purpose in		
5 During the year, did the organiza to be sold to raise funds rather the	tion solicit or rece nan to be maintair	ive donations of an ned as part of the o	t, historical tre rganization's	easures, or o collection?	ther similar assets	Yes	No
Part IV Escrow and Custod reported an amount on Fo	ial Arrangeme orm 990, Part X, lir	nts. Complete if th ie 21.	e organization	answered "Y	'es" on Form 990, Part	IV, line 9, or	
1 a Is the organization an agent, trus	stee, custodian or	other intermediary	for contributio	ons or other a	assets not included	Yes	No
on Form 990, Part X? b If "Yes," explain the arrangement ir					·····		
		siete the fenething ta			ļ.	Amount	
c Beginning balance					1 c		
d Additions during the year					1 d		
e Distributions during the year					1 e		
f Ending balance					1 f		
2 a Did the organization include an a	mount on Form 9	90, Part X, line 21,	for escrow or	custodial ac	count liability?	Yes	No
b If "Yes," explain the arrangemen	t in Part XIII. Che	ck here if the expla	nation has be	en provided	on Part XIII		
Part V Endowment Funds.		.		,		·	
	(a) Current year	(b) Prior year		vo years back	(d) Three years back	(e) Four year	
1 a Beginning of year balance	6,634,98	8. 7,621,8	76. 6,	370,766.	6,055,570.	5,531	
b Contributions					153,637.	237	,412.
c Net investment earnings, gains, and losses	740,70	8986,8	88. 1,	251,110.	161,559.	286	,831.
d Grants or scholarships							
e Other expenditures for facilities and programs					0.		
f Administrative expenses		6 6 6 6 4 0	~ 7	CO1 07C	6 070 766	6.055	F7 0
g End of year balance	7,375,69			<u>621,876.</u>	6,370,766.	6,055	,570.
2 Provide the estimated percentage	-		e ig, column	(a)) neid as:			
a Board designated or quasi-endov		6					
b Permanent endowment c Term endowment	<u>\$ 100.00</u>						
		100%					
The percentages on lines 2a, 2b, ar							
3a Are there endowment funds not in t	he possession of th	e organization that a	are held and ac	iministered for	r the	Yes	No
organization by: (i) Unrelated organizations						3a(i)	X
(ii) Related organizations						3a(i)	X
b If "Yes" on line 3a(ii), are the relation						3b	
4 Describe in Part XIII the intended	-					55	
Part VI Land, Buildings, and							
Complete if the organizati		on Form 990 Part	IV line 11a S	ee Form 990	Part X line 10		
Description of property			-				
		Cost or other basis (investment)	(b) Cost or basis (ot	ther)	(c) Accumulated depreciation	(d) Book v	alue
1 a Land							
b Buildings							
c Leasehold improvements							
d Equipment							
e Other			,:				
Total. Add lines 1a through 1e. (Column	n (d) must equal	Form 990, Part X, o	column (B), lii	ne 10c.)			0.
BAA					Schedu	ile D (Form 99	0) 2022

TEEA3302L 07/06/22

Part VII Investments – Other Securities. Complete if the organization answered "Yes" on	Form 990, Part IV, lin	N/A e 11b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year marke	et value
(1) Financial derivatives			
(2) Closely held equity interests.	-		
(3) Other	_		
(A)			
(B)			
(C)			
(D)			
(D) (E)			
(G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)			
Part VIII Investments – Program Related. Complete if the organization answered "Yes" on	Form 990, Part IV, lin	N/A e 11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year n	narket value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets.			
Complete if the organization answered "Yes" on	Form 990 Part IV line	e 11d See Form 990 Part X line 15	
(a) De:	scription	(b) B	ook value
(1) DEPOSIT ACCOUNTS DUE FROM USC			540,708.
(2)			
(3)			
(4)			
(5)			<u> </u>
(6) (7)			
(8)			<u> </u>
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (b)	B) line 15.)		540,708.
Part X Other Liabilities. Complete if the organization answered "Yes" on	· ·		010,100.
	iption of liability		ook value
(1) Federal income taxes			
(2) ACCRUED VACATION			20,424.
(3) CREDIT CARD PAYABLE			3,833.
(4) OTHER ACCRUALS			4,080.
(5)			
(6)			<u> </u>
(7) (8)			
(8) (9)			<u> </u>
(10)			
(11)			<u>.</u>
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)			28,337.
2. Liability for uncertain tay positions. In Part XIII, provide the text of the fo			

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII.

Schedule D (Form 990) 2022 THE INSTITUTE FOR ADVANCED	25-1843470) Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per	r Return.	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	1,255,266.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments	57.	
b Donated services and use of facilities	5.	
c Recoveries of prior year grants 2c		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	2e	834,022.
3 Subtract line 2e from line 1	3	421,244.
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 21, 96	2.	
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b.	4c	21,962.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	443,206.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses p	per Return.	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	857,463.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		,
a Donated services and use of facilities	5	
b Prior year adjustments	<u></u>	
c Other losses		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	2e	75,955.
3 Subtract line 2e from line 1		781,508.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		/01/000.
a Investment expenses not included on Form 990, Part VIII, line 7b	2	
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b.	4c	21,962.
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	803,470.
Part XIII Supplemental Information.		

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

PART X - FASB ASC 740 FOOTNOTE

GENERALLY ACCEPTED ACCOUNTING PRINCIPLES PROVIDE ACCOUNTING AND DISCLOSURE GUIDANCE ABOUT POSITIONS TAKEN BY AN ORGANIZATION IN ITS TAX RETURNS THAT MIGHT BE UNCERTAIN. MANAGEMENT HAS CONSIDERED ITS TAX POSITIONS AND BELIEVES THAT ALL OF THE POSITIONS TAKEN BY THE INSTITUTE IN ITS TAX RETURNS ARE MORE LIKELY THAN NOT TO BE SUSTAINED UPON EXAMINATION.

BAA

Schedule D (Form 990) 2022

Department of the Treasury Internal Revenue Service

OMB No. 1545-0047
2022
Open to Public Inspection

Name of the organization	THE	INSTITUTE	FOR	ADVANCED	
CATHOLIC STUDIES					

Employer identification number
25-1843470

FORM 990, PART I, LINE 1 - ORGANIZATION MISSION OR SIGNIFICANT ACTIVITIES

THE INSTITUTE'S MISSION IS TO CONDUCT RESEARCH ON KEY ISSUES FACING SOCIETY TO HELP BOTH THE CHURCH AND SOCIETY DEAL THOUGHTFULLY WITH THE MAJOR ISSUES THEY FACE GLOBALLY. THE INSTITUTE ALSO SPONSORS AND CONDUCTS RESEARCH AND SCHOLARSHIP ON ALL ASPECTS OF THE CATHOLIC TRADITION, CULTURAL/ECCLESIAL HERITAGE OF CATHOLICISM, AND DISSEMINATE THE RESULTS OF SUCH RESEARCH.

FORM 990, PART III, LINE 1 - ORGANIZATION MISSION

THE INSTITUTE'S MISSION IS TO CONDUCT RESEARCH ON KEY ISSUES FACING SOCIETY TO HELP BOTH THE CHURCH AND SOCIETY DEAL THOUGHTFULLY WITH THE MAJOR ISSUES THEY FACE GLOBALLY. THE INSTITUTE ALSO SPONSORS AND CONDUCTS RESEARCH AND SCHOLARSHIP ON ALL ASPECTS OF THE CATHOLIC TRADITION, CULTURAL/ECCLESIAL HERITAGE OF CATHOLICISM, AND DISSEMINATE THE RESULTS OF SUCH RESEARCH.

FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS

THE INSTITUTE DEVELOPS DISTINCTIVE INTELLECTUAL CAPITAL BY STUDYING THE LONG AND RICH CATHOLIC INTELLECTUAL TRADITION. THAT TRADITION INCLUDES NOT ONLY BRILLIANT THEOLOGIANS AND PHILOSOPHERS, BUT ALSO SCIENTISTS, SOCIAL SCIENTISTS, HISTORIANS, POETS, WRITERS, ARTISTS, ARCHITECTS AND MUSICIANS. THE INSTITUTE PROMOTES UNDERSTANDING, CRITIQUING, AND DEVELOPING CATHOLIC INTELLECTUAL LIFE FOR THE SERVICE NOT ONLY OF THE CHURCH, BUT ALL RELIGIONS, ESPECIALLY AS IT DEDICATES ITSELF TO THE COMMON GOOD. THE INSTITUTE DRAWS UPON AN INTERNATIONAL GROUP OF SCHOLARS, ALL OF WHOM, WHATEVER THEIR RELIGIOUS BACKGROUND OR SCHOLARLY DISCIPLINE, SEEK TO UNDERSTAND CATHOLICISM AND ITS VALUE FOR THE WORLD TODAY. THE INSTITUTE'S RESEARCH, PUBLICATIONS, CONFERENCES, AND ARTICLES ARE INTERNATIONALLY RECOGNIZED AS THOUGHTFUL CONTRIBUTIONS TO THE UNDERSTANDING, CLARIFICATION AND RESOLUTION OF MAJOR ISSUES FACING THE CHURCH, RELIGIONS AND GLOBAL SOCIETY. SINCE 2007, THE INSTITUTE HAS

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FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS

RELIGION AND PUBLIC LIFE BY FEATURING THE WORK OF SCHOLARS, JOURNALISTS, ARTISTS, AND LEADERS. THROUGH A RANGE OF MEETINGS, COLLOQUIA, CONFERENCES AND SEMINARS, THE INSTITUTE COORDINATES AND SPONSORS SCHOLARSHIP ON A NUMBER OF CORE THEMES AS FOLLOWS: THE TRUE WEALTH OF NATIONS CATHOLIC SOCIAL THOUGHT AND ECONOMICS .EDUCATION CATHOLIC AND INTERRELIGIOUS CATHOLIC TRADITION AND THE EXERCISE OF AUTHORITY THE GENERATIONS IN DIALOGUE INTERRELIGIOUS AND ECUMENICAL TOPICS.

FORM 990, PART VI, LINE 8 - EXPLANATION OF NO CONTEMPORANEOUSLY DOCUMENTATION OF MEETINGS THE ORGANIZATION DOES NOT HAVE A COMMITTEE WITH THE AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY.

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

THE INSTITUTE'S TAX RETURN IS REVIEWED BY THE AUDIT COMMITTEE PRIOR TO FILING. ALSO, A COPY OF THE TAX RETURN IS DISTRIBUTED TO BOARD MEMBERS WITHOUT SCHEDULE B OR THE SCHEDULE A SUPPORTING STATEMENT IDENTIFYING EXCESS CONTRIBUTIONS FOR REVIEW BEFORE FILING.

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

IN CONNECTION WITH ANY ACTUAL OR POSSIBLE CONFLICTS OF INTEREST, AN INTERESTED PERSON MUST DISCLOSE THE EXISTENCE AND NATURE OF HIS OR HER FINANCIAL INTEREST TO THE BOARD OR TO MEMBERS OF COMMITTEES WITH BOARD DELEGATED POWERS CONSIDERING THE PROPOSED TRANSACTION OR ARRANGEMENT. SUCH DISCLOSURE SHOULD BE MADE PROMPTLY UPON DISCOVERY OF THE EXISTENCE OF ANY ACTUAL OR POTENTIAL CONFLICT OF INTEREST, AND IN THE ANNUAL DISCLOSURE STATEMENT. AFTER DISCLOSURE OF THE FINANCIAL INTEREST, THE INTERESTED PERSON IS REQUIRED TO LEAVE THE BOARD OR COMMITTEE MEETING WHILE THE FINANCIAL INTEREST IS DISCUSSED AND VOTED UPON. THE REMAINING BOARD OR COMMITTEE MEMBERS SHALL DECIDE IF A CONFLICT OF INTEREST EXISTS AND, IF SO, HOW IT SHOULD BE ADDRESSED. DIRECTORS ARE REQUIRED ANNUALLY SIGN A STATEMENT THAT CONFIRMS WHETHER OR NOT SUCH PERSON HAS ANY ACTUAL OR POTENTIAL CONFLICT OF INTEREST AND, IF SO,

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FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS (CONTINUED) DISCLOSES THE NATURE OF THAT ACTUAL OR POTENTIAL CONFLICT. THE ANNUAL DISCLOSURE STATEMENT ALSO AFFIRMS THAT THE DIRECTOR HAS RECEIVED A COPY OF THIS CONFLICT OF INTEREST POLICY, HAS READ AND UNDERSTANDS THE POLICY, AND HAS AGREED TO COMPLY WITH THE POLICY. DURING THE YEAR ENDED JUNE 30, 2023, THE ORGANIZATION OBTAINED THE ANNUAL SIGNED CONFLICT OF INTEREST REPRESENTATION FORMS FROM MEMBERS OF ITS BOARD OF DIRECTORS.

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT THE PRESIDENT'S SALARY IS DETERMINED BY THE BOARD AFTER CAREFUL CONSIDERATION OF GOALS AND EVALUATION OF PERFORMANCE, AND FOLLOW I.R.S. SAFE-HARBOR PROCEDURES. PAYMENTS ARE MADE TO THE PRESIDENT'S RELIGIOUS ORDER.

FORM 990, PART VI, LINE 18 - EXPLANATION OF OTHER MEANS FORMS AVAILABLE FOR PUBLIC INSPECTION THE ORGANIZATION'S FORM 990 IS AVAILABLE UPON REQUEST. THE ORGANIZATION'S FORM 990, WITHOUT SCHEDULE B OR THE SCHEDULE A SUPPORTING STATEMENT IDENTIFYING EXCESS CONTRIBUTIONS, IS ALSO AVAILABLE ON PUBLIC WEBISTE WWW.GUIDESTAR.ORG

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XII, LINE 2 - CHANGE OF OVERSIGHT OR SELECTION PROCESS

THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.