Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

2022 Open to Public Inspection

OMB No. 1545-0047

Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

For the 2022 calendar year, or tax year beginning10/01/22, and ending 09/30/23

<u>~</u> В	Check if a	applicable: C	Name of or												D I	mploye	r identific	ation number	er
\neg	Address c		C Name of organization INTERNATIONAL ASSOCIATION FOR GREAT LAKES RESEARCH - MICHIGAN Doing business as D Employer identification number 38-2689988																
Ħ	Name cha	ange	Doing busin	ess as											∃ 3	8-2	6899	88	
	Initial retur	ırn	4840	SOUT	TH ST	x if mail is not o	D D							Room/suite			e number 665-	5303	
	Final retur terminated		-			country, and Z													
	Amended	return =	ANN A				М	I 481	108	-971	L9				G (Gross rec	eipts\$	920	,521
=	Application		Name and											H(a) Is this a	group r	eturn for	subordinate	es? Yes	X No
	Application	n pending	JEROI				ъο:	A TO						U/h) Ara all	oub ordin	otoo ina	ludo dO	Yes	∏ No
						STATE	ROZ		т ,	101	0			H(b) Are all			. See instr	ш	
			ANN			. / \				481		<u> </u>			40 , and	ion a not	OCC IIISti	uctions	
_		npt status:	X 501		501(c	c) ()	(insert	no.)		4947	(a)(1) or	527							
	Website:		W.IAC		7	A ! . !	. \Box	Other						H(c) Group				-6 le mel alema!	МТ
_	Part I	organization:		ation	Trust	Association	n _	Other					L YE	ar of formation:	<u> 190</u>		M State	of legal domi	cile: TAT T
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ij	5 T	Total numb	or of indiv	iduale	employe	ed in calenda	ar ves	11119 DO ar 2022	uy (i (Dar	t alt v + \/ lir	1, III (C 10) 10 (22)					5	2		
Activities						te if necessa										6	88		
⋖						om Part VIII		mn (C)	 line							7a			0
	b N	Vet unrelat	ed busine	ss taxa	able inco	me from Fo	rm 99	30-T Pa	ırt I	line 1						7b			0
	 ~	Net unrelated business taxable income from Form 990-T, Part I, line 11										Prior				Current Year			
a	8 0	Contributio	ns and gra	ants (P	art VIII,	line 1h)							[83,8	381		101	,819
ž	9 F	Program s	ervice reve	enue (F	Part VIII,	line 2g)							:: L	1:	29,0	573		476	,440
Revenue	10 Investment income (Part VIII, column (A), lines 3, 4												- 1		51,	535		27	,201
œ	11 0	Other reve	evenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)									1!	57,0	513		210	,987		
	12 T	Total rever	ue – add	lines 8	through	11 (must e	equal F	Part VIII	, coli	umn (A), line 12	<u>?)</u>		4:	22,8	302		816	,447
	13 0	Grants and	l similar ar	nounts	paid (P	art IX, colur	mn (A), lines 1	1–3)				L		16,4	443		24	,060
	14 B	Benefits pa	id to or fo	r mem	bers (Pa	ırt IX, colum	n (A),	line 4)					L						0
Se	15 8					oyee benefit						0)	L	18	31,:	345		299	<u>,744</u>
Expenses	16a F	Profession	al fundrais	ing fee	es (Part	IX, column ((A), lir	ne 11e)					L						0
ğ	b T					, column (D					26,2	240	📙						
ш	17					A), lines 11a							L		39,8				<u>,875</u>
	18 T	Total expe	nses. Add	lines 1	13–17 (n	nust equal F	Part IX	, colum	n (A)), line	25)				37,0				<u>,679</u>
		Revenue le	ess expens	ses. S	ubtract li	ne 18 from	line 1	2	<u></u>						14,8				<u>,768</u>
ts o	20 -	Fatal assat	(Dart V	lina 4/	2)									Beginning of	30 , (End of Year	,009
Net Assets or	20 1	rotal liabili											··	<u>J.</u>	<i>30</i> , (0		309	, 00 <u>9</u>
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	Part II		nature I			ICI IIIIC ZI II	OIII III	16 20							<i>50 </i>	<i>,</i>		303	,005
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Sig	an	Signature of	f officer													Date			
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Pai	d	RYAN N.	HAGAN,	CPA										06/1	L1/24	self-em	ployed	P002930	11
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Use	e Only					REST A													
		Firm's addr	ess		ZMOU'			8170)						Phone	no.	888	-298-	5297
Ma	y the IR	•				arer shown		? See	instru	uctions	S				•			X Yes	

	FOR GREA136-2669966 Page 2
Part III Statement of Program Service Accomplis	
Check if Schedule O contains a response or	note to any line in this Part III
1 Briefly describe the organization's mission:	
TO PROMOTE AND COMMUNICATE RESEAR	CH ON LARGE LAKES OF THE WORLD.
• • • • • • • • • • • • • • • • • • • •	
·	
2 Did the organization undertake any significant program convises du	uring the year which were not listed on the
2 Did the organization undertake any significant program services du	
	Yes X No
If "Yes," describe these new services on Schedule O.	
3 Did the organization cease conducting, or make significant change	
services?	Yes X No
If "Yes," describe these changes on Schedule O.	
4 Describe the organization's program service accomplishments for	each of its three largest program services, as measured by
expenses. Section 501(c)(3) and 501(c)(4) organizations are requi	
the total expenses, and revenue, if any, for each program service	
the total expenses, and revenue, if any, for each program service	reported.
4a (Code:) (Expenses \$ 69,183 including	ng grants of \$) (Revenue \$ 35)
PUBLICATION OF THE JOURNAL OF GRE THE MAIN PROGRAM OF IAGLR TO PROM WORLD	ng grants of \$) (Revenue \$ 35) AT LAKES RESEARCH, WHICH IS ONE OF OTE RESEARCH ON LARGE LAKES OF THE
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•	
4c (Code:) (Expenses \$ 79,949 including DEVELOPMENT AND MAINTENANCE OF IA AWARDS, THE JOURNAL, THE CONFERENCE OF THE CO	
DEVELOPMENT AND MAINTENANCE OF IA	GLR'S WEBSITE WHICH INCLUDES UPDATES ON
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DEVELOPMENT AND MAINTENANCE OF IA AWARDS, THE JOURNAL, THE CONFEREN 4d Other program services (Describe on Schedule O.)	GLR'S WEBSITE WHICH INCLUDES UPDATES ON ICE AND OTHER INITIATIVES.
DEVELOPMENT AND MAINTENANCE OF IA AWARDS, THE JOURNAL, THE CONFEREN	GLR'S WEBSITE WHICH INCLUDES UPDATES ON

Part IV

Form 990 (2022) INTERNATIONAL ASSOCIATION FOR GREAT38-2689988

Checklist of Required Schedules

Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," X complete Schedule A 1 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions X 2 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I X 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 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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III 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? If "Yes," complete Schedule D, Part I X 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, X the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes." complete Schedule D, Part III X 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? If "Yes," complete Schedule D, Part IV X 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V 10 X If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 11 VII, VIII, IX, or X, as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI X 11a Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII X 11b Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII X 11c Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX Х 11d Х Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f Х 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete X Schedule D, Parts XI and XII 12a Was the organization included in consolidated, independent audited financial statements for the tax year? If Х "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b Х Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a X Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV X 14b 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? If "Yes," complete Schedule F, Parts II and IV X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other 16 assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV X 16 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 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? If "Yes," complete Schedule G, Part II X Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 19 Х If "Yes," complete Schedule G, Part III 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H Х If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 21 Х domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.

			Yes	No
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	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	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 "Yes," answer lines 24b	0.4		.
_	through 24d and complete Schedule K. If "No," go to line 25a	24a	-	X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		
٨	to defease any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	240		
ZJa	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	23a		
D	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	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? If "Yes," complete Schedule L, Part II	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? If "Yes," complete Schedule L, Part III	27		X
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? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		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	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			l
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			3,5
٥.	or IV, and Part V, line 1	34		X
35a	• • • • • • • • • • • • • • • • • • • •	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	251-		
20	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	26		х
27	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
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	37		х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and			-22
30	19? Note: All Form 990 filers are required to complete Schedule O.	38	x	
P	art V Statements Regarding Other IRS Filings and Tax Compliance	30		
	Check if Schedule O contains a response or note to any line in this Part V			
	2 Concessed C contains a respense of flote to diff into it tille fair v		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 10			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	10		

	990 (2022) INTERNATIONAL ASSOCIATION FOR GREAT38-2689988			age 5
	rt V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 2			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
_	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	7-		v
L	and services provided to the payor?	7a		<u> </u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	70		v
٦	required to file Form 8282? If "Yes," indicate the number of Forms 8282 filed during the year 7d	7c		X
d	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х
e f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans 13b			
C	Enter the amount of reserves on hand	44-		37
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b 45	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	4-		v
	excess parachute payment(s) during the year?	15		X
16	If "Yes," see instructions and file Form 4720, Schedule N.	40		v
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
17	If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, any disqualified or other person engage in any activities.			
17	Section 501(c)(21) organizations. Did the trust, any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes" complete Form 6069	''		

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Pa	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b bel			
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedu		e instri	
S00	Check if Schedule O contains a response or note to any line in this Part VItion A. Governing Body and Management	<u> </u>	<u></u>	X
Sec	tion A. Governing Body and Management		Vac	No
10	Enter the number of voting members of the governing body at the end of the tax year 1a 15		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 15 If there are material differences in voting rights among members of the governing body, or	-		
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain on Schedule O. Enter the number of voting members included on line 1a, above, who are independent 1b 15			
b	• • • • • • • • • • • • • • • • • • • •	-		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			v
•	any other officer, director, trustee, or key employee?	2	+	X
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	+	X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		+	X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	+	X
6	Did the organization have members or stockholders?	6	+	<u> </u>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint		₩	
L	one or more members of the governing body?	7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			v
c	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the fol		v	
a	The governing body?	8a		
b	Each committee with authority to act on behalf of the governing body?	8b	+^	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			x
800	the organization's mailing address? If "Yes," provide the names and addresses on Schedule 0		000	ΙΛ.
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	veriue C		l Na
40-	Did the executivation have lead charters branches as efficiency	40.	Yes	No X
10a	Did the organization have local chapters, branches, or affiliates?	10a	1	<u>^</u>
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	401		
44-	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10k		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	1 4	
b 42a	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	40.		х
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts.	s? 12 k	'	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	40.		
40	describe on Schedule O how this was done	120		х
13	Did the organization have a written whistleblower policy?	13		X
14 45	Did the organization have a written document retention and destruction policy?	14		
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?	45.		v
a	The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	1 4 1	1	X
b	Other officers or key employees of the organization	15k)	^
16-	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	40.		v
L-	with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	16a	1	X
b				
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	461		
800	organization's exempt status with respect to such arrangements?	16k)	
	List the states with which a copy of this Form 000 is required to be filed. MT			
17 10	List the states with which a copy of this Form 990 is required to be filed MI Section 6104 requires on expenientia to make its Forms 1022 (1024 or 1024 A. if applicable), 900, and 900 T (section 5016).			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)		
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
40	Own website X Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,			
00	and financial statements available to the public during the tax year.			
20 1471	State the name, address, and telephone number of the person who possesses the organization's books and records			
	ENDY FOSTER 4840 SOUTH STATE ROAD MT 49109	724 (SE -	202
ΑI	NN ARBOR MI 48108	734-66	22-5	<u> </u>

	T100001100T0111	3 GGOGT3 ETO31		GD = 3 = 3 0 0 0 0 0 0 0
Form 990 (2022)	INTERNATIONAL	ASSOCIATION	H()K	GREAT38-2689988

Page 7

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, 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.

(A) Name and title	Name and title Average hours per week			ss pe	ition more rson i	than or is both a or/truste	an	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations
(1) JEROME MARTY	25.50									
EXECUTIVE DIRECTOR	37.50			x				26,561	0	1,328
(2) DONNA KASHIAN										
VICE PRESIDENT	4.00 0.00	x		x				0	0	0
(3) NEIL ROONEY	0.00	^		^				0	0	<u> </u>
(9)11=== 110011=	5.00									
PRESIDENT	0.00	X		X				0	0	0
(4) JEAN ADAMS										
PAST PRESIDENT	3.00	x		x				0	0	0
(5) LIZHU WANG	0.00	^		Λ				U	U	0
(3) 22223 77243	5.00									
TREASURER	0.00	X		X				0	0	0
(6) ALEX MAGUFFEE										
	3.00								•	
SECRETARY (7) ALFRED OTIENO A	0.00 CHIENG	Х		X				0	0	<u> </u>
(/)ALFRED CITENC A	2.00									
INTL BOARD MEMBER	0.00	x						0	0	0
(8) LES WARREN										
	2.00							_	_	_
STUDENT BOARD MEMBER		X				\vdash		0	0	0
(9) PARIS COLLINGSW	2.00									
BOARD MEMBER	0.00	x						0	0	0
(10) SUSAN DANIEL	0.00							<u> </u>	•	<u> </u>
	2.00									
BOARD MEMBER	0.00	X						0	0	0
(11) NOEL URBAN	0.00									
BOARD MEMBER	2.00	х						0	0	^
DOARD MEMBER	0.00	1						<u> </u>	U	<u> </u>

Form 990 (2022) INTERNATIONAL ASSOCIATION FOR GREAT38-2689988

Part VII Section A Officers Directors Trustees Von France

Part VII Section A. Officers	s, Directors, II	ruste	ees,	ney		ipioy	ees	, and Highest Compens	ated Employees (continu	3 a)			
(A) Name and title	(B) Average hours per week	box	k, unle	Pos check ess pe	rson	than o	an tee)	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation			:
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	orç	from t ganizatio ed orga	he on and	ns
(12) SUSAN GRAY	0.00									·			
BOARD MEMBER	2.00 0.00	x						0	0	İ			0
	NCAN												
STUDENT BOARD MEMBER	2.00 0.00	x						o	0	ı			0
	нанмонан		LC	0					0				
BOARD MEMBER	2.00	x						0	0	ı			0
(15) CALVIN HITCH													
BOARD MEMBER	2.00 0.00	x						o	0	1			0
	MBEKOVA	22											
BOARD MEMBER	2.00	x						0	0	l			0
BOTALD THE BLACK	0.00	22						Ū	U				
										<u> </u>			
										ı			
1b Subtotal								26,561				1,:	328
c Total from continuation she								26,561				1 .	328
d Total (add lines 1b and 1c)2 Total number of individuals (ir	ncluding but not								an \$100,000 of			<u> </u>	<u> </u>
reportable compensation from	the organization	n	0									Yes	No
3 Did the organization list any fo									ted				
employee on line 1a? <i>If "Yes,</i> 4 For any individual listed on lin									n from the		3		Х
organization and related orga individual	nizations greate	r tha	an \$1	150,0	000?	If "Y	es,'	' complete Schedule J for s	such		4		х
5 Did any person listed on line													
for services rendered to the of Section B. Independent Contract		'Yes,	" coi	mple	te S	chea	lule	J for such person			5		X
Complete this table for your fi compensation from the organi	ive highest com	pens	ated	inde	eper	dent	cor	ntractors that received more	e than \$100,000 of	woor			
	(A) I business address	JOHN)CI 130	allOH	101	uie c	Jaici		(B) ion of services	year.	Co	(C) mpensa	tion
- Name and	Duomose duaress								an er eervisee			пропос	
2 Total number of independent received more than \$100,000								ose listed above) who	0				
					ا ۱۰۰۰				-	-			

Pa	rt V			of Revenue ledule O con	tains a	a resp	onse or no	te to any line in	this Part VIII		
						<u> </u>		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ints nts	1a	Federated cam	paigns	<u> </u>	1a						
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership du	es		1b		52,945				
Š, An	С	Fundraising eve	ents		1c						
<u>a</u> <u>E</u>	d	Related organiz	zations		1d						
ii,	е	Government grants (d			1e						
oution ther S	f	All other contributions, and similar amounts n	, gifts, gi not includ	rants, led above	1f		48,874				
<u> </u>	9	Noncash contributions lines 1a-1f			1g	B					
<u>a</u> 2	h	Total. Add lines						101,819			
							Business Code				
ല	2a	CONFERENCE						476,405	476,405		
Program service Revenue	b	TOUDNAT						35	35		
אַ אַ	С										
eve	d										
<u>6</u> 2	е										
Σ	f	All other progra		vice revenue							
		Total. Add lines						476,440			
		Investment inco									
		other similar an		•				31,275			31,275
	4	Income from inv	/estme	nt of tax-exemr	t bond	proceed	ds	- , -			
	5	Royalties						208,944			208,944
		rtoyanios		(i) Real			Personal				
	62	Gross rents	6a	(7)		()					
	C	Rental inc. or (loss)	6c		_						
				(loce)							
		Gross amount from		(i) Securities) Other				
		sales of assets	7-	100,		(11) Otriei				
ø		other than inventory	7a_	100,	000						
Revenue	b	Less: cost or other	76	104,	074						
é	_	basis and sales exps.			074						
		Gain or (loss)		-				-4,074	-4,074		
Other		Net gain or (loss			· · · · · · · ·			-4,074	-1,0/1		
0	oa	Gross income from									
		(not including \$									
		of contributions re	•								
		1c). See Part IV, I			8a						
		Less: direct exp			8b						
		Net income or (_	events						
	9a	Gross income fi	_	-	_						
		activities. See P			9a						
		Less: direct exp			9b						
		Net income or (IVITIES						
	10a	Gross sales of i			,						
		returns and allo			10a						
		Less: cost of go			10b						
	С	Net income or (ioss) f	rom sales of inv	entory		Dunings Co.				
Sn							Business Code	0.040			0.045
၉၉	11a	MISCELLANE	OUS	INCOME				2,043			2,043
盲	b										
Miscellaneous Revenue	С										
፷		All other revenu						2 2 4 2			
		Total. Add lines						2,043	400 255		040 050
	12	Total revenue.	See i	instructions				816,447	472,366	0	242,262

Form 990 (2022) INTERNATIONAL ASSOCIATION FOR GREAT38-2689988

Part IX Statement of Functional Expenses

	ion 501(c)(3) and 501(c)(4) organizations must co	mplete all columns. All o		omplete column (A).	
	Check if Schedule O contains a respon				X
	not include amounts reported on lines 6b, 7b, Pb, 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 domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	24,060	24,060		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	112,493	67,496	39,373	5,624
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	160,887	96,533	56,309	8,045
8	Pension plan accruals and contributions (include	===,			0,010
•	section 401(k) and 403(b) employer contributions)	9,230	5,538	3,230	462
9	Other employee benefits	7,250	3,333	3,230	102
10	Payroll taxes	17,134	10,280	5,997	857
11	Fees for services (nonemployees):		20,200		
	Management				
0	Legal				
	Accounting Lobbying				
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column	127,371	106,676	17,897	2,798
40	(A) amount, list line 11g expenses on Schedule O.)	511	4	17,037	507
	Advertising and promotion	2,611	327	2,132	152
13	Office expenses	9,657	5,702	3,303	652
14	Information technology	9,037	5,702	3,303	032
15	Royalties	1 /05		1 /05	
16	Occupancy	1,485	0 200	1,485	2 124
17	Travel	19,868	8,289	8,445	3,134
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	065 500	065 500		
19	Conferences, conventions, and meetings	267,729	267,729		
20	Interest				
21	Payments to affiliates	F00		F00	
22	Depreciation, depletion, and amortization	503		503	
23	Insurance	2,849		2,849	
24	· ·				
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	BANK FEES	20,606	13,298	3,528	3,780
b	SUPPLIES	1,646	258	1,388	
С	TELEPHONE	1,039	31	779	229
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	779,679	606,221	147,218	26,240
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)				
DAA					Form 990 (2022)

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 35,782 24,045 Cash—non-interest-bearing 1 Savings and temporary cash investments 30,749 150,885 2 Pledges and grants receivable, net 3 Accounts receivable, net 4 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 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 Assets 7 Notes and loans receivable, net Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 10,823 b Less: accumulated depreciation 10b 8,813 763 2,010 10c Investments—publicly traded securities 462,747 392,069 11 Investments—other securities. See Part IV, line 11 12 12 Investments—program-related. See Part IV, line 11 13 13 Intangible assets _____ 14 14 Other assets. See Part IV, line 11 15 15 Total assets. Add lines 1 through 15 (must equal line 33) 530,041 569,009 16 16 Accounts payable and accrued expenses 17 17 Grants payable 18 18 Deferred revenue 19 19 Tax-exempt bond liabilities 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 22 Loans and other payables to any current or former officer, director, Liabilities trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 Secured mortgages and notes payable to unrelated third parties 23 23 Unsecured notes and loans payable to unrelated third parties 24 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 0 0 26 26 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here X Assets or Fund Balances and complete lines 27, 28, 32, and 33. Net assets without donor restrictions 492,933 525**,**696 27 27 37,108 Net assets with donor restrictions 43,313 28 28 Organizations that do not follow FASB ASC 958, check her and complete lines 29 through 33. Capital stock or trust principal, or current funds 29 29 Paid-in or capital surplus, or land, building, or equipment fund 30 30 Retained earnings, endowment, accumulated income, or other funds 31 31 Š 530,041 569,009 Total net assets or fund balances 32 32

569,009 Form **990** (2022)

530,041

33

Total liabilities and net assets/fund balances

	1 990 (2022) INTERNATIONAL ASSOCIATION FOR GREAT38-2689988		Pag	ge 12
Pa	art 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)		L6,4	
2	Total expenses (must equal Part IX, column (A), line 25)		79,6	
3	Revenue less expenses. Subtract line 2 from line 1		36,	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	53	30,0	<u>)41</u>
5	Net unrealized gains (losses) on investments 5		2,2	200
6	Donated services and use of facilities 6			
7	Investment expenses 7			
8	Prior period adjustments			
9	Other changes in net assets or fund balances (explain on Schedule O)			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	32, column (B)) 10	56	59,0	009
Pa	art XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			
			Yes	No
1	Accounting method used to prepare the Form 990: X Cash 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			
	reviewed on a separate basis, consolidated basis, or both:			
	X Separate basis Consolidated basis Both consolidated and separate basis			
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			
	separate basis, consolidated basis, or both:			
	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.			
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		
	The state of the s		990	(2022)

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

OMB No. 1545-0047

Open to Public Inspection

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

INTERNATIONAL ASSOCIATION FOR GREAT LAKES RESEARCH - MICHIGAN

Employer identification number 38-2689988

Pa	art I	Reas	on for Public Charity	/ Status. (All organizatio	ns mus	t comp	lete this part.) See instr	uctions.	
The	orga			se it is: (For lines 1 through 12					
1	Ň	A church, co	nvention of churches, or as	sociation of churches described	d in sect i	on 170(l	o)(1)(A)(i).		
2	П	A school des	nool described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)						
3	П			rice organization described in s			A)(iii).		
4	П	A medical re	search organization operate	ed in conjunction with a hospita	I describe	d in sec	tion 170(b)(1)(A)(iii). Enter th	e hospital's name	e,
		city, and stat	=					•	
5		An organizati	ion operated for the benefit	of a college or university owner	d or oper	ated by a	governmental unit described	in	
	_	section 170(b)(1)(A)(iv). (Complete Part II.)							
6		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).							
7	Ш	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)							
8				170(b)(1)(A)(vi). (Complete Pa	art II.)				
9		An agricultur	al research organization de	scribed in section 170(b)(1)(A	A)(ix) ope	rated in c	onjunction with a land-grant c	ollege	
		or university university:	or a non-land-grant college	of agriculture (see instructions)	. Enter th	e name,	city, and state of the college of	or	
10	X	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 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)							
11		An organizati	ion organized and operated	exclusively to test for public sa	afety. See	section	509(a)(4).		
12	П	An organizati	ion organized and operated	exclusively for the benefit of, to	perform	the funct	ions of, or to carry out the pu	rposes of	
				tions described in section 509					
			=	escribes the type of supporting	-		•	_	
	а	the supp	orted organization(s) the por	perated, supervised, or controlle wer to regularly appoint or elect complete Part IV, Sections A	t a majori			giving	
	b			upervised or controlled in conn		h its sup	ported organization(s), by hav	ina	
	_	control or	r management of the suppo	rting organization vested in the e Part IV, Sections A and C.					
	С	Type III	functionally integrated. A	supporting organization operatistructions). You must complete				d with,	
	d	Type III	non-functionally integrate	ed. A supporting organization of e organization generally must see	perated i	n connec	tion with its supported organiz		
				must complete Part IV, Secti					
	е			ceived a written determination for			is a Type I, Type II, Type III		
	f		mber of supported organiza	on-functionally integrated supportions	July Olg	ariizaliori.		Г	
	g		• • • • • • •	the supported organization(s).				L	
(i)		e of supported	(ii) EIN	(iii) Type of organization	(iv) Is the	organization	(v) Amount of monetary	(vi) Amount	of
(-)		ganization	(.,, =	(described on lines 1–10	listed in you	ur governing	support (see	other support	(see
				above (see instructions))	docur	I	instructions)	instructions)
					Yes	No			
(A)									
(B)									
(C)									
(D)									
(E)									

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.)

Sec	tion A. Public Support							
Caler	ndar 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	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3							
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							
6	Public support. Subtract line 5 from line 4.							
	tion B. Total Support							
Caler	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022		(f) Total
7	Amounts from line 4	<u> </u>					\rightarrow	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources							
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
40	• ,						\top	
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)							
11	Total support. Add lines 7 through 10							
12	Gross receipts from related activities, etc	. (see instructions	s)			L1	12	
13	First 5 years. If the Form 990 is for the o	•				. , . ,		
	organization, check this box and stop he	re					<u></u>	
	tion C. Computation of Public S							
14	Public support percentage for 2022 (line 6	3, column (f) divide	ed by line 11, colu	ımn (f))		<u> </u>	14	<u>%</u>
15	Public support percentage from 2021 Sch	edule A, Part II, II	ine 14			∟	15	<u>%</u>
16a	33 1/3% support test—2022. If the orga				is 33 1/3% or mor	e, check this		
L	box and stop here. The organization qua 33 1/3% support test—2021. If the orga							Ц
b	this box and stop here . The organization							
17a	10%-facts-and-circumstances test—20							Ш
u	10% or more, and if the organization mee	_						
	Part VI how the organization meets the fa				-			
				-				
b	10%-facts-and-circumstances test—20	021. If the organiz	ration did not chec	k a box on line 13	 3. 16a. 16b. or 17a	and line		
	15 is 10% or more, and if the organization	•						
	in Part VI how the organization meets the					-		
18	Private foundation. If the organization d							
-	instructions							

Page 3

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						
Caler	ndar 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.")	118,044	70,354	84,085	83,881	101,819	458,183
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the	454 405	20 165	100.055	100 (73	455 440	1 251 620
	organization's fax-exempt purpose	474,405	82,165	188,955	129,673	476,440	1,351,638
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge	6,500	6,500	6,500	7,000	7,000	33,500
6	Total. Add lines 1 through 5	598,949	159,019	279,540	220,554	585,259	1,843,321
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
500	tion B. Total Support						1,843,321
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6	598,949	159,019	279,540	220,554	585,259	1,843,321
		330,343	155,015	273,340	220,334	303,233	1,043,321
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .	120,595	147,178	147,518	185,386	240,219	840,896
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975					·	
С	Add lines 10a and 10b	120,595	147,178	147,518	185,386	240,219	840,896
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on		4,661		8,281	1,043	13,985
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.)	719,544	310,858	427,058	414,221	826,521	2,698,202
14	First 5 years. If the Form 990 is for the organization, check this box and stop he			-		I(c)(3)	
Sec	tion C. Computation of Public						
15	Public support percentage for 2022 (line 8	8, column (f), divide	ed by line 13, colu	umn (f))		15	68.32 %
16	Public support percentage from 2021 Sch						72.14 %
Sec	tion D. Computation of Investm						
17	Investment income percentage for 2022			13, column (f))		17	31 %
	nvestment income percentage from 2021						27 %
19a	33 1/3% support tests—2022. If the org						\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	17 is not more than 33 1/3%, check this b		=			=	
b	33 1/3% support tests—2021. If the org						
00	line 18 is not more than 33 1/3%, check the	-	•	•		•	
<u>20</u>	Private foundation. If the organization d	iia not check a box	on line 14, 19a,	or 19b, check this	box and see instru		

Part IV **Supporting Organizations**

(Complete only if you checked a box on line 12 on 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

- 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,
- 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).
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and b satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- 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.
- Was any supported organization not organized in the United States ("foreign supported organization")? If 4a "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- 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.
- 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.
- 5a 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).
- 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?
- **Substitutions only.** Was the substitution the result of an event beyond the organization's control?
- 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? If "Yes," provide detail in Part VI.
- 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).
- 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).
- 9a 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.
- 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? If "Yes," provide detail in Part VI.
- 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.
- 10a 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.
- 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.)

		Yes	No
ı	1		
-	2		
	3a		
	3b		
-	3c		
	4a		
ı	4b		
ı	4c		
	5a		
	5h		
ŀ	5b 5c		
	6		
	7		
	8		
	9a		
	9b		
	311		
	9с		
	10a		
	401-		
ched	10b ule A	(Form 9	90) 2022

Schedule A (Form 990)

Page 5

Par	t 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?	11b		
	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		
Secti	ion B. Type I Supporting Organizations			
	ion 2. Type i capperang cigamizations		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or		103	140
'				
	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.	1		
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.	2		
Secti	ion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Secti	ion 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			
	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		
Secti	ion E. Type III Functionally Integrated Supporting Organizations			
1				
ı a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction	15).		
a b	The organization satisfied the Activities Test. Complete line 2 below.			
	The organization is the parent of each of its supported organizations. Complete line 3 below.	-4m4i-		
C	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in.	siruciio		Na
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	_		
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described 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.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	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.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Sched	ule A (Form 990) 2022 INTERNATIONAL ASSOCIATION E	OR	GREAT38-26899	988 Page 6
Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgan	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on N	ov. 20	, 1970 (explain in Part VI)	. See
	instructions. All other Type III non-functionally integrated supporting organizations mu	ust cor	mplete Sections A through	E.
Sect	ion A – Adjusted Net Income		(A) Prior Year	(B) Current Year
	Augustou Not moonio		(A) I Hol I cal	(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		
Sect	ion 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		
k	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	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		
Sect	ion 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 integrated	d Type	III supporting organization	 1

(see instructions).

and 4c.

8 Breakdown of line 7:a Excess from 2018 . . .

c Excess from 2020d Excess from 2021e Excess from 2022

b Excess from 2019

Schedule A (Form 990) 2022 INTERNATIONAL ASSOCIATION FOR GREAT38-2689988						Page 8	
Part VI	Supplemental III, line 12; Part B, lines 1 and 2 3a, and 3b; Pa	Information. Pr t IV, Section A, lir 2; Part IV, Section	ovide the explanes 1, 2, 3b, 3c n C, line 1; Par V, Section B, lir	nations required c, 4b, 4c, 5a, 6, t IV, Section D, ne 1e; Part V, S	d by Part II, lin 9a, 9b, 9c, 11a lines 2 and 3; Section D, lines	e 10; Part II, line 17 a, 11b, and 11c; Pa Part IV, Section E, 5, 6, and 8; and Pa	7a or 17b; Part Irt IV, Section Iines 1c, 2a, 2b,
•							
•							
•							

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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.
Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Open to Public Inspection

	e of the organization	_	Employer	r identification number
	NTERNATIONAL ASSOCIATION FOR GREAT		20 0	600000
	AKES RESEARCH - MICHIGAN art I Organizations Maintaining Donor Advised I			689988
Pa	art I Organizations Maintaining Donor Advised I Complete if the organization answered "Yes" o		or Acco	ounts.
	Complete if the organization answered Tes o	(a) Donor advised funds	- /	b) Funds and other accounts
4	Total number at end of year	(a) Donor advised funds		b) i dilas and other accounts
1 2	Total number at end of year			
_				
3 4	Aggregate value of grants from (during year)			
5	Aggregate value at end of year Did the organization inform all donors and donor advisors in writing t			
5	funds are the organization's property, subject to the organization's e			☐ Yes ☐ No
6	Did the organization inform all grantees, donors, and donor advisors			
U	only for charitable purposes and not for the benefit of the donor or d			
	conferring impermissible private benefit?			Yes No
Pa	art II Conservation Easements.			
	Complete if the organization answered "Yes" of	on Form 990, Part IV, line 7.		
1	Purpose(s) of conservation easements held by the organization (che			
	Preservation of land for public use (for example, recreation or ed		importar	nt land area
	Protection of natural habitat	Preservation of a certified his	-	
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified cor	nservation contribution in the form of a con-	servation	า
	easement on the last day of the tax year.			Held at the End of the Tax Yea
а	Total number of conservation easements		2a	
b			2b	
С		ncluded in (a)	2c	
d	Number of conservation easements included in (c) acquired after Jul			
	historic structure listed in the National Register	-	2d	
3	Number of conservation easements modified, transferred, released,	extinguished, or terminated by the organiz	ation du	iring 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 m	nonitoring, inspection, handling of		
	violations, and enforcement of the conservation easements it holds?) 		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling	g of violations, and enforcing conservation	easeme	ents during the year
7	Amount of expenses incurred in monitoring, inspecting, handling of	violations, and enforcing conservation ease	ements o	during the year
8	Does each conservation easement reported on line 2(d) above satisfied			
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservation ease	•		
	balance sheet, and include, if applicable, the text of the footnote to the	the organization's financial statements that	describe	es the
	organization's accounting for conservation easements.	mt Historical Transcrups or Other	- Ci	ller Accete
Pa	art III Organizations Maintaining Collections of A Complete if the organization answered "Yes" of A		er Sim	liar Assets.
	<u> </u>			
ıa	If the organization elected, as permitted under FASB ASC 958, not t of art, historical treasures, or other similar assets held for public exh	-		
	service, provide in Part XIII the text of the footnote to its financial sta		e oi pui	OIIC
h			choot w	arks of
IJ	If the organization elected, as permitted under FASB ASC 958, to re art, historical treasures, or other similar assets held for public exhibit			
	provide the following amounts relating to these items:	non, concanon, or research in future diffe	or hange	J 001 V100,
	·			\$
	(i) Revenue included on Form 990, Part VIII, line 1			\$ \$
2	(ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures,			\$
2	following amounts required to be reported under FASB ASC 958 rela		noviu e li	no e
•		=		•
d h	Revenue included on Form 990, Part VIII, line 1			\$

Sche	dule D (Form 990) 2022 INTERNAT:	IONAL ASSO	CIATION FOR	GREA'	T38-26	5899	88			Pag	ge 2
Pa	rt III Organizations Maintainin	ng Collections o	f Art, Historical	Treasure	s, or Ot	her S	imila	r Asse	ets (col	ntinu	ed)
3	Using the organization's acquisition, access collection items (check all that apply):	sion, and other record	ls, check any of the fo	ollowing that	make sigr	nificant	use of	its			
а	Public exhibition	d∏ı	Loan or exchange pro	gram							
b	Scholarly research		Other	-							
C	Preservation for future generations										
	Provide a description of the organization's	collections and explai	n how they further the	e organizatio	n's exemp	t purpos	se in F	Part			
- -	XIII.										
5	During the year, did the organization solicit	or receive donations	of art, historical treas	ures, or othe	er similar						
-	assets to be sold to raise funds rather than								Yes		No
Pa	rt IV Escrow and Custodial A		,								
	Complete if the organization	on answered "Yes	s" on Form 990, F	Part IV, lir	ne 9, or i	reporte	ed an	amou	ınt on F	orm	
	990, Part X, line 21.										
1a	Is the organization an agent, trustee, custo	dian or other interme	diary for contributions	or other ass	sets not						
									Yes	· 📙	No
b	If "Yes," explain the arrangement in Part XI	III and complete the for	ollowing table:			ſ					_
									Amount		_
							1c				_
d	Additions during the year						1d				_
	Distributions during the year						1e				_
f	Ending balance					l	1f		$\overline{}$		_
	Did the organization include an amount on				-				Yes	·	No
	If "Yes," explain the arrangement in Part XI	II. Check here if the	explanation has been	provided on	Part XIII .				<u></u>		
Pa	rt V Endowment Funds.	1 (0.7	" F 000 F	5 (N/ E	40						
	Complete if the organization							1			
	-	(a) Current year	(b) Prior year	(c) Two yea		(d) Thr	ee years		(e) Four y		
	Beginning of year balance	51,216	49,061	4	8,221			,050		46,9	150
	Contributions	2,570	2,155		840			<u>,</u> 171			
С	Net investment earnings, gains, and									_	
	losses									1	L00
d	Grants or scholarships										
е	Other expenditures for facilities and										
	programs										
	Administrative expenses										
	End of year balance	53,786	51,216		9,061		48	,221		47 , 0	150
	Provide the estimated percentage of the cu		ce (line 1g, column (a)) held as:							
	Board designated or quasi-endowment	61.46 %									
	Permanent endowment %										
С	Term endowment 38.54 %										
	The percentages on lines 2a, 2b, and 2c sh										
3a	Are there endowment funds not in the poss	session of the organiz	ation that are held an	d administer	ed for the				_		
	organization by:								<u></u> '	/es	<u>No</u>
	(i) Unrelated organizations								3a(i)		<u>x</u>
									3a(ii)		<u>X</u>
	If "Yes" on line 3a(ii), are the related organi								3b		
	Describe in Part XIII the intended uses of t		lowment funds.								
Pa	rt VI Land, Buildings, and Eq					_	_				
	Complete if the organization							<u>90, Pa</u>			<u>). </u>
	Description of property	(a) Cost or other b	''		٠,	ccumulate	d		(d) Book va	alue	
		(investment)	(othe	r)	dep	oreciation					
1a	Land										
	Buildings										
	Leasehold improvements			0.000			<u> </u>				<u> </u>
	Equipment			L0,823		8,	,813	5		2,0	<u>T0</u>
	Other										
Total	. Add lines 1a through 1e. (Column (d) mus	t equal Form 990, Pa	nrt X, column (B), line	10c.)	<u></u>					2,0	10

Schedule D (Form 990) 2022 INTERNATIONAL ASSOCIATION FOR GREAT38-2689988

Part VII	Complete if the organization answered "Yes" or	n Form 990, Part IV,	line 11b. See Form 990, Part X, line 12
	(a) Description of security or category	(b) Book value	(c) Method of valuation:
	(including name of security)		Cost or end-of-year market value
(1) Financial (derivatives		
(2) Closely ne	ld equity interests		
(3) Other			
(C)			
(D)			
(E)			
(E)			
(G)			
	n (b) must equal Form 990, Part X, col. (B) line 12.)		
Part VIII	Investments – Program Related.	E 000 D (I) /	" 44 O E 000 D () ()
	Complete if the organization answered "Yes" or		
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)			
(1) (2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	n (b) must equal Form 990, Part X, col. (B) line 13.)		
Part IX	Other Assets.	- Corm 000 Dort IV	line 44 d Con Form 000 Dort V line 44
	Complete if the organization answered "Yes" or	1 FOIIII 990, Pail IV,	(b) Book value
(1)	(a) Doodiplion		(b) Deek value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	n (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities.		
Part X	Complete if the organization answered "Yes" or	Form 000 Part IV	line 11e or 11f See Form 990 Part Y
	line 25.	i i oiiii 990, Fait iv,	ille Tie of Til. See Folili 990, Falt X,
1.	(a) Description of liability		(b) Book value
	income taxes		(,
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	n (b) must equal Form 990, Part X, col. (B) line 25.)		
2. Liability for	uncertain tax positions. In Part XIII, provide the text of the fo	otnote 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

Sche	dule D (Form 990) 2022 INTERNATIONAL ASSOCIATION FO	<u>R GREAT38-268998</u>	38	Page 4
Pa	art XI Reconciliation of Revenue per Audited Financial States	ments With Revenue pe	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	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
	Investment expenses not included on Form 990, Part VIII, line 7b			
	Other (Describe in Part XIII.)	4b		
	Add lines 4a and 4b		4c	
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	
Pa	Reconciliation of Expenses per Audited Financial State		per Return.	
	Complete if the organization answered "Yes" on Form 990,	Part IV, line 12a.	1.1	
1			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1		
а	Donated services and use of facilities	2a		
b		2b		
С	Other losses	2c		
d	(· · · · · · · · · · · · · · ·	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIII.)	4b		
	Add lines 4a and 4b		4c	
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	
Pa	art XIII Supplemental Information.			
rovi	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part I	V, lines 1b and 2b; Part V, line	4; Part X, line	
; Pa	art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provid	e any additional information.		
• • •				

Schedule D (F	orm 990) 2022	INTERNATIONAL	ASSOCIATION	FOR	GREAT38-2689988	Page 5
Part XIII	Supplementa	Information (contin	nued)		GREAT38-2689988	
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SCHEDULE I (Form 990)

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.

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization INTERNATIONAL ASSOCIATION FOR GREAT Employer identification number LAKES RESEARCH - MICHIGAN 38-2689988 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? 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 Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990 Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation (book, FMV, appraisal, (a) Name and address of organization (c) IRC (d) Amount of cash (e) Amount of 1 (b) EIN (g) Description of (h) Purpose of grant or government grant noncash assistance noncash assistance or assistance other) (if applicable) (1) (2)(3) (4) (5) (6) (7) (8) (9) 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3 Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) (2022)	ΤΝΤΓΡΝΑΤΤΟΝΑΤ.	ACCOCTATION	FOD	CDEAT38-2689988
Schedule I (Form 990) (2022)	TINTERNATIONAL	ASSOCIATION	FUR	GKEA130-2003300

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on 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 noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance		
1 AWARDS/SCHOLARSHIPS	41	24,060					
2							
3							
4							
5							
6							
7			0.00	(1)			
Part IV Supplemental Information. Pro	ovide the information	required in Part I, Iir	ne 2; Part III, colum	n (b); and any other addit	ional information.		
PART I, LINE 2 - PROCEDURE	S FOR MONITOR	RING THE USE	OF GRANT FUI	NDS			
GRANTS ARE IN THE NATURE OF COLLEGE SCHOLARSHIPS. THE GRANTS ARE TYPICALLY							
TO GRADUATE STUDENTS. IN	ADDITION, STU	JDENT TRAVEL	DISCOUNTS A	RE AWARDED TO			
ASSIST STUDENTS WITH PART	OF THE COST (OF THEIR TRAV	EL TO AND FI	ROM THE			
ANNUAL INTERNATIONAL ASSOC	IATION OF GRE	EAT LAKES RES	SEARCH CONFE	RENCE.			

SCHEDULE O (Form 990)

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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

Name of the organization INTERNATIONAL ASSOCIATION FOR GREAT LAKES RESEARCH - MICHIGAN

Employer identification number 38-2689988

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENTS THE ORGANIZATION AWARDS STUDENTS FOR TOP-NOTCH PRESENTATIONS AT THE ANNUAL CONFERENCE, AND PROFESSIONALS FOR EXCELLENCE IN THE JOURNAL, AND FOR OUTSTANDING CONTRIBUTIONS TOWARDS ACHIEVEMENT OF THE IAGLR'S GOALS. THE IAGLR ALSO GIVES OUT SCHOLARSHIPS TO STUDENTS SHOWING GREAT PROMISE EARLY IN THEIR RESEARCH CAREERS.
FORM 990, PART VI, LINE 7A - ELECTION OF MEMBERS AND THEIR RIGHTS THE ORGANIZATION HAS MEMBERS WHO ELECT THE BOARD OFFICERS AND DIRECTORS.
FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 THE BOARD OF DIRECTORS AND THE OFFICE MANAGER REVIEW THE ANNUAL 990 RETURN BEFORE IT IS FILED WITH THE IRS.
FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY ALL BOARD MEMBERS MUST UNDERTAKE A BASIC ONLINE CONFLICT OF INTEREST TRAINING AT THE BEGINNING OF THEIR TENURE OF THE BOARD. CONFLICT OF INTEREST ISSUES AND THE IMPORTANCE OF CONFLICT OF INTEREST VIGILANCE WILL BE MENTIONED AT EVERY FACE TO FACE BOARD OF DIRECTORS MEETING.
FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION ALL GOVERNING DOCUMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST
FORM 990, PART IX, LINE 11G - OTHER FEES FOR SERVICES

DESCRIPTION

Schedule O (Form 990) 2022 Name of the organization	2				Page 2
INTERNATIONAL	ASSOCIA	TION FOR	GREAT		38-2689988
				& GENERAL	FUNDRAISING
	OT/PROG	BERVICE	MG1	& GENERAL	FUNDRALBING
PROFESSIONAL	FEES				
	\$ 10	6,676	\$	17,897	\$ 2,798
					PACE 1 OF 1