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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 black lung benefit trust or private foundation)

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

Open to Public Inspection

A F	or the	e 2008 calendar year, or tax year beginning $JUL 1, 2008$ and ending	JUN 30, 2009	
В	Check if	Please use IRS	D Employer identifi	cation number
	Addre chang	ss   label or   FORT   WORTH   ART   ASSOCIATION		
	Name chang	type		107061
	Initial return Termii ation	10		738-9215
F	Ameni return Application	City or town, state or country, and ZIP + 4	G Gross receipts \$	8,757,856.
<u> </u>	– tiòn pendii	F Name and address of principal officer:JOANETTE GARWOOD	H(a) Is this a group re for affiliates?	Yes X No
		SAME AS C ABOVE	H(b) Are all affiliates inc	
<u> </u>		empt status: X 501(c) (3 ) ◀ (insert no.) 4947(a)(1) or 527		list. (see instructions)
		te: NWW.THEMODERN.ORG	H(c) Group exemption	
			ear of formation 1961 N	
	art I	Summary		
		Briefly describe the organization's mission or most significant activities: THE FORT	WORTH ART AS	SOCATION, A
Activities & Governance		TEXAS NON-PROFIT CORPORATION, WAS ESTABLISHED	TO ACQUIRE	A
rua	2	Check this box If the organization discontinued its operations or disposed of m	ore than 25% of its assets	3.
Š	3	Number of voting members of the governing body (Part VI, line 1a)	3	16
<u>س</u> ع	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	16
es	5	Total number of employees (Part V, line 2a)	5	94
ΣΞ	6	Total number of volunteers (estimate if necessary)	6	75
Act	7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	0.
	ь	Net unrelated business taxable income from Form 990-T, line 34	7b	<u> </u>
	١.	_	Prior Year	Current Year
P	l	Contributions and grants (Part VIII, line 1h)	7,001,857.	5,943,286.
Revenue	i	Program service revenue (Part VIII, line 2g)	549,362.	241,540.
Re	4	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	15,594.	1,978,393.
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	470,100. 8,036,913.	8,385,058.
	ı —	Total revenue · add lines 8 through 11 (must equal Part VIII, column (A), line 12)	157,135.	90,000.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)  Benefits paid to or for members (Part IX, column (A), line 4)	137,133.	307000.
"		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	4,047,446.	4,220,563.
Se	1	Professional fundraising fees (Part IX, column (A), line 11e)		2/220/0000
Expenses	1	Total fundraising expenses (Part IX, column (D), line 25)		······································
Ã		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	5,293,789.	3,614,535.
		Total expenses. Add lines 13-17 (must equal Part ) Column (A), line 25)	9,498,370.	7,925,098.
	19	Revenue less expenses. Subtract line 18 from line 12	<1,461,457.	> 459,960.
Net Assets or Fund Balances		$w_{i}$	Beginning of Year	End of Year
sets alan	20	Total assets (Part X, line 16)	29,991,240.	24,383,533.
±As d-Bs	21	Total liabilities (Part X, line 26)	296,305.	237,363.
컕	22	Net assets or fund balances. Subtract line 21 from line 20	29,694,935.	24,146,170.
Pε	art II	Signature Block		
		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statemer and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowled	ts, and to the best of my knowledg ige	ge and belief, it is true, correct,
		( ) martte ()	1 =1.51	
Sig		Signature of officer	13/13/a	2010
Her	е		Dato	
		JOANETTE GARWOOD, CONTROLLER  Type or print name and title		
—		Poto	Check if Prepare	er's identifying number
Paid	I	riepaiers / L. OM / -//	self- employed > (see ins	tructions)
Prep	arer's	Firm's name (or WHITTLEY PENN LLP	EIN >	
Use	Only	yours if self-employed), 5420 LBJ FREEWAY, SUITE 1440	<u> </u>	
		address, and DALLAS, TX 75240	Phone no ▶ 2	14.393.9300
Ma\	the If	RS discuss this return with the preparer shown above? (see instructions)	1	X Yes No

SCANNED JUL 12 2010

Form **990** (2008)

Part IV	Checklist of	Required Schedules

	The Officeriat of Required Confedence			
			Yes	No_
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?	_		
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	_		v
	public office? If "Yes," complete Schedule C, Part I	_3_	ļ	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and	_		
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice	_		Х
_	on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6_		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		Х
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	<u> </u>	Α.
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete		x	
	Schedule D, Part III	8_		
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide	_		Х
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9 10	Х	
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?	11	X	
40	If "Yes," complete Schedule D, Parts VI, VII, IX, or X as applicable		<del></del>	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was	12	x	
42	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	<del></del>	Х
13		14a		X
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?  Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	140	· · · · ·	
D	and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity			
10	located outside the United States? If "Yes," complete Schedule F, Part II	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16		Х
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total 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 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Х
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 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, questions 3, 4, or 5? If "Yes," complete Schedule J	23	Х	
	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 questions 24b-24d and complete Schedule K.			
	If "No", go to question 25	24a	<u> </u>	X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	<u> </u>	
С	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	<u></u>	<u> </u>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a	_		,,
	prior year? If "Yes," complete Schedule L, Part I	25b	L	X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			U
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial			J.
	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27	000	X
		Form	990 (	2008)

FORT WORTH ART ASSOCIATION Form 990 (2008) FORT WORTH ART ASS

Part IV Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an			
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other			
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		_X_
ь	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		X
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			
	corporation) doing business with the organization? 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		<u>X</u>
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			
	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, Parts II, III, IV, and V, line 1	34	X	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35	X	ļ
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		X
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 tay purposes? If "Ves." complete Schedule R. Part VI	37	i	l X

Form **990** (2008)

			Yes	No				
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of							
	U.S. Information Returns. Enter -0- if not applicable	7						
Ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	)						
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming							
	(gambling) winnings to prize winners?	1c		X				
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 9	1						
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X					
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)							
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		X				
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in 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 the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and							
	Financial Accounts.							
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х				
C	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited							
	Tax Shelter Transaction? .	5c						
6a	Did the organization solicit any contributions that were not tax deductible?	ва		X				
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts							
	were not tax deductible?	6b		ļ				
7	Organizations that may receive deductible contributions under section 170(c).							
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a		_X_				
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?							
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	ŀ						
	to file Form 8282?	7c	ļ.—	X				
	If "Yes," Indicate the number of Forms 8282 filed during the year	-						
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			v				
	benefit contract?	7e_	<del></del>	X				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 <del>1</del>		X				
9	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		ļ				
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	<del> </del>					
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3)							
	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have		1					
	excess business holdings at any time during the year?	8		ļ				
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		1					
а	Did the organization make any taxable distributions under section 4966?	9a	-	-				
		9ь	ļ					
10	Section 501(c)(7) organizations. Enter: N/A							
a	Initiation fees and capital contributions included on Part VIII, line 12	-						
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	1						
11	Section 501(c)(12) organizations. Enter: N/A							
a	Gross income from members or shareholders  [11a]  [11a]	1						
þ	Gross income from other sources (Do not net amounts due or paid to other sources against							
40	amounts due or received from them.)  2. Alternative 4047(A) 41 and a support of critical and a support of the s	120	İ					
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	<b>-</b>	<del>                                     </del>				
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b	_1	<u></u>	<u></u>				

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Sec	tion A. Governing Body and Management		-								
			Yes	No							
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,										
	processes, or changes in Schedule O. See instructions.										
1a	Enter the number of voting members of the governing body	5									
b	Enter the number of voting members that are independent	5									
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other										
	officer, director, trustee, or key employee?	2		X							
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision										
	of officers, directors or trustees, or key employees to a management company or other person?	3		X							
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X							
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X							
6	Does the organization have members or stockholders?	6		Х							
7a	a Does the organization have members, stockholders, or other persons who may elect one or more members of the										
	governing body?	7a_		X							
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Х							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year										
	by the following:										
а		8a	X								
b	Each committee with authority to act on behalf of the governing body?	8b	X								
		9a	1	X							
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,										
	and branches to ensure their operations are consistent with those of the organization?	9ь									
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must										
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10		X							
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the										
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11	}	Х							
Sec	tion B. Policies										
			Yes	No							
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X								
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise										
	to conflicts?	12b	Х								
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe										
	In Schedule O how this is done	12c	Х								
13	Does the organization have a written whistleblower policy?	13	Х								
14	Does the organization have a written document retention and destruction policy?	14	X								
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		15a	X								
	Other officers or key employees of the organization?	15b	X								
	Describe the process in Schedule O. (see instructions)	1.55									
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a										
	taxable entity during the year?	16a	1	Х							
h	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation	100									
•	In joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's										
	exempt status with respect to such arrangements?	16b									
500	exempt status with respect to such arrangements?	1 100									
17	List the states with which a copy of this Form 990 is required to be filed NONE										
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	for									
10	public inspection. Indicate how you make these available. Check all that apply.	. 101									
40	Own website Another's website X Upon request	nd 6	noial								
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	no iins	uiciai								
00	statements available to the public.	dias -									
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza JOANETTE GARWOOD - 817-738-9215	uon: ►	_								
	3200 DARNELL STREET, FORT WORTH, TX 76107										
	3200 DEMINDED STREET, FORT WORTH, IX 10101										

Form 990 (2008)

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

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter 0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A)	(B)	(C) Position						(D)	(E)	(F)
Name and Title	Average hours	(6				app	dv)	Reportable compensation	Reportable compensation	Estimated amount of
	per week	Individual frustee or director	Institutional frustee		Key employee	Highest compensated 5		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
CHARLES H. WEBSTER		-								
CHAIRMAN OF THE BOARD	1.00	X		X		<u> </u>	ļ.,	0.	0.	0.
KIM DARDEN				l				1		•
PRESIDENT	1.00	Х		X	_	<u> </u>		0.	0.	0.
EARL COX	1 00			١		ŀ		_		0
SECRETARY/TREASURER	1.00	X	_	X		-	<u> </u>	0.	0.	0.
LEE M. BASS	1 1 00	,,						0.	0.	0.
DIRECTOR	1.00	X		_	-	$\vdash$		<u> </u>	<u> </u>	<u> </u>
ANNIE MARIE BRATTON	1 00	x	ĺ					0.	0.	0.
DIRECTOR CORNELIA BLAKE	1.00	_	-			-	$\vdash$	0.	0.	
DIRECTOR	1.00	X						0.	0.	0.
MENARD DOSWELL	1.00	Α.			-	<del> </del>	├		<u> </u>	
DIRECTOR	1.00	X						0.	0.	0.
WILLIAM P. HALLMAN, JR.		<u> </u>				<u> </u>				
DIRECTOR	1.00	X						0.	0.	0.
MARSHA KLEINHEINZ							Г			
DIRECTOR	1.00	X						0.	0.	0.
ANNE W. MARION										
DIRECTOR	1.00	X						0.	0.	0.
MARSLAND MONCRIEF										_
DIRECTOR	1.00	X	L		L_	<u> </u>	L	0.	0.	0.
PAMELA MURRIN										•
DIRECTOR	1.00	X	ļ		_	┞-	_	0.	0.	0.
BRUCE PETTY		١								0
DIRECTOR	1.00	X	-		-	₩	$\vdash$	0.	0.	0.
BLAINE SMITH	1				ì				^	0
DIRECTOR	1.00	X	├	-	├	┢	┢	0.	0.	0.
GEORGE M. YOUNG	1.00	v						0.	0.	0.
DIRECTOR ANDREW BLAKE	1.00	├^	$\vdash$	<del>                                     </del>	$\vdash$	+-	├	1	0.	
DIRECTOR	1.00	Y						0.	0.	0.
ROB DUPREE	1.00	^	$\vdash$		<del> </del>			<del> </del>		
DIRECTOR	1.00	x						0.	0.	0.
P22227 12 18 08	1 250		Ь	Ь—	Ь-	-	1	<del></del>		Form <b>990</b> (2008)

Part VII Section A. Officers, Directors, Tru (A)	(B)			(6	C)			(D)	(E)		(F)	
Name and title	Average hours	ر ا			ition that	app	١٧١	Reportable compensation	Reportable compensation		Estimati amount	
	per week	director			кеу етріоуев	Highest compensated		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	co or a	other mpensa from th rganizat nd relat ganizat	ation ne tion ted
RAFAEL GARZA DIRECTOR	1.00	х						0.	0			0.
KAYDEE BAILEY			1			<del>                                     </del>	T					
DIRECTOR	1.00	Х						0.	0			0.
ANNE H. BASS												
DIRECTOR	1.00	X						_ 0.	0	<u>.</u>		0.
CAROL BENSON												
DIRECTOR	1.00	Х						0.	_0			0.
ELIZABETH BROOKE BLAKE												
DIRECTOR	1.00	X						0.	0	•		0.
CARTER BOWDEN									_			_
DIRECTOR	1.00	X	ļ				<u> </u>	0.	0	•		0.
ELLIE BURDETTE									•			•
DIRECTOR	1.00	X	<u> </u>		_	1_	<u> </u>	0.	0	. 0.		
JOYCE CAPPER	1 00	٠,				1			0			
DIRECTOR	1.00	X	├-	_	-	┼—	-	0.	<u> </u>	0.		
WILLIAM W. COLLINS, JR.	1.00	l .						0.	0	. o.		
DIRECTOR GUNNIE CORBETT	1.00	^				-	╁	- 0.		•	- 0.	
DIRECTOR	1.00	Y						0.	0		0.	
1b Total	1.00	1 43	l		1	┰	1	882,578.	0		68,8	
2 Total number of individuals (including those	a in 1a) who re	celv	ed n	nore	tha	n \$1	00.	<del></del>		-1		
compensation from the organization	, , ,				•		,		•	•		3
						•					Yes	No
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s			e, ke	y en	nplo	yee,	or	highest compensated em	ployee on	3		Х
4 For any individual listed on line 1a, is the su			റന്നറ	ens:	atior	n an	d of	ther compensation from the	he organization		1	<del>                                     </del>
and related organizations greater than \$15	-								no organization	4	Х	ĺ
5 Did any person listed on line 1a receive or a									es rendered to			
the organization? If "Yes," complete Sched	•					,				5		<u> </u>
Section B. Independent Contractors	_											.,
1 Complete this table for your five highest co	mpensated in	dep	ende	ent c	cont	ract	ors	that received more than \$	100,000 of compe	sation	from	
the organization. NONE												
(A)								(B)			(C)	
Name and business	address							Description of se	ervices	Comp	ensatio	<del></del>
							-		·- <del></del> -			
			-									
2 Total number of independent contractors (i	ncluding those	e In	1) w	ho r	ecei	ved	mo	re than \$100,000 in comp	pensation			

from the organization

Form 990 (2008)

### Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B) (C) as

	All other organizations must comp				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	90,000.	90,000.		
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				······································
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	951,386.	590,134.	361,252.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)		222454	1 (50 (00	<u> </u>
7	Other salaries and wages	2,579,094.	928,474.	1,650,620.	<del> </del>
8	Pension plan contributions (include section 401(k)		2. 2	110 05/	
	and section 403(b) employer contributions)	197,370.	84,016.	113,354.	
9	Other employee benefits	262,403.	111,699.	150,704.	
10	Payroll taxes	230,310.	98,038.	132,272.	
11	Fees for services (non-employees):				
а	Management				
b	Legal	1,157.		1,157. 34,714.	· · · · · · · · · · · · · · · · · · ·
c	Accounting	34,714.		34,714.	
d	Lobbying				<u> </u>
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
9	Other				
12	Advertising and promotion				
13	Office expenses	89,516.	89,516.		
14	Information technology		-		
15	Royalties	001 000	700 071	100 010	
16	Occupancy	901,089.	720,871.	180,218.	
17	Travel .	94,550.	94,550.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	106 467	05 174	21 202	<del></del>
22	Depreciation, depletion, and amortization	106,467.	85,174.	21,293.	
23	Insurance	183,894.	183,894.		
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below )				
2	EXHIBITIONS	1,201,071.	1,201,071.		
а Ь	REPAIRS AND MAINTENANCE	380,980.	304,784.	76,196.	
2	MEMBERSHIPS	299,615.	299,615.		-
ن بر	EDUCATION AND PUBLICATI	116,918.	116,918.		
u	ART & LIBRARY ACCESSION	100,045.	100,045.		
f	All other expenses	104,519.	104,519.		
25	Total functional expenses. Add lines 1 through 24f	7,925,098.	5,203,318.	2,721,780.	0.
26	Joint Costs. Check here	. , ,			
-0	SOP 98-2 Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
	Constitution our spanger and functioning sometation		<del></del>		Form <b>QQ</b> () (2008)

Par	TX	Balance Sheet								
					(A) Beginning of year		En	<b>(B)</b> id of		
	1	Cash · non-interest-bearing			428,399.	1			5,4	77.
	2	Savings and temporary cash investments		-	477,102.	2			1,3	
	3	Pledges and grants receivable, net		Ī	130,000.	3				
	4	Accounts receivable, net			15,000.	4				
	5	Receivables from current and former officers, d	rectors	. trustees, kev						
		employees, or other related parties. Complete F		-		5				
	6	Receivables from other disqualified persons (as		F						
		4958(f)(1)) and persons described in section 49	58(c)(3)	(B). Complete						
		Part II of Schedule L		<u></u>		6				
ţ	7	Notes and loans receivable, net		7						
Assets	8	Inventories for sale or use	]	401,754.	8		24	4,8	<u>32                                    </u>	
<	9	Prepaid expenses and deferred charges		539,662.	9		57:	2,2	74	
	10a	Land, buildings, and equipment: cost basis	10a	1,258,852.						
	b	Less: accumulated depreciation. Complete		406 601	254 074					<b>-</b> 1
		Part VI of Schedule D	10b	486,601.	254,874.	10c		//.	2,2	<u>51</u>
	11	Investments - publicly traded securities			27 510 605	11	21	E 1 /	2 0	70
1	12	Investments - other securities. See Part IV, line		-	27,519,605.	12	21,	211	0,0	19.
	13	Investments - program-related. See Part IV, line		13						
	14	Intangible assets			224,844.	14		44	5,4	57
	15 16	Other assets. See Part IV, line 11  Total assets. Add lines 1 through 15 (must equ	و مدا امد	24)	29,991,240.	16	24,			
	17	Accounts payable and accrued expenses	296,305.	17		23	7,3	$\frac{63}{63}$		
1	18	Grants payable			18			. , -		
	19	Deferred revenue			19					
	20	Tax-exempt bond liabilities			20					
y	21	Escrow account liability. Complete Part IV of Sc	hedule	D		21				
豐	22	Payables to current and former officers, directo		E						
Liabilities		highest compensated employees, and disqualif		22						
	23	Secured mortgages and notes payable to unrel	rd narties		23					
	24	Unsecured notes and loans payable	aleu IIII	id parties		24				
	25	Other liabilities. Complete Part X of Schedule D				25				
	26	Total liabilities. Add lines 17 through 25			296,305.	26		23	7,3	63.
		Organizations that follow SFAS 117, check h	ere 🕨	X and complete						***************************************
ဖွ		lines 27 through 29, and lines 33 and 34.		-						
ğ	27	Unrestricted net assets			1,892,138.	27	2,		0,2	
3ala	28	Temporanly restricted net assets			283,194.	28			5,0	
Net Assets or Fund Balance	29	Permanently restricted net assets			27,519,603.	29	21,	510	), <u>8</u>	77.
Ē		Organizations that do not follow SFAS 117, or	heck h	ere ▶						
Ö		complete lines 30 through 34.								
Sets	30	Capital stock or trust principal, or current funds				30				
As	31	Paid in or capital surplus, or land, building, or ed				31				
Set	32	Retained earnings, endowment, accumulated in	icome,	or other tunas	29,694,935.	32	24,	14	5 1	70
_	33 Total net assets or fund balances 29, 694, 933 · 33 34 Total liabilities and net assets/fund balances 29, 991, 240 · 34								$\frac{3}{1}, \frac{1}{5}$	
Par	77.71	Financial Statements and Reporting	1	<u> </u>	23/331/2100	<del> </del>			7,0	
		Theread Gratements and Heperimi			· · · · · · · · · · · · · · · · · · ·				Yes	No
1		ounting method used to prepare the Form 990:			Other Other					v
2a		e the organization's financial statements compiled			accountant?			2a	<del></del>	Х
b		the organization's financial statements audited					ļ <sup>2</sup>	2b	X	
С		es" to lines 2a or 2b, does the organization have				audit,		20	х	
3-		w, or compilation of its financial statements and				ile Audr	· -	2c		
Ja		result of a federal award, was the organization re and OMB Circular A·133?	quired	to undergo an addit or add	ins as set forth the the sing	no Auull		3a		X
ь		es," did the organization undergo the required au	dit or a	udits?				3ь		

### **SCHEDULE A**

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

### **Public Charity Status and Public Support**

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

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

2008 Open to Public

OMB No 1545-0047

Name of the organization

FORT WORTH ART ASSOCIATION

Inspection
Employer identification number

75-1107061

Part I	Reason	for Public Char	ity Status (All organia	zations mu	st comple	te this par	t.) (see ins	tructions)				
The organi	ization is not a	a private foundation	because it is: (Please ch	neck only o	ne organi	zation.)	•					
1 🔲	A church, co	nvention of churches	s, or association of chur	ches desc	ribed in se	ction 170	(b)(1)(A)(i	).				
2 🔲	A school des	cribed in section 17	<b>0(b)(1)(A)(ii).</b> (Attach Sc	hedule E.)								
з 🔲	A hospital or	a cooperative hospit	tal service organization	described	ın section	170(b)(1)	<b>(A)(iii).</b> (At	tach Sche	edule H.)			
4 🔲	A medical res	search organization of	operated in conjunction	with a hos	pital desc	ribed in <b>se</b>	ection 170	(b)(1)(A)(i	ii). Enter t	the hospital's name,		
	city, and stat	e:										
5 🔲	An organizat	on operated for the	benefit of a college or u	niversity o	wned or or	perated by	a govern	mental un	it describ	ed in		
	section 170	(b)(1)(A)(iv). (Comple	ete Part II.)									
6 🗀	A federal, sta	ite, or local governm	ent or governmental uni	t describe	d in <b>sectio</b>	n 170(b)(1	1)(A)(v).					
7 X	An organizat	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ental unit d	or from the	general į	public described in		
	section 170(b)(1)(A)(vi). (Complete Part II.)											
8 🗌	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)											
9 🗀	An organizati	on that normally rec	eives: (1) more than 33	1/3% of its	support f	rom contri	butions, n	nembersh	p fees, ar	nd gross receipts fro	m	
	activities rela	ted to its exempt fur	nctions - subject to certa	aın excepti	ons, and (	2) no more	than 33 <sup>1</sup>	1/3% of its	support	from gross investme	∍nt	
	income and i	unrelated business to	axable income (less sec	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	anization a	after June 30, 1975.		
	See section	<b>509(a)(2).</b> (Complete	the Part III.)									
10	An organizat	on organized and op	perated exclusively to te	st for publ	ıc safety. S	See <b>sectio</b>	n 509(a)(4	<b>4).</b> (see ins	structions	)		
11 📖	An organizat	on organized and op	perated exclusively for the	he benefit	of, to perfo	orm the fui	nctions of	, or to carr	y out the	purposes of one or		
		• • •	itions described in secti		•		2). See <b>se</b> e	ction 509	(a)(3). Che	eck the box that		
	describes the type of supporting organization and complete lines 11e through 11h.											
	a L Type	· -	_ ••	с 🔲 Тур		-	•		d L	Type III - Other		
e 📖			t the organization is not									
			han one or more publich						9(a)(1) or :	section 509(a)(2).		
f	If the organiz	ation received a writ	ten determination from	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III		_	_	
		rganization, check th					•			Ĺ		
9			rganization accepted ar									
			irectly controls, either a	lone or tog	ether with	persons o	described	ın (II) and (	(III) below,		<u>lo</u>	
	-		upported organization?							11g(i)		
	•	•	n described in (i) above?							11g(ii)	_	
	• •		person described in (i)	٠.						11g(iii)	—	
h	Provide the f	ollowing information	about the organizations	the organ	ization sup	oports.						
		······································	(III) <b>T</b> (	I	-	T		1	1		—	
(i) Name	of supported	(ii) EIN	(iii) Type of organization		organization			(vi) iş organızatı	s the on in cot.	(vii) Amount of		
orga	ınızatıon		(described on lines 1-9		sted in your document?		r support?	(i) organiz U S	ed in the	support		
			above or IRC section	Yes	No	Yes	No	Yes	No			
<del></del>			(see instructions))	163	- 110	163	110	103	110		—	
								ł				
									<del>                                     </del>		—	
	<del></del>			<del> </del>	-			<del> </del>	<del>  </del>	<del></del>	—	
				<del> </del>	<del> </del>		-	<del>  - · · ·</del>	<del>  </del>			
				<del></del>	ļ				<del>  </del>		—	
				1	1							

Schedule A (Form 990 or 990-EZ) 2008 FORT WORTH ART ASSOCIATION 75-1107061 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.)

Sec	tion A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	6,612,669.	6,661,373.	5,877,815.	7,001,857.	5,943,286.	32,097,000.
2	Tax revenues levied for the organ-						
	ization'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		_1				
4	Total. Add lines 1 - 3	6,612,669.	6,661,373.	5,877,815.	7,001,857.	5,943,286.	32,097,000.
5	The portion of total contributions						
	by each person (other than a		1				
	governmental unit or publicly						
	supported organization) included	[					
	on line 1 that exceeds 2% of the		1				
	amount shown on line 11,	<b>!</b>	1				
	column (f)			i i			22,252,188.
6	Public Support. Subtract line 5 from line 4						9,844,812.
	tion B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4	6,612,669.	6,661,373.	5,877,815.	7,001,857.	5,943,286.	32,097,000.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	8,457.	14,234.	18,750.	15,594.	1,979,631.	2,036,666.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain	İ			•		
	or loss from the sale of capital					0.4.005	205 227
	assets (Explain in Part IV.)	11,078.	31,795.	78,274.	89,805.	94,385.	305,337.
11	Total support. Add lines 7 through 10		1	<u>l</u>			34,439,003.
	Gross receipts from related activities,						,295,582.
13	First five years. If the Form 990 is for	•	first, second, third	d, fourth, or fifth ta	k year as a section	n 501(c)(3)	▶ □
<u> </u>	organization, check this box and stor	o here		<del></del>			
	ction C. Computation of Publ					44	28.59 %
	Public support percentage for 2008 (	• ••	•	olumn (f))		14	28.59 <u>%</u> 27.61 %
	Public support percentage from 2007				4 92 1/20/	15	
168	33 1/3% support test - 2008. If the c				4 18 33 1/3 76 01 11	iore, check this bo	× and
	stop here. The organization qualifies 33 1/3% support test - 2007. If the control of the control				no 15 io 33 1/394	or more check th	ue box
0					ille 13 13 33 173 70	of filore, check th	▶ [ ]
47.	and stop here. The organization qual 10% -facts-and-circumstances tes				13 16a or 16b a		or more
ı / a	and if the organization meets the "fac						
	meets the "facts-and-circumstances"					non the organ	<b>►</b> X
<b>.</b>	10% -facts-and-circumstances tes	•		• • •	_	7a, and line 15 is	
O	more, and if the organization meets the						
	organization meets the 'facts-and-circ						▶□
18	Private foundation. If the organization						s • 🗖
<u></u>							or 990-EZ) 2008

Section A. Public Support			<del></del>		,,	
Calendar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(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 bus- iness under section 513						
4 Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
·		<del>                                     </del>		<del>                                     </del>	<del>                                     </del>	-
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 - 5		ļ		<del> </del>		
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 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b					<u> </u>	
8 Public support (Subtract line 7c from (ine 6)				<u> </u>		
Section B. Total Support						<del>,</del>
Calendar year (or fiscal year beginning in)▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	<b>(f)</b> Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12)		<u> </u>	<u> </u>	<u> </u>		
14 First five years. If the Form 990 is for	the organization	's first, second, the	rd, fourth, or fifth t	tax year as a sect	ion 501(c)(3) organiz	ation, ⊾ ☐
check this box and stop here				<del></del>		
Section C. Computation of Publi					14-1	
15 Public support percentage for 2008 (I			column (f))	-	15	91
16 Public support percentage from 2007					16	
Section D. Computation of Inves					42	
17 Investment income percentage for 20					17	94
18 Investment income percentage from 2					18	7
19a 33 1/3% support tests - 2008. If the						/ is not ⊾
more than 33 1/3%, check this box ar						. ▶∟.
<b>b 33 1/3% support tests - 2007.</b> If the						and ▶□
line 18 is not more than 33 1/3%, che						
20 Private foundation. If the organizatio	n did not check a	a box on line 14, 19	a, or 19b, check t		nstructions chedule A (Form 99	

### Schedule D (Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Financial Statements**

Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

2008 Open to Public Inspection

Name of the organization

FORT WORTH ART ASSOCIATION

Employer identification number 75-1107061

Pa	rt 1 Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds may b	e used only
<del> </del>	for charitable purposes and not for the benefit of the donor	or donor advisor or other impermissible p	rivate benefit? Yes No
Pa	rt 1 Conservation Easements. Complete if the or	ganization answered "Yes" to Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).	
	Preservation of land for public use (e.g., recreation or	pleasure) Preservation of an hi	storically important land area
	Protection of natural habitat	Preservation of certif	fied historic structure
	Preservation of open space		
2	Complete lines 2a-2d if the organization held a qualified con-	servation contribution in the form of a cor	nservation easement on the last day
	of the tax year.		<del></del>
			Held at the End of the Year
а	Total number of conservation easements		2a
b			<u>2b</u>
C		* *	2c
d	Number of conservation easements included in (c) acquired		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by th	e organization during the taxable
	year -		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, violations, a	Yes No
6	enforcement of the conservation easements it holds?	and enforcing engagements during the year	<del></del>
7	Staff or volunteer hours devoted to monitoring, inspecting, a Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) abo		
Ü	and section 170(h)(4)(B)(ii)?	ve satisfy the requirements of section 171	Yes No
9	In Part XIV, describe how the organization reports conservat	ion essements in its revenue and expens	
·	include, if applicable, the text of the footnote to the organization		
	conservation easements.		, o. gag
Pa	rt III Organizations Maintaining Collections of	of Art, Historical Treasures, or C	Other Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116, no	ot to report in its revenue statement and t	palance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e		
	the footnote to its financial statements that describes these	items.	
b	If the organization elected, as permitted under SFAS 116, to	report in its revenue statement and bala	nce sheet works of art, historical treasures,
	or other similar assets held for public exhibition, education, of	or research in furtherance of public service	e, provide the following amounts relating to
	these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		► s0.
	(ii) Assets included in Form 990, Part X		<b>▶</b> \$0.
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financi	al gain, provide
	the following amounts required to be reported under SFAS 1	16 relating to these items:	_
а	Revenues included in Form 990, Part VIII, line 1		► \$ <u>0.</u>
b	Assets included in Form 990, Part X		• \$ <u>0.</u> • \$ <u>0.</u>

		RTH ART AS							0.7061	<del></del>
Par	t 期   Organizations Maintaining C	Collections of A	<u>rt, His</u>	torical Tr	easures, c	or Othe	<u>r Simila</u>	<u>ar Asse</u>	<b>ts</b> (contin	ued)
3	Using the organization's accession and other	r records, check any	y of the t	following tha	it are a signif	icant use	of its col	lection ite	ms (check	all
	that apply):									
а	X Public exhibition	c	ı X	Loan or exc	hange progra	ams				
b	X Scholarly research	•	• 🗀	Other						
С	X Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	ın how ti	hey further t	he organizati	on's exen	npt purpo	se in Par	t XIV.	
5	During the year, did the organization solicit of									
	to be sold to raise funds rather than to be m								Yes _	X No
Par						ered 'Yes	to Form	990, Par	t IV, line 9	, or
	reported an amount on Form 990, Pa	rt X, line 21.								
1a	Is the organization an agent, trustee, custod	ian or other interme	diary for	contribution	ns or other as	sets not I	ncluded		<u></u>	
	on Form 990, Part X?								Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowina	table:						
-	in 100, oxplain the arrangement in Factoria		g						Amount	
c	Beginning balance						1c			
	Additions during the year						1d			
	Distributions during the year						1e			
f	Ending balance						11			
	Did the organization include an amount on F	orm 990 Part X line	212						Yes	□ No
	If "Yes," explain the arrangement in Part XIV									
Par			ered "Ye	es" to Form 9	990. Part IV.	line 10.				
	Zindovilloitt i dindor complete	(a) Current year	Ĭ	nor year	(c) Two yea		d) Three v	ears back	(e) Four v	rears back
4.	Beginning of year balance	27,802,798.		noi yeai	(C) INO year	13 000 1	<u>o, 111100 ,</u>	outo buon	107 : 00: )	0010 000
	Contributions	77,765.								
	Investment earnings or losses	<6,004,667.		***************************************						
	_	20,004,007.	<u> </u>							
a	Grants or scholarships			·····			***************************************			<del>~~~~</del>
е	Other expenditures for facilities									
	and programs				<b></b>					······
T	Administrative expenses	21 075 006	<del> </del>							
	End of year balance	21,875,896.		·····	<u> </u>				l	
2	Provide the estimated percentage of the year	ar end balance neld a								
	Board designated or quasi-endowment		%							
	Permanent endowment ► 98.33  Term endowment ► 1.67	%								
		.%	4 4 h					ration		
3a	Are there endowment funds not in the posse	ession of the organiz	ation th	at are nelo a	ino aoministe	erea for th	e organiz	allon	ſ,	res No
	by:									X
	(i) unrelated organizations									$\frac{x}{x}$
	(ii) related organizations								1	X
Ь	If "Yes" to 3a(ii), are the related organization	·							3b	
4	Describe in Part XIV the intended uses of the				Deat V. Inc.	10				
Par				1				-	4.0.01-	
	Description of investment	(a) Cost or of basis (investigation)			or other (other)	(c) De	preciatio	'n	(d) Book	value
1a	Land .									
b	Buildings .								<del></del>	
c	Leasehold improvements				0,974.		9,6	66.		,308.
d	Equipment			85	7,878.	4	76,9	35.	380	,943.
е	Other									
Total	. Add lines 1a⋅1e. (Column (d) should equal F	orm 990, Part X, col	<u>umn (B),</u>	line 10(c).)			<del></del>	<u> </u>	<u> </u>	,251.

Schedule D (Form 990) 2008

Part VII Investments - Other Securities. Se	e Form 990, Part X, line 12	2.		
(a) Description of security or category (including name of security)	(b) Book value	(c) M	ethod of valua nd-of-year mar	
Financial derivatives and other financial products Closely-held equity interests				
OtherLIBRARY COLLECTION	1	COST	<del> </del>	
ART COLLECTION	1.	COST		
BENJAMIN J. TILLAR TRUST	1,584,796.		MARKET	VALUE
GWEN TANDY ART TRUST	1,596,389.			
BOMAR/NAIL TRUSTS	18,329,692.			
Total. (Col (b) should equal Form 990, Part X, col (B) line 12 )				
(a) Description of investment type	(b) Book value	(c) M	ethod of valua nd-of-year mar	
				<del></del>
Total. (Col (b) should equal Form 990, Part X, col (B) line 13 )				
Part IX Other Assets. See Form 990, Part X, line			···	(L) Dealessales
(a)	Description			(b) Book value
		<del></del>		-
	<del></del>			
	·			
Total. (Column (b) should equal Form 990, Part X, col (B) III			<u> </u>	
Part X Other Liabilities. See Form 990, Part X,  (a) Description of liability	line 25.	(b) Amount		
Federal income taxes				
Total. (Column (b) should equal Form 990, Part X, col (B) lii	ne 2 <u>5</u> )	L		

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48. 832053 12-23-08

che	edule D (Form 990) 2008 FORT WORTH ART ASSOCIA!	TION		75-	1107061	Page 4
	rt XI Reconciliation of Change in Net Assets from Form	990 to Financia	I Statements			
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		8,385	058.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		7,925	098.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3			<u>,960.</u>
4	Net unrealized gains (losses) on investments		4		<5,974	<u>,931.</u> :
5	Donated services and use of facilities		5			
6	Investment expenses		6			
7	Prior period adjustments		7			
8	Other (Describe in Part XIV)		8			<u>,794 .</u> :
9	Total adjustments (net). Add lines 4-8		9		<6,008	
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and	d 9	10		<5,548	<u>,765 .</u> :
Par	rt XII Reconciliation of Revenue per Audited Financial St	atements With	Revenue per	Return	1 7 7 7	4.4.6.7
1	Total revenue, gains, and other support per audited financial statements			1	<1772	146/.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1	.0.61.005.05			
а	Net unrealized gains on investments	2a '	<26109537	•▶		
b	Donated services and use of facilities	_2b		- 1		
C	Recoveries of prior year grants	2c		_		
d	Other (Describe in Part XIV)	2d	12	4	.0.61.04	
e	Add lines 2a through 2d			_2e	<26109	
3	Subtract line 2e from line 1			3	8,385	,058.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		-		
b	Other (Describe in Part XIV)	4b		-		^
C	Add lines 4a and 4b			4c	0 305	0.
5		12.)	_	5	8,385	,058.
Pa	rt XIII Reconciliation of Expenses per Audited Financial S	tatements with	Expenses pe		7,958	004
1	Total expenses and losses per audited financial statements		•	1	7,956	,904.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 - 1				
а		2a		$\dashv$ $\parallel$		
b	•	2b	·	-		
С		2c	122 006	-		
d	,	_2d	123,806	<b>-</b> 1	122	,806.
	Add lines 2a through 2d			2e	7,835	
3	Subtract line 2e from line 1			3	1,033	, 030.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1.1				
а	·	4a	90,000	- 1		
	Other (Describe in Part XIV)	4b ]	90,000		9.0	,000.
	Add lines 4a and 4b			4c		
	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, lin	e 18.)		5	7,925	,030.
	rt XIV Supplemental Information				0. 8 + 1/ 1	4. D
	plete this part to provide the descriptions required for Part II, lines 3, 5, and	9; Part III, lines 1a ar	na 4; Part IV, lines	1b and	∠o; ⊬art V, line	4; Pan
	art XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b.	OT T.ECTTONS	, WHICH W	ਧਰਜ਼	ואמדוורטע	<b>n</b>
A	RT III, LINE 1A: THE ART AND LIBRARY C	OTTECTIONS	, WILLOI W	LIKE .	UC COTIUDI	

THROUGH PURCHASES AND CONTRIBUTIONS SINCE THE ASSOCIATIONS INCEPTION, ARE NOT RECOGNIZED AS ASSETS IN THE STATEMENT OF FINANCIAL POSITION.

PURCHASES OF COLLECTION ITEMS ARE RECORDED AS ART AND LIBRARY ACCESSIONS IN THE YEAR OF ACQUISITION. CONTRIBUTED COLLECTION ITEMS ARE NOT REFLECTED IN THE FINANCIAL STATEMENTS. PROCEEDS FROM DEACCESSIONS OR INSURANCE RECOVERIES ARE REFLECTED AS INCREASES IN THE APPROPRIATE NET ASSET CLASSES AND MUST BE USED ONLY TO ACQUIRE OTHER COLLECTION OBJECTS.

PART III, LINE 4: THE COLLECTIONS ARE MADE UP OF ARTIFACTS OF LITERARY

AND ART OBJECTS THAT ARE HELD FOR EDUCATIONAL AND CURATORIAL PURPOSES.

EACH OF THE ITEMS IS CATALOGED, PRESERVED, AND CARED FOR, AND ACTIVITIES

VERIFYING THEIR EXISTENCE AND ASSESSING THEIR CONDITION ARE PERFORMED

CONTINUOUSLY.

PART V, LINE 4: THE FRIENDS OF ART ENDOWMENT FUND - THIS FUND CONSISTS

OF INVESTMENTS, THE INCOME FROM WHICH MAY ONLY BE USED TO ACQUIRE WORKS OF

FINE ART.

THE GENERAL OPERATIONS FUND - THIS FUND CONSISTS OF INVESTMENTS, A PORTION OF WHICH MAY BE USED SOLELY FOR THE OPERATIONS OF THE ASSOCIATION.

THE ANNE MARION ENDOWMENT FUND - THIS FUND CONSISTS OF INVESTMENTS WHICH
MAY BE USED AT THE SOLE DISCRETION OF ANNE MARION FOR THE BENEFIT OF THE
MUSEUM.

THE BURNETT FOUNDATION ENDOWMENT FUND - THIS FUND CONSISTS OF INVESTMENTS,

THE INCOME FROM WHICH MAY BE USED TO ACQUIRE WORKS OF FINE ART AND FOR THE

COMPENSATION OF CERTAIN ASSOCIATION STAFF.

THE SID W. RICHARDSON FOUNDATION FUND - THIS FUND CONSISTS OF INVESTMENTS,

THE INCOME FROM WHICH MAY BE USED FOR THE OPERATIONS OF THE ASSOCIATION

AND/OR TO ACQUIRE WORKS OF FINE ART.

THE PERRY AND NANCY LEE BASS ENDOWMENT FUND - THIS FUND CONSISTS OF

INVESTMENTS WHICH MAY BE USED FOR THE CAPITAL MAINTENANCE AND REPLACEMENT

OF THE BUILDING SYSTEMS OF THE MODERN ART MUSEUM BUILDING.

THE GENERAL ACQUISITIONS FUND - THIS FUND CONSISTS OF INVESTMENTS, THE INCOME FROM WHICH MAY ONLY BE USED TO ACQUIRE WORKS OF FINE ART.

Schedule D (Form 990) 2008 FORT WORTH ART ASSOCIATION	75-1107061 Page 5
Part XIV Supplemental Information (continued)	_ <del>.</del>
CHANGE IN NET ASSETS OF FORT WORTH MODERN ART MUSEUM ASSOC	CIATION
PART XII, LINE 2D:	
INCOME FROM FORT WORTH MODERN ART MUSEUM ASSOCIATION	
PART XIII, LINE 2D:	
EXPENSES FROM FORT WORTH MODERN ART MUSEUM ASSOCIATION	
PART XIII, LINE 4B:	
GRANT TO FORT WORTH MODERN ART MUSEUM ASSOCIATION	
<del></del>	
	<del></del>

CHEDULE I								OMB No 1545-0047	15-0047
orm 990)			Grants and Governm	Grants and Other Assistance to Organizations, Governments, and Individuals in the U.S.	to Organizations to U.S.			2008	,
partment of the Treasury emal Revenue Service		<b>▼</b> Comp	Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. ▶ Attach to Form 990.	n answered "Yes," on F ▶ Attach to Form 990.	" on Form 990, Pa n 990.	irt IV, lines 21 or 22.		Open to Public Inspection	ublic ion
ame of the organization	tion FORT WORTH ART		ASSOCIATION					Employer identification number 75–1107061	number 7061
Part! General I	General Information on Grants and Assistance	nd Assistance							
1 Does the organi	Does the organization maintain records to substantiate the amount of the	to substantiate the		or assistance, the	grantees' eligibility	for the grants or assi	grants or assistance, the grantees' eligibility for the grants or assistance, and the selection		[
	criteria used to award the grants or assistance?	stance?	•					X Yes	<b>2</b>
낋	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	ocedures for moni	toring the use of grant	funds in the United	States.				
Part II Grants ar	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule 1-1 (Form 990) if additional space is needed	Governments and R5 000 Check this	d Organizations in the	• United States. Co	omplete if the orga	inization answered "Y rt IV and Schedule I-1	es" on Form 990, Part (Form 990) if addition	t IV, line 21, for any pal space is needed	
1 (a) Name and a	1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	ant
DRT WORTH MODERN ART MUSEUM SSOCIATION - 3200 DARNELL S'	IODERN ART MUSEUM - 3200 DARNELL STREET	0636056 35	601/7/73	G	c			SWOTHERST. LEGING	
1									
2 Enter total num	Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations	and government or	rganizations						0
٦,	For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	ction Act Notice,	see the Instructions	for Form 990.				Schedule I (Form 990) 2008	990) 2008

FORT WORTH ART ASSOCIATION

Page 2

75-1107061

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed. Schedule | (Form 990) 2008

### **Compensation Information**

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

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

2008 No 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

FORT WORTH ART ASSOCIATION

Employer identification number 75-1107061

Pŧ	ert 1 Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel  Mousing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
ь	If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision			
	of all of the expenses described above? If "No," complete Part III to explain	1b	X	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		X
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply.			
	X Compensation committee X Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations  X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a:			
а	Receive a severance payment or change of control payment?	4a_		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	_5a		X
ь	Any related organization?	5b		X
	If "Yes," to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		X
þ	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III.			1
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			۱
	not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			.,
	initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		<u> </u>

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

Schedule J (Form 990) 2008

Schedule J (Form 990) 2008

FORT WORTH ART ASSOCIATION

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

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

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

		(B) Breakdown of \	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(0)	<u>Q</u>	(E)	Ð
(A) Name	<u></u>	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	Deferred	Nontaxable benefits	Total of columns (B)(i)-(D)	Compensation reported in prior Form 990 or Form 990-EZ
	ε	400,000.	0.	0	0.	25,260.	425,260.	0
MARLA J. PRICE	(ii)	0	0.	0	0	0.	0	0.
	ε	247,078.	0	0	0	21,436.	268,514.	0
MICHAEL AUPING	Œ	0	0.	0.	0	0	0	0
	(3)							
)	(ii)							
	ε							
)	(II)							
	(1)							
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Schedule J (Form 990) 2008

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PART I, LINE 1A: THE ORGANIZATION PROVIDES A HOUSE FOR
MARLA PRICE. THE ORGANIZATION ALSO PAYS FOR ALL CARE, MAINTENANCE, REPAIR,
AND UPKEEP EXPENSES OF THE RESIDENCE.
Schedule J (Form 990) 2008

### **Continuation Sheet for Form 990**

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the Organization

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

Employer Identification number 75-1107061

### FORT WORTH ART ASSOCIATION Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Part I (C) (D) (E) (A) **Position** Reportable Reportable Estimated Name and Title Average hours (check all that apply) compensation compensation amount of from from related other per week the organizations compensation (W-2/1099-MISC) organization from the Individual frustae or director (W-2/1099-MISC) organization Institutional trustee and related organizations Key employee Highest Former MICHELLE COSLIK 0. DIRECTOR 1.00 | X 0. 0. LUCY DARDEN DIRECTOR 1.00 X 0. 0. 0. MITZI DAVIS 1.00 X 0 -0. 0. DIRECTOR KELLY ANN EWIN 1.00 X 0. 0. 0. DIRECTOR AMES FENDER 0. 0. 0. 1.00 X DIRECTOR JOHN FORESTNER 0. DIRECTOR 1.00 X 0. 0. FULLER FRENCH 0. 0. 0. 1.00 | X DIRECTOR BETH GIDEON 0. 0 0. 1.00 X DIRECTOR **BOB GINSBURG** 0. 1.00 X 0. 0. DIRECTOR SUSAN GREEN 0. 0. 0. 1.00 | X DIRECTOR WINDI GRIMES 0. 0. 0. 1.00 X DIRECTOR DAN HAGAN 0. 0. 0 1.00 X DIRECTOR HOWARD HALLAM 0. 0. 0. DIRECTOR 1.00 X JANIE HARPER 0. 0. 0. DIRECTOR 1.00 X ADELE HART 0. DIRECTOR 0. 0 1.00 X MARK L. HART III 0. 0. 0. 1.00 X DIRECTOR LEE HASENZAHL DIRECTOR 1.00 X 0. О. 0. STEVE HUDGENS 0. 0. 1.00 X 0. DIRECTOR ANN F. HUDSON 0. 1.00 | X 0. 0. DIRECTOR RANDALL HUDSON 0. 1.00 | X 0. DIRECTOR

### **Continuation Sheet for Form 990**

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

Name of the Organization

FORT WORTH ART ASSOCIATION

Employer Identification number 75-1107061

Part I Continuation of Officers, D								overs and Higher	75-110	
		usi	ree			En	<u>ıpı</u>			
(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average hours	(0)		Posi k all 1			NA.	Reportable compensation	Reportable compensation	Estimated amount of
	per	10	T	Tan	Пас	apt	יעי <i>ו</i>	from	from related	other
	week	1				8		the	organizations	compensation
	}	ğ	l			E		organization	(W·2/1099·MISC)	from the
		£	.			Eg G		(W-2/1099-MISC)		organization
		1 8 E	ES ES			ersa				and related
		를	Ē		Sec.	8				organizations
		Individual mustee or director	Institutional trustae	Officer	Key employee	is i	Former			
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DANA KELLY	1 00									
DIRECTOR	1.00	X	<u> </u>		_	ļ	-	0.	0.	0.
RAYMOND B. KELLY III	1	١	1							
DIRECTOR	1.00	X	_			ļ	┝	0.	0.	0.
ALBERT S. KOMATSU						Ì	l			
DIRECTOR	1.00	Х		_			_	0.	0.	0.
TOM LANG										
DIRECTOR	1.00	X	<u> </u>			_	ļ	0.	0.	0.
SUZANNE LEVY										
DIRECTOR	1.00	X				_		0.	0.	0.
MARY RALPH LOWE									_	
DIRECTOR	1.00	Х					_	0.	0.	0.
KATHRIN MALONE										
DIRECTOR	1.00	X		lacksquare		<u> </u>	L	0.	0.	.0.
CHARLENE MARSH							l			
DIRECTOR	1.00	X	<u> </u>			_	<u> </u>	0.	0.	0.
PATTY MASON										
DIRECTOR	1.00	X				<u> </u>	_	0.	0.	0.
KIT MONCRIEF									_	
DIRECTOR	1.00	Х						0.	0.	0.
DENISE MULLINS										
DIRECTOR	1.00	Х	<u> </u>				ļ	0.	0.	0.
STEPHEN NOLAN						ŀ			_	
DIRECTOR	1.00	X						0.	0.	0.
NANCY O'BOYLE							1		_	
DIRECTOR	1.00	X				<u> </u>	<u> </u>	0.	0.	0.
GAIL RAWL									_	_
DIRECTOR	1.00	X						0.	0.	0.
PEGGIE RAYZOR							1	_	_	_
DIRECTOR	1.00	X						0.	0.	0.
MISSY RODGERS										
DIRECTOR	1.00	X				_	<u> </u>	0.	0.	0.
POLLARD ROGERS							ĺ		_	_
DIRECTOR	1.00	X	ļ. <u>.                                   </u>					0.	0.	0.
JUDY ROSENBLUM										_
DIRECTOR	1.00	X					L	0.	0.	0.
ROZANNE ROSENTHAL										_
DIRECTOR	1.00	X	<u> </u>				L	0.	0.	0.
ANN RYAN	_								_	_
DIRECTOR		Х	L					0.	0.	0.
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### **Continuation Sheet for Form 990**

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

Name of the Organization

FORT WORTH ART ASSOCIATION

Employer Identification number 75-1107061

FORT WOR									/5-110	
Part I Continuation of Officers, D		rus1	tee:			En	lqn			
(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average			Posi				Reportable	Reportable	Estimated
	hours	(c	hecl	( all 1	that	app	yly)	compensation	compensation	amount of
	per week							from the	from related organizations	other compensation
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		g g				었다	ŀ	(W-2/1099-MISC)	(** 2 : 555 111155)	organization
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		l fit	眶		ea fo	ğ.				organizations
		Individual trustee or director	Institutional frustee	O#Ge	Key employee	Highest compensated employee	Former			
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JAY SANDELIN									_	_
DIRECTOR	1.00	X				_		0.	0.	0.
EDMUND W. SCHENECKER II	ŀ									
DIRECTOR	1.00	X						0.	0.	0.
CYNTHIA SIEGEL	1		ĺ							
DIRECTOR	1.00	X					L	0.	0.	0.
JOHN M. STEVENSON										/
DIRECTOR	1.00	X				L.,		0.	0.	
SALLIE TARRIDE	]									
DIRECTOR	1.00	X						0.	0.	0.
LEE TENNISON										
DIRECTOR	1.00	X						0.	0.	0.
MARK THISTLETHWAITE										
DIRECTOR	1.00	X						0.	0.	0.
CARLA THOMPSON										
DIRECTOR	1.00	X						0.	_ 0.	0.
PAUL TRIPPLEHORN										
DIRECTOR	1.00	X						0.	0.	0.
PUDDIN TURNER									_	
DIRECTOR	1.00	X						0.	_ 0.	<u> </u>
JAY UPCHURCH										
DIRECTOR	1.00	X						0.	0.	0.
ALLISON WAGNER									·	
DIRECTOR	1.00	X						0.	0.	0.
GENEVIEVE WAGNER										
DIRECTOR	1.00	X						0.	0.	0.
HARRY N. WARD, JR.										
DIRECTOR	1.00	X						0.	0.	0.
CHARLES WEATHERBY, JR.										
DIRECTOR	1.00	X						0.	0.	0.
MONK WHITE										
DIRECTOR	1.00	X						0.	0.	0.
SUZY WILLIAMS										
DIRECTOR	1.00	Х						0.	0.	0.
S. PATRICK WOODSON III										
DIRECTOR	1.00	X				L		0.	0.	0.
KIMBELL WYNNE										
DIRECTOR	1.00	X				1		0.	0.	0.
DIANE YOUNG										
DIRECTOR	1.00	Х				L	<u></u>	0.	0.	0.
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### **Continuation Sheet for Form 990**

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

Name of the Organization

FORT WORTH ART ASSOCIATION

Employer Identification number 75-1107061

FORT WOR	I'H AKT A	45	<u>500</u>	<u>. 12</u>	7.T.	LOI	<u></u>		75-110	7061
Part I Continuation of Officers, D	irectors, Tr	ust	tee	s, K	Сеу	En	nple	oyees, and Highes	t Compensated	Employees
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and Title	Average			Posi				Reportable	Reportable	Estimated
	hours	(c		(all			dv)	compensation	compensation	amount of
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	week				l	8		the	organizations	compensation
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		誓	Ē		B	활	l			organizations
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		Individual trustae or director	Institutional frust <del>oc</del>	Officer Cer	Кеу етріоусе	Highest compensated employee	Former			
MARLA J. PRICE		=	-	۳	_	_	_			
	40 00				v			400 000	•	25 260
MUSEUM DIRECTOR	40.00	_	<u> </u>	_	X	<u> </u>	<u> </u>	400,000.	0.	25,260.
MICHAEL AUPING										
CHIEF CURATOR	40.00		_		X		ļ	247,078.	0.	21,436.
JOANETTE GARWOOD							ļ			
CONTROLLER	40.00	1				X		137,500.	0.	11,123.
SUZANNE WOO										
EVENT DIRECTOR	40.00					X		98,000.	0.	10,989.
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Department of the Treasury Internal Revenue Service

### Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

FORT WORTH ART ASSOCIATION

Employer identification number 75-1107061

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
COLLECTION OF WORKS OF MODERN ART OF THE HIGHEST QUALITY AND TO
PROMULGATE AND MAINTAIN A PROGRAM OF ART ACTIVITIES AND ART EDUCATION
IN FORT WORTH, TEXAS, FOR PUBLIC USE AND BENEFIT. THE ASSOCIATION
STRIVES TO PROVIDE EDUCATIONAL ENJOYMENT IN MODERN ART, TO PRESERVE THE
ART HOLDINGS OF THE ASSOCIATION AND TO CREATE PUBLIC APPRECIATION FOR
SUCH ART BY ITS APPROPRIATE DISPLAY.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
BENEFIT. THE ASSOCIATION STRIVES TO PROVIDE EDUCATIONAL ENJOYMENT IN
MODERN ART, TO PRESERVE THE ART HOLDINGS OF THE ASSOCIATION AND TO
CREATE PUBLIC APPRECIATION FOR SUCH ART BY ITS APPROPRIATE DISPLAY.
FORM 990, PART VI, SECTION A, LINE 10: BOTH THE MUSEUM DIRECTOR AND THE
CONTROLLER REVIEW FORM 990 IN DETAIL PRIOR TO FILING. THOUGH COPIES OF THE
RETURN ARE NOT PROVIDED TO THE MEMBERS OF THE GOVERNING BODY, FORM 990 IS
MADE AVAILABLE TO THEM PRIOR TO FILING.
FORM 990, PART VI, SECTION B, LINE 12C: DIRECTORS ARE REQUIRED TO ANNUALLY
DISCLOSE CONFLICTS OF INTEREST.
FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION AND OTHER TERMS OF
EMPLOYMENT FOR TOP MANAGEMENT AND OTHER KEY EMPLOYEES IS DETERMINED BY THE
EXECUTIVE COMMITTEE.

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008 Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

FORT WORTH ART ASSOCIATION

Employer identification number 75-1107061

GOVERNING	DOCUMENTS	, FINANCIAL	STATEMENTS,	AND FORM	990 AVAII	ABLE UPON
REQUEST.		·				
FORM 990,	PART XI,	LINE 2C				
FINANCIAL	REPORTING	OVERSIGHT				
THE GOVERN	ING BODY	IS RESPONSIE	BLE FOR OVER	SIGHT OF	THE FINANC	IAL
REPORTING	PROCESS.					·
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Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

▶ Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37. Related Organizations and Unrelated Partnerships

▶ See separate instructions.

2008 Open to Public Inspection

Employer identification number 75-1107061

Direct controlling entity

Œ

OMB No 1545-0047

FORT WORTH ART ASSOCIATION Name of the organization

Identification of Disregarded Entities

Part

<u>(i)</u>	End-of-year assets							
<u>0</u>	Total income							
()	Legal domicile (state or foreign country)							
(B)	Primary activity							
3	Name, address, and EIN of disregarded entity							

Identification of Related Tax-Exempt Organizations Part II

Port worth modern art museum association of related organization of related organization of related organization of related organization - Owns THE PERSONAL RESIDENCE 75-2307639, 3200 DARNELL STREET, FORT WORTH, WHERE THE MUSEUM DIRECTOR TEXAS FORT WORTH ART ASSOCIATION ENDOWMENT TRUST - LIVES.  75-2307639, 3200 DARNELL STREET, FORT WORTH, PROVIDES CONTRIBUTIONS TO TEXAS  75-2544018, 3200 DARNELL STREET, FORT WORTH, PROVIDES CONTRIBUTIONS TO TEXAS  75-2544018, 3200 DARNELL STREET, FORT WORTH, PROVIDES CONTRIBUTIONS TO FOWNS MUSEUM BUILDING AND PROVIDES CONTRIBUTIONS TO FEXAS  701 MAIN STREET FORT WORTH, TX 76102 THE ORGANIZATION, TEXAS	(B)	(a)	( <u>E</u> )	( <del>)</del>
H MODERN ART MUSEUM ASSOCIATION - OWNS THE PERSONAL RESIDENCE  9, 3200 DARNELL STREET, FORT WORTH, WHERE THE MUSEUM DIRECTOR LIVES.  H ART ASSOCIATION ENDOWMENT TRUST -  10, 1200 DARNELL STREET, FORT WORTH, PROVIDES CONTRIBUTIONS TO THE ORGANIZATION.  ATION - 75-2654817 OWNS MUSEUM BUILDING AND STREET PROVIDES CONTRIBUTIONS TO H, TX 76102 THE ORGANIZATION.	Primary activity Legal domicile (state or foreign country)	Exempt Code section	Public charity status (if section 501(c)(3))	Direct controlling entity
9, 3200 DARNELL STREET, FORT WORTH, WHERE THE MUSEUM DIRECTOR LIVES.  H ART ASSOCIATION ENDOWMENT TRUST -  8, 3200 DARNELL STREET, FORT WORTH, PROVIDES CONTRIBUTIONS TO THE ORGANIZATION.  STREET PROVIDES CONTRIBUTIONS TO PROVIDES CONTRIBUTIONS TO H, TX 76102 THE ORGANIZATION.	HE PERSONAL RESIDENCE			
H ART ASSOCIATION ENDOWMENT TRUST -  8, 3200 DARNELL STREET, FORT WORTH, PROVIDES CONTRIBUTIONS TO THE ORGANIZATION.  ATION - 75-2654817 OWNS MUSEUM BUILDING AND STREET PROVIDES CONTRIBUTIONS TO THE ORGANIZATION.	THE MUSEUM DIRECTOR			
REET, FORT WORTH, PROVIDES CONTRIBUTIONS TO THE ORGANIZATION.  DWNS MUSEUM BUILDING AND PROVIDES CONTRIBUTIONS TO THE ORGANIZATION.		501(C)(3)	LINE 11, TYPE 1N/A	N/A
REET, FORT WORTH, PROVIDES CONTRIBUTIONS TO THE ORGANIZATION.  OWNS MUSEUM BUILDING AND PROVIDES CONTRIBUTIONS TO THE ORGANIZATION.				
THE ORGANIZATION.  OWNS MUSEUM BUILDING AND PROVIDES CONTRIBUTIONS TO THE ORGANIZATION.	ES CONTRIBUTIONS TO			FORT WORTH ART
OWNS MUSEUM BUILDING AND PROVIDES CONTRIBUTIONS TO THE ORGANIZATION.	TEXAS	501(C)(3)	LINE 11, TYPE IASSOCIATION	ASSOCIATION
76102 THE ORGANIZATION.	USEUM BUILDING AND			
THE ORGANIZATION.	ES CONTRIBUTIONS TO		LINE 11, TYPE	
	TEXAS	501(C)(3)	III	N/A

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

Schedule R (Form 990) 2008

75-1107061

Page 2

Schedule R (Form 990) 2008 FORT WORTH ART ASSOCIATION

Part III Identification of Related Organizations Taxable as a Partnership

3	General or managing partner?	Yes No								 _	
_	Gen Par Te	e S				_				 	 _
€	Disproportion- ate allocations?	K-1 (Form 1065									
	rtion-	ş									
£	spropo allocat	es					 				 
			_						 	 	 _
(5)	Share of end-of-year	desers									
(F)	Share of total income										
(E)	Predominant income (related, investment,	unrelated)									
(g)	Direct controlling entity										
(0)	Legal domicile (state or foreign	country)						•			
(8)	Primary activity										
8	Name, address, and EIN of related organization										

Part IV Identification of Related Organizations Taxable as a Corporation or Trust

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(C) (E) (E) (E) (E) (E) (E) (State or sentity (C corp., S corp., sountry)	(E) Type of entity (C corp., S corp. or trust)	(F) Share of total income	(G) Share of end-of-year assets	(H) Percentage ownership
		-					
				•			

Schedule R (Form 990) 2008

Page 3

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Yes

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# Schedule R (Form 990) 2008 FORT WORTH ART ASSOCIATION

### Transactions With Related Organizations PartV

. Complete line 1 if any entity is listed in Parts II, III, or IV. During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
---

a Receipt of (i) interest (ii) annuties (iii) royalties (iv) rent from a controlled entity

**b** Gift, grant, or capital contribution to other organization(s)

c Gift, grant, or capital contribution from other organization(s)

d Loans or loan guarantees to or for other organization(s)

e Loans or loan guarantees by other organization(s)

Sale of assets to other organization(s)

g Purchase of assets from other organization(s)

h Exchange of assets

i Lease of facilities, equipment, or other assets to other organization(s)

j Lease of facilities, equipment, or other assets from other organization(s)

k Performance of services or membership or fundraising solicitations for other organization(s)

l Performance of services or membership or fundraising solicitations by other organization(s)

m Sharing of facilities, equipment, mailing lists, or other assets

n Sharing of paid employees

Reimbursement paid to other organization for expenses

p Reimbursement paid by other organization for expenses

q Other transfer of cash or property to other organization(s)

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Other transfer of cash or property from other organization(s)

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

(A) Name of other organization(s)	(B) Transaction type (a-r)	(C) Amount involved
(1) FORT WORTH MODERN ART MUSEUM ASSOCIATION	В	90,000.
(2) FORT WORTH ART ASSOCIATION ENDOWMENT TRUST	U	2,489,654.
(9)		
(4)		
(5)		
(9)		

Schedule R (Form 990) 2008

832163 12-23-08

Page 4

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## Part Vi Unrelated Organizations Taxable as a Partnership

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

ial was not a feialed organization. See instructions regarding exclusion for	design for certain investinent partifersings.	sillps.		1			
8	(B)	<u>(</u> )	<u>@</u>	(E)	Œ	9	£
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	Are all partners section 501(c)(3) organizations?	Share of end-of- year assets	Dispropor- tionate allocations?	Code V-UBI amount in box 20	General or managing partner?
			Yes No			(Form 1065)	
			-				
			_				_
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Schedule R (Form 990) 2008

2008 DEPRECIATION AND AMORTIZATION REPORT FORM 990 PAGE 10

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Current Year . Deduction	.967,91	73,288.	12,074.	472.	2,938.	103,	196.	106,467.		-		 			
Current Sec 179								ó	 			 	1.111		
Accumulated Depreciation	114,642.	218,513.	40,465.	685.	4,486.	215.	1,128.	380,134.				 			
Basis For Depreciation	191,769.	569,385.	90,025.	66979	379,529.	1,550.	19,895.	1,258,852,							
Reduction in Basis								Ó	 *****			 		44344	
Bus % Excl															
Unadjusted Cost Or Basis	191,769.	569,385.	90,025.	6,699,	379,529.	1,550.	19,895.	1,258,852,							
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Date Acquired	VARIESSL	VARIESSL	VARIESSL	VARIESSI	VARIESSL	VARIESEL	VARIESSL		 			 			 
Description	FURNITURE, FIXTURES AND EQUIPMENT	ZAND EQUIPMENT	FURNITURE, FIXTURES  SAND EQUIPMENT	FURNITURE, FIXTURES AMND EQUIPMENT	SBUILDING IMPROVEMENTS	6BUILDING IMPROVEMENTS	57	* TOTAL 990 PAGE 10 DEPR		111		 h			
Asset		7	ĸ	ব	ιΩ	ΨĐ	7								

(D) - Asset disposed

\*ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

828102 04-25-08

### FORT WORTH ART ASSOCIATION #75-1107061 Attachment to Form 990 For the Year Ended June 30, 2009

### Schedule A, Part II, Line 17a

Notwithstanding that the public support percentage indicated at Line 14 is less than 33 ½ percent, Fort Worth Art Association should qualify as a publicly supported organization under the facts-and-circumstances test prescribed under Section 1.170A-9(e)(3) of the Regulations.

- Association is well in excess of 10 percent of its total support normally received. The public support of Fort Worth Art Association has consistently been in excess of 33 ½ percent. For fiscal year ending June 30, 2005, the public support percentage was 35.4482; for fiscal year ending June 30, 2004, the public support percentage was 38.4711; and for fiscal year ending June 30, 2003, the public support percentage was 35.8303. For the fiscal years ending June 30, 2009, June 30, 2008, June 30, 2007 and June 30, 2006, the public support percentage fell below 33 ⅓, 28.5862, 27.6079, 32.0536 and 29.5577 respectively, but remained well above 10%. The public support calculation for these four years is unusual. Fort Worth Art Association's total support includes additional support from The Burnett Foundation, a private foundation, and thus support that is not counted in its entirety in the denominator of the public support calculation, that was received to fund operating deficits of Fort Worth Art Association in its first three years of operating the new facility for the Modern Art Museum of Fort Worth.
- Fort Worth Art Association has a continuous and bona fide program for solicitation of funds and sponsorships. Fort Worth Art Association has a sophisticated membership program with varying levels of membership and an employed membership department.
- Fort Worth Art Association operates the Modern Art Museum of Fort Worth which is open to the general public. The Modern Art Museum of Fort Worth maintains one of the foremost collections of postwar art in the central United States, consisting of more than 2,600 significant works of modern and contemporary international art. The Modern Art Museum of Fort Worth maintains 53,000 square feet of gallery space.
- ♦ Thousands of persons visit the Modern Art Museum of Fort Worth annually. Further, the Modern Art Museum of Fort Worth has educational programs that appeal to adults, youth, children, and educators.
- ♦ The composition of Fort Worth Art Association's Board of Directors is representative of broad public interests-100 persons serve on the Board of Directors. Such persons are diverse in age, areas of expertise, profession, race, etc.

### Form **8868**

(Rev. April 2009)

### Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

	Revenue Service	File a separate application for each return.								
<ul><li>If yo</li></ul>	u are filing for an <b>Add</b>	omatic 3-Month Extension, complete only Part I and check this box litional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this less you have already been granted an automatic 3-month extension on a previously fi								
Part	1 Automatic	c 3-Month Extension of Time. Only submit original (no copies needed).								
A corpo		Form 990-T and requesting an automatic 6-month extension - check this box and con	nplete	▶ □						
	er corporations (includ ncome tax returns.	ding 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request ar	n exter	sion of time						
noted to (not au you mu	below (6 months for a tomatic) 3-month ext ust submit the fully co	enerally, you can electronically file Form 8868 if you want a 3-month automatic extension corporation required to file Form 990-T). However, you cannot file Form 8868 electronic ension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or completed and signed page 2 (Part II) of Form 8868. For more details on the electronic file on e-file for Chanties & Nonprofits.	ically if	(1) you want the additional ated Form 990-T. Instead,						
Туре о	Name of Exemp	t Organization	Emp	loyer identification number						
print		TH ART ASSOCIATION	7	5-1107061						
File by the due date filing your return Se	or   Number, street, and room or suite no. If a P.O. box, see instructions.   3200 DARNELL STREET									
instructio	ns City, town or po	st office, state, and ZIP code. For a foreign address, see instructions. TH, TX 76107								
Check	type of return to be	filed (file a separate application for each return):								
	Form 990 Form 990-BL Form 990-EZ Form 990-PF	☐ Form 990-T (corporation)       ☐ Form 47         ☐ Form 990-T (sec. 401(a) or 408(a) trust)       ☐ Form 52         ☐ Form 990-T (trust other than above)       ☐ Form 60         ☐ Form 1041-A       ☐ Form 88	227 269							
Tele If th	ephone No. > 817 e organization does r is is for a Group Retu	JOANETTE GARWOOD  of ► 3200 DARNELL STREET - FORT WORTH, TX 76  -738-9215 FAX No. ►  not have an office or place of business in the United States, check this box  arr, enter the organization's four digit Group Exemption Number (GEN) If the  tof the group, check this box ► and attach a list with the names and EINs of all	ıs ıs fo	r the whole group, check this						
_	FEBRUARY s for the organization calendar year			The extension						
)										
2	f this tax year is for le	ss than 12 months, check reason: Initial return Final return		Change in accounting period						
3a li	f this application is fo	r Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any		Change in accounting period						
3a lí	f this application is fo	r Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	<u> </u>							
3a lí <u>n</u> b lí	f this application is fo conrefundable credits f this application is fo	r Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any . See instructions.	<u> </u>							
3a	f this application is for norrefundable credits f this application is for ax payments made. In Balance Due. Subtract	r Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any . See instructions. r Form 990-PF or 990-T, enter any refundable credits and estimated	_3a	\$						

Form 8	868 (Rev 4-2009)		_	ſ	Page 2
	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this bo	х		► X	
	Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed		3868.		
	ou are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).				
Par		ples r	eeded).		
Time	Name of Exempt Organization	Emp	loyer ide	ntification nur	mber
Type o	FORT WORTH ART ASSOCIATION	7	5-110	7061	
File by t extende due dat	Number, street, and room or suite no. If a P.O. box, see instructions.	For If	RS use or	nly	
filing the return S instructi	City, town or post office, state, and ZIP code. For a foreign address, see instructions.				
X	k type of return to be filed (File a separate application for each return):  Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A  Form 990-BL Form 990-PF Form 990-T (trust other than above) Form 4720	= ``	orm 5227 orm 6069	Form	8870
STOP	! Do not complete Part II if you were not already granted an automatic 3-month extension on a previou	sly file	d Form 8	868.	
	JOANETTE GARWOOD  a books are in the care of   3200 DARNELL STREET - FORT WORTH, TX 76	107			
Tel	ephone No. ▶ 817-738-9215 FAX No. ▶				_
	ne organization does not have an office or place of business in the United States, check this box				
• If t	nis is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this	s is fo	r the who	le group, chec	k this
box	. If it is for part of the group, check this box 🕨 🔲 and attach a list with the names and EiNs of all	<u>memb</u>	ers the ex	ttension is for.	
4	I request an additional 3-month extension of time until MAY 15, 2010.				
5	For calendar year, or other tax year beginning <u>JUL 1, 2008</u> , and ending	<u>JUN</u>	30,	2009	<u> </u>
6	If this tax year is for less than 12 months, check reason:  Initial return  Final return	Ш	Change I	n accounting p	period
7	State in detail why you need the extension ADDITIONAL TIME IS NEEDED TO GATHER THE INFORMATION NE	CEC	CADV	TO DREE	DARF
	ADDITIONAL TIME IS NEEDED TO GATHER THE INFORMATION NE A COMPLETE AND ACCURATE RETURN.	CEO	OAKI	TO FREE	MIL
	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any				
	nonrefundable credits. See instructions.	8a	\$		
	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated				
	tax payments made. Include any prior year overpayment allowed as a credit and any amount paid				
	previously with Form 8868.	8b	\$		
С	Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit				
	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$	N/P	1
	Signature and Verification				
	penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the e, correct, and complete, and that I am authorized to prepare this form	best o	f my know	ledge and belief,	,

Title ► CONTROLLER

Form **8868** (Rev 4-2009)

Date 돈

Signature **>**