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Form **990**

Return of Organization Exempt From Income Tax

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

OMB No 1545 0047

2009

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

	For	the 2009 calend	dar vear. o	or tax year beginning		2009.	and endin	a		 		
В		k if applicable		TC .		,,			Employe	Identification	Number	
		Address change	Please use IRS label	APERTURE FOUND	ATTON. INC				13-3	120824		
	\vdash	Name change	or print or type.	547 WEST 27TH	STREET, 4T	H FLOOR		Ε	Telephoni			
	\vdash	Initial return	See specific	NEW YORK, NY 1	.0001				•	505-555	5	
	Н	Termination	Instruc- tions					-	212	300 333		
	\vdash	Amended return	uons							0	5,430,	015
	Н	Application pending	F Name :	and address of principal officer	TIIAN CAR	CIA DE OTE	777 X	H(a) Is this a gi	Gross rec		Yes	X No
	Ш,	Application pending		AS C ABOVE	oom om	oin de oid		H(b) Are all affi			Yes	No
$\overline{}$	Ta	x-exempt statu			t no.) 149	47(a)(1) or	527	If 'No,' atta	ach a list (s	ee instructions	;) L	
1			ERTURE		(110.)	+/ (d)(1/ 01 <u> </u>		H(c) Group exe	mation aum	har ► N	/A	
ĸ		m of organization	X Corpora		ation Other▶	I va	ear of Formati			te of legal don		
	art I	Summa		NOT THUS	audit Other	12.16	sar or r orman	1702	111 3 ta	te or legal doll	iiciie IVI	
	1			janization's mission or r	nost significant a	ctivities: PIII	BLICAT	ION OF F	ROOKS	MAGA 7.T	NES A	AND
60	1			'_AN_ART_GALLER								
Š				VISUAL ARTS.			_ 1 7/01/0	1110711	- 444.4 7.5	<u> </u>	,_4	. – – –
Activitles & Governance	İ				. 							. – – –
ŏ	2	Check this bo	x ►	if the organization disco	intinued its opera	ations or dispose	ed of more	e than 25%	of its ass	ets		
જ	3			bers of the governing b				1	-	3		20
es	4			t voting members of the	governing body	(Part VI, line 1t	b)		<u> </u>	4		10
ĬΞ	5			yees (Part V, line 2a). eers (estimate if necess	and				-	5 6		46
Act	1			usiness revenue from F		(C) line 12			-	7a	256	776.
	1	_		taxable income from Fo	•					7b	200,	0.
						·····		Prio	r Year		urrent Ye	ar.
	8	Contributions	and grant	s (Part VIII, line 1h)					63,66			396.
Revenue	9		_	ue (Part VIII, line 2g)					20,61			430.
e e	10	The state of the s							72,75			618.
ď	11	Other revenue	(Part VII	I, column (A), lines 5, 6	id, 8c, 9c, 10c, a	nd 11e)		2,3	60,61	3.	2,268,	
	12	Total revenue	- add lin	es 8 through 11 (must e	equal Part VIII, c	olumn (A), line	12)	4,3	17,64	8.	3,754,	401.
	13	Grants and sir	nılar amo	unts paid (Part IX, colu	mn (A), lines 1-3)						
	14											
ø	15	Salaries, other	r compen	sation, employee benef	2,3	29,24	9. 2	2,431,	632.			
Expenses	16 a	Professional fu	undraising	j fees (Part IX, column	1	20,00	0.	30,	000.			
xbe	ь	Total fundraisi	ng expens	ses (Part IX, column (D), line 25) ►	381	,126.			1		
ш	17	Other expense	s (Part IX	(, column (A), lines 11a	-11d, 11f-24f)			3,6	44,52	1.]	3,510,	300.
	18	Total expenses	s Add line	es 13-17 (must equal P	art IX , column (A), line 25)			93,770		5,971,	
	19			Subtract line 18 from I		CENTER		-1,7	76,122		2,217,	
b 8						PLIVE	2 1	Beginnin			nd of Yea	
Assets or Balances	20	Total assets (F	art X, line	e 16)	131 ALL		18		52,514		7,160,	
Net A	21	Total liabilities	(Part X, I	ine 26)	ISI AUG	3 1 1 2010	, ଧା		44,586		2,193,	
şē	22	Net assets or f	und balar	nces Subtract line 21 fr		- 2010	131	7,2	07,928	3. 4	,966,	866.
Pa	rt II	Signatu	re Bloc	k	00	0.5:	JX	A				
		Under penalties	of perjury, I	declare that I have examined to Declaration of preparer (other	his return including	Elying WI	ules and state	ements, and to	the best of r	ny knowledge	and belief, i	it is
		true, correct an	a complete	Declaration of preparer (other	trian officery is based	on all information of	which prepar	rer has any kno	wledge	_1		
Sig	n	<u> </u>	<u>uu</u>	up Will s	UI CBL			/	1/2	9110		
Hei	re	Signature of	f officer	16	1261			Date				
		> / (MIES	prancial	urnce	<u> </u>			<u> </u>			
		Type or prin	t name and	title)						,		
						Date	e / .	Check self-	ıf	Preparer's ic (see instruct	lentifying nu ions)	ımber
Pai Pre		Preparer's	_ 1/	1/1-00		17	1/29/	employ	red ►	<u> </u>		
	- er's	signature	11				J-111	0		N/A		
Use		Firm's name (or yours if self-	G	EN & LOEB LLP			···					
On		employed), address, and		OODBURY ROAD				EIN	► N/A			
		ZIP + 4		SVILLE, NY 1180				Phone	no ► (5		2-50 <u>00</u>	
				th the preparer shown a						XΥ	es	No
BAA	For	Privacy Act and	d Paperw	ork Reduction Act Notic	ce, see the separ	ate instructions	s.	TEE	A0113L 12	2/29/09 F	orm 990	(2009)

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			res	MO
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	Х	
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 public office? If 'Yes,' complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		Х
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 similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8	Х	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	Х	
•	Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI			
•	Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If 'Yes,' complete Schedule D, Part VII</i>			
•	Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX			
•	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If 'Yes,' complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12	Х	
12 A	Was the organization included in consolidated, independent audited financial statement for the tax year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional 12 A X			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? 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 located outside the United States? If 'Yes,' complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I	17	X	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18	Х	
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19	_ 	Х
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		<u>X</u>

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or	m 990 (2009) APERIORE FOUNDATION, INC 13-3.	120024		age 4
Pa	art IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the	he		
	United States on Part IX, column (A), line 17 If 'Yes,' complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on F	[∍] art		
	IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		X
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's cu	urrent		
	and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23	X	
24		23		
24	Ia 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24c	f and		
	complete Schedule K If 'No, 'go to line 25	24a	_	X
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defe			
	any tax-exempt bonds?	24c		<u> </u>
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		-
25	a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	25		v
	disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		X
	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes.' comple	and		
	Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
20	disqualified 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, substantial			
	contributor, or a grant selection comittee member, or to a person related to such an individual 'f 'Yes,' complete Schedule L. Part III	27		Х
28		2/		
	Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions).			
	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
	b A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete</i>			
	Schedule L, Part IV	28b		Х
	c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family me	mher)		
	was an officer, director, trustee, or direct or indirect owner? 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				
	contributions? If 'Yes,' complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete			,,
	Schedule N, Part II	32		X
33		ons 33		X
	301 7701-Ž and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33	-	
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, ar line 1	nd V, 34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule Part V, line 2	e <i>R</i> , 35		Х
20		= -		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
27	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and the	hatic		
J/	treated as a partnership for federal income tax purposes? If 'Yes, ' complete Schedule R, Part VI	37		Х

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 197 **Note.** All Form 990 filers are required to complete Schedule O BAA Form 990 (2009)

1a Enter the number reported in Box 3 of form 1006, Annual Summary and Transmittal of U.S. Information Returns. Caller - or in of applicable information Returns. Caller - or in of applicable in 10 or 10 of period process. Information Returns. Caller - or in of applicable information Returns. Caller - or in of applicable information Returns. 20 or in other payments to vendors and reportable gaming (gambling) with making with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) with making with responsible of the payments of employes reported on Form %3, Transmittal of Waga and Tax Statement, field for the Label of the called responsible payments of employes reported on Form %3, Transmittal of Waga and Tax Statement, field for the Label of the called responsible payments of the payments. The called a form of the payments The payments of the pa				Yes	No
C Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming grant properties to prize wriners? 2 a Cher the number of employes regolded in form W-3, Transmittal of Wags and Tax Statement, filled for the calledary year dealing with or within the year covered by this return. 2 bit at least one is reported on inne 2a, did the organization file all required tederal employment tax returns? Note, If the sum of Innes Is and 2a is greater than 250, you may be required to e-file this return (see instructions). 3 bit this capanization have unveilated business gross income of \$1,000 or more during the year covered by this return? 4 bit I'Yes' share 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 accountly over, a financial account in a foreign country (such as a bank account, securities account, or other financial account). 5 a Was the organization a party to a prohibited tax sheller fransaction at any time during the tax year? 5 a Was the organization aparty to a prohibited tax sheller fransaction? 5 a Was the organization aparty to a prohibited tax sheller transaction? 5 bit I'Yes, the line 5a or 5b, did the organization that it was or is a party to a prohibited tax sheller transaction? 5 a Dees the organization have annual gross receipts that are normally greater than \$100,000, and did the organization of solicit any contributions that were not tax deductible? 5 c Did the organization and the very one of the value of the goods or services provided? 6 bit I'Yes, 'indicate the number of forms 8282 filed during the year and the value of the goods or services provided? 7 bit I'Yes, 'and the organization notify the donor of the value of ting goods or services provided? 8 bit I'Yes, 'and the organization organization in the good of services provided? 9 bit I'Yes, 'and the organization make an	1 a				
(gambing) winnings to prize winners? 2 a faite the number of employers registed on Forn W 3, Trassmital of Wage and Tax Statements, filed for the calleddry are reiding with or within the year covered by this return 2 bit if at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) 3a Did the organization have currelated business gross income of \$1,000 or more during the year covered by this return. 5a I'ves has if filed a Form 990-T for this year? If No, 'provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 5b If Yes, 'reter the name of the foreign country. 5ee 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 sheller transaction at any time during the tax year? 5a Did any taxable party notify the organization that it was or is a party to a prohibited tax sheller transaction? 5b Did any taxable party notify the organization that it was or is a party to a prohibited tax sheller transaction? 5c Obes the organization are annual gross receipts that are normally greater than \$100,000, and did the organization of the value of the expert of the organization or gifts were not deductible? 7c Organizations that may receive deductible contributions under section 170(c). 8 Did the organization include with every solicitation an express statement that such contributions or gifts were not deductible? 7b If Yes, 'indicate the number of Forms 8282 filed during the year and the promise of the payor? 7c I bit Hyes, 'indicate the number of Forms 8282 filed during the year and the reference of the payor? 7	k	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
calendar year ending with or within the year covered by this return 2 bit at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? b it 'Yes' has it filed a Form 990-T for this year?' If 'No, 'provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country.' * 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 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Was the organization aparty to a prohibited tax shelter transaction? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solied any contributions that were not tax deductible? 5b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible? 7b If yes,' did the organization on thity the donor of the value of the goods or services provided? 7b If Yes,' did the organization on thity the donor of the value of the goods or services provided? 8b If Yes,' did the organization or prompty, did the organization of prompty, did the organization on the payor? 8b If Yes,' did the organization or diary the prompty of the prompty of which it was required to the form 8322 4c If Yes,' did the organization or a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 9b If Yes,' did the organization or a payment	C	: Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Χ	
Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? b If "Yes' has it filed a Form 990-T for this year?" If No, 'provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country, 'e' 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 Was the organization appropriate to the foreign country, 'e' See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accountry. 5a Was the organization a party to a prohibited tax shelter transaction? 5a Was the organization appropriate that see the organization with it was or is a party to a prohibited tax shelter transaction? 5b If Yes,' did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicid any contributions that were not tax deductible? 5c If yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible? 5b If Yes,' did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 5b If Yes,' did the organization on brily the donor of the value of the goods or services provided? 6c If Yes,' did the organization on the very solicitation an express statement that such contributions on a personal benefit contributions of cars, boats, arplaines, and other vehicles, did the organization on, during the year, receive any funds, directly or indirectly, on a personal benefit contract? 7c X 7d Y 7d	2 8	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			
3a X this return? b If 'Yes' has it filed a Form 990.T for this year? If 'No,' provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account) in a foreign country (such as a bank account, ascount, ascount in a foreign country (such as a bank account), secrifies account, or other financial account)? 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? b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b X 5 b Did any taxable party notify the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? b If 'Yes,' indid the organization include with every solicitation an express statement that such contributions or gifts were not deductible of the organization include with every solicitation an express statement that such contributions or gifts were not deductible of the organization of the value of the goods or services provided? 7b If Yes,' indicate the number of Forms 8282 filed during the year 9 b If Yes,' indicate the number of Forms 8282 filed during the year 1 b If the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7c X 7d For all Contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 7h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 9 Sponsoring organizations	21		2b	<u>X</u>	
this return? bil "Yes' has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 4 a 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)? bil "Yes," either the name of the foreign country, is the organization and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 b Did any taxable party notify the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 7 organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? bil "Yes," idid the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8262 tilled during the year e Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8262 tilled during the year e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 Did the organization make any distributions under section 4966? 9 Sponsoring organizations maintaining donor advised funds and section 509(x) supporting organizations. Did the supporting organizations maintaining donor advised funds and			1		ĺ
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10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter a Gross income from other members or shareholders. b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a		· · · · · · · · · · · · · · · · · · ·	_		
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b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter a Gross income from other members or shareholders. b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11 12 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a		· · · · · · · · · · · · · · · · · · ·			
11 Section 501(c)(12) organizations. Enter a Gross income from other members or shareholders. b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a					ĺ
a Gross income from other members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a					
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?					
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	12 a		12a		<u>L</u> _
	Ŀ	olf 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			

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Form **990** (2009)

Governing Body and Management

Section A.

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

					Yes	No			
1:	a Enter the number of voting members of the governing body	1 a		20					
	b Enter the number of voting members that are independent	1b		10					
2	Did any officer, director, trustee, or key employee have a family relationship or a business rela	ations	hip with any othe			Х			
3	officer, director, trustee or key employee? Did the organization delegate control over management duties customarily performed by or ur	nder th	ne direct supervis	sion 2	•	_			
	of officers, directors or trustees, or key employees to a management company or other person	n?	io direct super vi	3	<u> </u>	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 ass	ets?	5		X			
6	Does the organization have members or stockholders?	3 433	Cio	6		X			
7:	Does the organization have members, stockholders, or other persons who may elect one or m governing body?	nore m	nembers of the	7.		Х			
i	b Are any decisions of the governing body subject to approval by members, stockholders, or oth	ner pe	rsons?	71		X			
8	Did the organization contemporaneously document the meetings held or written actions under the following	taken	during the year l	by					
a The governing body?									
b Each committee with authority to act on behalf of the governing body?									
 b Each committee with authority to act on behalf of the governing body? 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 									
Sec	tion B. Policies (This Section B requests information about policies not	regu	ured by the Ir	ternal		<u> </u>			
	enue Code)	1040	inca by the n	nerriai					
1071	100 0000 /				Yes	No			
10 a	Does the organization have local chapters, branches, or affiliates?			10 a	+ -	X			
	If 'Yes,' does the organization have written policies and procedures governing the activities of	such	chapters, affiliate	es,					
11	and branches to ensure their operations are consistent with those of the organization? Has the organization provided a copy of this Form 990 to all members of its governing body by	efore f	filing the form?	101	X				
	A Describe in Schedule O the process, if any, used by the organization to review this Form 990.		EE SCHEDULI			······			
	Does the organization have a written conflict of interest policy? If 'No,' go to line 13			12 2	X	<u> </u>			
	• Are officers, directors or trustees, and key employees required to disclose annually interests ti	hat co	ould give rise		<u> </u>				
-	to conflicts?	.,	J. 10 1/00	121	<u> </u>	X			
(Does the organization regularly and consistently monitor and enforce compliance with the poli- Schedule O how this is done	cy? If	'Yes,' describe i	n 12 c	:	Х			
13	Does the organization have a written whistleblower policy?			13		X			
14	Does the organization have a written document retention and destruction policy?			14	<u> </u>	X			
15	Did the process for determining compensation of the following persons include a review and a persons, comparability data, and contemporaneous substantiation of the deliberation and deci	pprovision?	al by independer	nt					
á	The organization's CEO, Executive Director, or top management official			15 a		Х			
ı	Other officers of key employees of the organization			151		X			
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions)								
16	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar a entity during the year?	ırrangı	ement with a tax	able 16 a		Х			
ı	If 'Yes,' has the organization adopted a written policy or procedure requiring the organization in joint venture arrangements under applicable federal tax law, and taken steps to safeguard t			npt 🖡					
	status with respect to such arrangements?			161	<u> </u>	<u></u>			
	List the states with which a convert the Form 200 is required to be filed by NONE								
	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 inspection. Indicate how you make these available. Check all that apply	1 990-	T (501(c)(3)s onl	y) avaılable	for pu	blic			
	Own website Another's website X Upon request								
19	Describe in Schedule O whether (and if so, how) the organization makes its governing docume statements available to the public SEE SCHEDULE O	ents, d	conflict of interes	it policy, an	d finan	cıal			
20	State the name, physical address, and telephone number of the person who possesses the bo	ooks a	and records of the	e organizati	on				
I	MARY COLMAN ST. JOHN 547 WEST 27TH STREET, 4TH FLOOR NEW	YOR	K_NY_10001	<u>212-50</u>	<u>5-55</u> !	55_			

Form 990 (2009) Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organizations's tax year. Use Schedule J-2 if additional space is needed
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees. See instructions for definition of 'key employees.'

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

- 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) Average	(c) Position (check all that apply)					lv)	(D)	(E)	(F) Estimated
Name and Title	hours per week	or director	Institutional trustee		Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W 2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
ROBERT ANTHOINE, ESQ										_
CHAIR EMERITUS	0	X	_				-	0.	0.	0.
CELSO GONZALEZ-FALLA	- ,	.,						_	0	0
TTEE, CHRMN	0	X						0.	0.	0.
BARRY GARFINKEL ESQ TTEE, SEC	⊢ 0	Х		Х			1	0.	0.	0.
MARK LEVINE	+	Λ_					 	<u> </u>		
TRUSTEE	1 o	X					ŀ	0.	0.	0.
JOHN GUTFREUND	 	1						· ·		
TRUSTEE	│ o	Х						0.	0.	0.
ANTONIA PAEPCKE DUBRUL									-	
TRUSTEE	7 0	Х						0.	0.	0.
ANNETTE Y FRIEDLAND										
TRUSTEE	0	X						0.	0.	0.
TOMMASO ZANZOTTO										
TRUSTEE	0	X						0.	0.	0.
RHETT TURNER										
TRUSTEE	0	X						0.1	0.	0.
WILLARD TAYLOR ESQ	4	٠.							•	
TRUSTEE	0	X					├	0.	0.	0.
JUAN GARCIA DE OTEYZA	- 40	v		v	٠,			205 206	0.	0
EXECUTIVE DIREC JOSEPH T BAIO	40	Х		X	X			205,286.	Ų.	0.
TRUSTEE	⊢ 0	Х				•		0.	0.	0.
CATHY KAPLAN	 							0.	0.	
TRUSTEE	d 0	X					ļ	0.	0.	0.
SUSANA TORRUELLA LEVAL	+ •		-		-			<u> </u>		<u> </u>
TRUSTEE	1 o	Х						0.	0.	0.
TODD OLDHAM						İ				
TRUSTEE	 	Х						0.	0.	0.
AMBASSADOR JORGE PINTO										
TRUSTEE	0	Х			L			0.	0.	0.
FREDERICK SMITH	_									
TTEE, TREAS.	0	X		X	L			0.	0.	0.
RΔΔ		1	FEA	าากว่า	11	/10/09				Form 990 (2009)

Part VII Section A. Officers, Directors, Trus		Key	En		_	es	, an			ploye		ont)
(A)	(B) Average	Post	tion (•	c) (all t	hat a	nnlu)	(D)	(E)		(F)	
Name and Title	hours per week			Officer	_	Highest compensated employee		Reportable compensation from the organization (W 2/1099-MISC)	Reportable compensation from related organizations (W 2/1099-MISC)	amo cor or a	Estimated bunt of ot mpensation the ganization nd relate ganization	ther on on ed
MATTHEW TIERNEY TRUSTEE	0	Х						0.	0.			0.
DIANE TUFT TRUSTEE	0	X						0.	0.			0.
ALAN STOGA TRUSTEE	0	Х						0.	0.			0
MICHAEL CULOSO DIR. OF FINANCE	40			Х	Х			114,272.	0.			0
MARIA LAGHI DEVELOPMENT DIR	40				Х			112,375.	0.			0
										-		
						_						
1b Total							•	431,933.	0.			0
Total number of individuals (including but not limited from the organization 3	I to thos	e list	ted a	abov	ve) v	who	rece	· · · · · · · · · · · · · · · · · · ·		ole com	pensat	-
non the organization - 3					-						Yes	No
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in	dıvıdual				•		_			3		Х
4 For any individual listed on line 1a, is the sum of rep the organization and related organizations greater the individual	ortable nan \$150	com 0,000	pen)? <i>[1</i>	satıd ' <i>'Ye</i>	on a s' c	nd o	othe <i>lete</i>	r compensation fro Schedule J for su	om uch	4	Х	
5 Did any person listed on line 1a receive or accrue or rendered to the organization? If 'Yes,' complete Sch	ompensa ledule J	ation for s	fror such	n ar per	ny u rson	nrel	ated	organization for s	services	5		Х
Section B. Independent Contractors 1 Complete this table for your five highest compensate	ad inden	ende	ent (cont	ract	ore	that	received more th	an \$100,000 of			
compensation from the organization.	sa macp				act		urat	Teceived more and	arr \$100,000 or			
(A) Name and business addres	s							Description of	of Services		(C) ensatio	'n
										<u> </u>		
2 Total number of independent contractors (including t	out not I	ımıte	ed to	thr	se l	iste	d ah	ove) who received	d more than			
\$100,000 in compensation from the organization						,	40	,				

Page 9

Statement of Revenue **(B)** Related or (**C)** Unrelated (D) (A) Revenue Total revenue excluded from tax exempt business under sections 512, 513, or 514 function revenue revenue 1a Federated campaigns 1 a CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS **b** Membership dues 16 47,051 1 c c Fundraising events 1 d d Related organizations 1 e e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above 746,345 1 f \$ a Noncash contribns included in Ins 1a-1f h Total. Add lines 1a-1f 793,396 PROGRAM SERVICE REVENUE Business Code 672,430 672,430 2a SUBSCRIPTIONS f All other program service revenue. 672,430 • g Total. Add lines 2a-2f Investment income (including dividends, interest and 4,618. other similar amounts) 4,618 Income from investment of tax-exempt bond proceeds Rovalties (i) Real (II) Personal 6a Gross Rents **b** Less rental expenses c Rental income or (loss) d Net rental income or (loss) (i) Securities (II) Other 7a Gross amount from sales of assets other than inventory 15,000 **b** Less cost or other basis and sales expenses 15,000 c Gain or (loss) 15,000 15,000. d Net gain or (loss) 8a Gross income from fundraising events (not including $\frac{47,051}{}$. **STHER REVENUE** of contributions reported on line 1c). 447,874. See Part IV, line 18 151,056. **b** Less direct expenses 296,818 296,818. c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 **b** Less direct expenses. c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns ,154,043 and allowances 3 524,558. ы b Less cost of goods sold 1,629,485 c Net income or (loss) from sales of inventor 1,629,485 Miscellaneous Revenue **Business Code** 11a ADVERTISING 541800 256,776 256,776 **b** PERMISSIONS INCOME 33,351. 33,351 c COMPETITION ENTRY FEES 18,857. 18,857 d All other revenue 33,670. 33,670. 342,654. e Total. Add lines 11a-11d

Total revenue. See instructions

3,754,401.

2,316,915

256,776.

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Statement of Functional Expenses

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

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

	not include amounts reported on lines	(A)	(B) Program service	(C) Management and	(D) Fundraising
	7b, 8b, 9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	_			
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	431,933.	0.	431,933.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B).	0.	0.	0.	0.
7	Other salaries and wages	1,659,979.	1,236,845.	140,890.	282,244.
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits.	174,376.		174,376.	
10	Payroll taxes	165,344.	98,704.	45,218.	21,422.
11	Fees for services (non-employees)				
	a Management				
ı	• Legal	75,022.		75,022.	
	Accounting	25,000.		25,000.	
	1 Lobbying				
(Prof fundraising svcs. See Part IV, In 17	30,000.			30,000.
1	Investment management fees				
(g Other				
12	Advertising and promotion	128,366.	128,366.		
13	Office expenses	101,052.		101,052.	
14	Information technology	120,045.	89,571.	30,474.	
15	Royalties	232,934.	232,934.		
16	Occupancy	373,990.		373,990.	·
17	Travel	72,493.	39,845.	29,973.	2,675.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				 -
20	Interest	2,521.		2,521.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	169,280.		169,280.	
23		95,418.		95,418.	
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)				
•	LOSS ON WRITE DOWN OF INVENTOR	495,573.	495,573.		
ı	COMMISSIONS & FEES	453,124.	453,124.		
	EXHIBITS	269,033.	269,033.		
•	PERIODICAL MAILING	181,583.	181,583.		
•	ORDER PROCESSING	134,356.	134,356.		
1	All other expenses	580,510.	320,952.	214,773.	44,785.
_25	Total functional expenses Add lines 1 through 24f	5,971,932.	3,680,886.	1,909,920.	381,126.
26	Joint costs. Check here Infollowing SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
BAA		L		1	Form 990 (2009)

			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	1,566,023.	1	415,303
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	907,053.	4	972,142
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1))			
		and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
S	7	Notes and loans receivable, net		7	
A S S E T	8	Inventories for sale or use	1,536,256.	8	1,152,351
S	9	Prepaid expenses and deferred charges	237,123.	9	181,977
	10 a	Land, buildings, and equipment cost or other basis 10a 1, 975, 022.			
		Complete Part VI of Schedule D	:		
	b	Less: accumulated depreciation 10b 1,183,033.	959,370.	10 c	791,989.
	11	Investments – publicly-traded securities		11	
	12	Investments – other securities See Part IV, line 11		12	
	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	3,646,689.	15	3,646,687
	16	Total assets Add lines 1 through 15 (must equal line 34)	8,852,514.	16	7,160,449
	17	Accounts payable and accrued expenses	341,265.	17	592,814
	18	Grants payable		18	
	19	Deferred revenue		19	
L	20	Tax-exempt bond liabilities		20	
À B	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ĪLL	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II			
į		of Schedule L		22	575,000
S	23	Secured mortgages and notes payable to unrelated third parties	1,111.	23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities Complete Part X of Schedule D	1,302,210.	25	1,025,769
	26	Total liabilities. Add lines 17 through 25	1,644,586.	26	2,193,583
E E		Organizations that follow SFAS 117, check here ► X and complete lines			
Ť		27 through 29 and lines 33 and 34.			
Š	27	Unrestricted net assets	6,942,516.	27	4,724,985
È	28	Temporarily restricted net assets.	265,412.	28	241,881
Ī	29	Permanently restricted net assets		29	
R		Organizations that do not follow SFAS 117, check here ► and complete			
UZC-1		lines 30 through 34.			
Ď	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, and equipment fund		31	
ĥ	32	Retained earnings, endowment, accumulated income, or other funds		32	
BALAZCES	33	Total net assets or fund balances.	7,207,928.	33	4,966,866
	1	Total liabilities and net assets/fund balances.	8,852,514.	34	7,160,449.

Form 990 (2009)	APERTURE	FOUNDATION,	INC

13-3120824

Page 12

FAI	t At Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.			
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Х
Ŀ	Were the organization's financial statements audited by an independent accountant?	2b	X	
c	: If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2с	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
C	I If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both.			
	X Separate basis Consolidated basis Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		Х
t	olf 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

BAA

Form 990 (2009)

Department of the Treasury Internal Revenue Service **Public Charity Status and Public Support**

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

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

2009

Open to Public Inspection

Name of the organization Employer identification number APERTURE FOUNDATION, INC 13-3120824 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) 1 A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b(1)(A)(iii) Enter the hospital's name, city, and state. 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).** 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 9 X An organization that normally receives: (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33-1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or 11 more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h Type III - Functionally integrated Type II Type III- Other Type I By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? (i) 11g(i) a family member of a person described in (i) above? 11g (ii) (III) a 35% controlled entity of a person described in (i) or (ii) above? 11 g (iii) Provide the following information about the supported organizations (ii) EIN (iii) Type of organization (described on lines 1.9 above or IRC section (IV) Is the (i) Name of Supported Organization (v) Did you notify (vi) Is the (vii) Amount of Support the organization in col (i) of organization in col (i) organized in the organization in col (i) listed in your your support? (see instructions)) governing document? US 7 Yes Yes Total

	(Complete only if you check	•			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			·····	
Cale	tion A. Public Support	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 200	19	(f) Tota	 al
_	nning in) Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')	(4) 2000	(5) 2555	(0) 2007	(0) 2000	(0) 200			
			<u> </u>						
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf								
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.								
4	Total. Add lines 1-through 3								
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)								
6	Public support. Subtract line 5 from line 4								
Sec	tion B. Total Support		1	·	1	1			
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 200	9	·(f) Tota	al
•	Amounts from line 4							•	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources								
9	Net income from unrelated business activities, whether or not the business is regularly carried on								
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)								
11	Total support. Add lines 7 through 10								
12	Gross receipts from related activ	ities, etc (see ins	structions)				12		
13	First five years. If the Form 990 organization, check this box and		ition's first, secon	d, third, fourth, o	r fifth tax year as	a section 50	1(c)(3)		<u> </u>
Sec	tion C. Computation of Pւ								
14	Public support percentage for 20	` '	• • • • • • • • • • • • • • • • • • • •	e 11, column (f)			14		<u>%</u>
15	Public support percentage from 2	,	,				15		<u>%</u>
16 a	33-1/3 support test — 2009. If the and stop here. The organization				the line 14 is 33-1	/3 % or mor	e, ched	ck this box	-
t	33-1/3 support test — 2008. If the and stop here. The organization				and line 15 is 33-	1/3% or mo	re, che	ck this box	-
17 a	1 10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts	meets the 'facts-a	ınd-cırcumstances	s' test, check this l	box and stop here	. Explain in	Part I\	/ how	► □
t	o 10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and	meets the 'facts-a	ind-circumstances	s' test, check this l	box and stop here	e. Explain in	Part I\		►
18	Private foundation. If the organiz	zation did not che	ck a box on line,	13, 16a, 16b, 17a,	or 17b, check thi	s box and se	e instr	ructions	▶ 🗌
BAA					9	chedule A (f	orm 9	90 or 990.E7	7) 2000

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

	(Complete only if you ched	cked the box on lir	ne 9 of Part I)				
Sec	tion A. Public Support						
Cale	ndar year (or fiscal yr beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants')	852,091.	816,543.	738,729.	716,718.	793,396.	3,917,477.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose	3.612.264.	3.774.220.	5.120.292.	4.839.405.	4.184.126.	21,530,307.
3	Gross receipts from activities that are not an unrelated trade or business under section 513		466,159.	513,025.	446,948.	447,874.	1,874,006.
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf		400,139.	313,023.	440, 540.	447,074.	0.
	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
	Total. Add lines 1 through 5	4,464,355.	5,056,922.	6,372,046.	6,003,071.	5,425,396.	27,321,790.
	Amounts included on lines 1, 2, 3 received from disqualified persons	0.	0.	0.	0.	0.	0.
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the	0.	0.	0.	0.	0.	0.
	year Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
	Public support (Subtract line	0.	0.	0.	0.	0.	0.
	7c from line 6.)						27,321,790.
<u></u>	· · · · · · · · · · · · · · · · · · ·	E					21,321,130.
260	IION K IOTAL SUDDOM						
	tion B. Total Support	(2) 2005	(b) 2006	(a) 2007	(4) 2008	(a) 2000	(f) Total
Cale	ndar year (or fiscal yr beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
Cale:		4,464,355.	5,056,922.	6,372,046.	6,003,071.	5,425,396.	27,321,790.
Caler 9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form	19,569.	5,056,922. 150,355.	6,372,046. 172,186.	72,757.	5,425,396. 4,618.	27,321,790. 419,485. 0.
Caler 9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	4,464,355.	5,056,922.	6,372,046.	6,003,071.	5,425,396.	27,321,790. 419,485.
Caler 9 10 a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on	19,569.	5,056,922. 150,355.	6,372,046. 172,186.	72,757.	5,425,396. 4,618.	27,321,790. 419,485. 0.
Caler 9 10 a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is	19,569.	5,056,922. 150,355.	6,372,046. 172,186.	72,757.	5,425,396. 4,618.	27,321,790. 419,485. 0. 419,485.
Calei 9 10 a b c 11 12 13	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add lns 9, 10c, 11, and 12)	19,569. 19,569.	5,056,922. 150,355.	6,372,046. 172,186. 172,186.	72,757. 72,757.	4,618. 4,618.	27,321,790. 419,485. 0. 419,485. 0. 27,741,275.
Calei 9 10 a b c 11 12 13 14	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add ins 9, 10c, 11, and 12) First five years. If the Form 990 in organization, check this box and	19,569. 19,569. 19,569.	5,056,922. 150,355. 150,355.	6,372,046. 172,186. 172,186.	72,757. 72,757.	4,618. 4,618.	27,321,790. 419,485. 0. 419,485. 0. 27,741,275.
Calei 9 10 a b c 11 12 13 14 Sec	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 in organization, check this box and tion C. Computation of Putions	19,569. 19,569. 19,569. s for the organiza stop here	5,056,922. 150,355. 150,355. tion's first, second	6, 372, 046. 172, 186. 172, 186.	72,757. 72,757.	4,618. 4,618. 4,618.	27,321,790. 419,485. 0. 419,485. 0. 27,741,275.
Calei 9 10 a b c c 11 12 13 14 Sec 15	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 i organization, check this box and tion C. Computation of Pu	19,569. 19,569. 19,569. s for the organiza stop here liblic Support I	5, 056, 922. 150, 355. 150, 355. tion's first, second Percentage (f) divided by line	6, 372, 046. 172, 186. 172, 186.	72,757. 72,757.	4, 618. 4, 618. 4 section 501(c)(3	27,321,790. 419,485. 0. 419,485. 0. 27,741,275. → □
Calei 9 10 a b c c 11 12 13 14 Sec 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add lins 9, 10c, 11, and 12) First five years. If the Form 990 in organization, check this box and tion C. Computation of Public support percentage from 20	19,569. 19,569. 19,569. s for the organiza stop here stop here 1blic Support I	150, 355. 150, 355. 150, 355. tion's first, second Percentage (f) divided by line Part III, line 15	6, 372, 046. 172, 186. 172, 186. d, third, fourth, or 13, column (f))	72,757. 72,757.	4,618. 4,618. 4,618.	27,321,790. 419,485. 0. 419,485. 0. 27,741,275.
Calei 9 10 a b b c c 11 12 13 14 Sec 15 16 Sec	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add lns 9, 10c, 11, and 12) First five years. If the Form 990 in organization, check this box and tion C. Computation of Putlic support percentage from 2 tion D. Computation of Invition D. Computation of Invition 1.	19,569. 19,569. 19,569. s for the organiza stop here blic Support I 09 (line 8, column 2008 Schedule A, vestment Inco	150, 355. 150, 355. 150, 355. tion's first, second Percentage (f) divided by line Part III, line 15 me Percentage	6, 372, 046. 172, 186. 172, 186. d, third, fourth, or e 13, column (f))	6,003,071. 72,757. 72,757.	4, 618. 4, 618. 4, 618. 4 518.	27,321,790. 419,485. 0. 419,485. 0. 27,741,275.) ▶□ 98.5% 98.3%
Calei 9 10 a b b c c 11 12 13 14 Sec 15 16 Sec 17	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add lns 9, 10c, 11, and 12) First five years. If the Form 990 in organization, check this box and tion C. Computation of Public support percentage from 2 tion D. Computation of Investment income percentage for 20.	19,569. 19,569. 19,569. 19,569. s for the organiza stop here blic Support I 09 (line 8, column 2008 Schedule A, vestment Inco	150, 355. 150, 355. 150, 355. tion's first, second Percentage (f) divided by line Part III, line 15 me Percentag column (f) divided	6, 372, 046. 172, 186. 172, 186. 1, third, fourth, or e 13, column (f))	6,003,071. 72,757. 72,757.	4,618. 4,618. 4,618. 4,618. 15 16	27,321,790. 419,485. 0. 419,485. 0. 27,741,275. 98.5% 98.3%
Calei 9 10 a b c c 11 1 12 13 14 Sec 15 16 Sec 17 18	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add lns 9, 10c, 11, and 12) First five years. If the Form 990 in organization, check this box and tion C. Computation of Public support percentage from 2 tion D. Computation of Investment income percentage from 33-1/3 support tests — 2009. If the	19,569. 19,569. 19,569. 19,569. s for the organiza stop here blic Support I 09 (line 8, column 2008 Schedule A, vestment Inco or 2009 (line 10c, rom 2008 Schedul e organization dic	150, 355. 150, 355. 150, 355. 150, 355. Percentage (f) divided by line Part III, line 15 me Percentage column (f) divided e A, Part III, line II not check the bo	6, 372, 046. 172, 186. 172, 186. 172, 186. 4, third, fourth, or 13, column (f)) e by line 13, column x on line 14, and	6,003,071. 72,757. 72,757. fifth tax year as a	4, 618. 4, 618. 4, 618. 4, 618. 15 16 17 18 18 19 19 19 19 19 19 19 19 19 19 19 19 19	27, 321, 790. 419, 485. 0. 419, 485. 0. 27, 741, 275.) 98.5 % 98.3 % 1.5 % 1.7 % line 17 is not
Calei 9 10 a b c c 11 12 13 14 Sec 15 16 Sec 17 18 19 a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add Ins 9, 10c, 11, and 12) First five years. If the Form 990 in organization, check this box and tion C. Computation of Public support percentage from 20. Public support percentage from 20. Investment income percentage from 21.	19,569. 19,569. 19,569. 19,569. 19,569. 19,569. 19,569. s for the organiza stop here blic Support 09 (line 8, column 2008 Schedule A, vestment Income 2008 Schedule e organization diction and stop here. e organization diction and stop here. e organization diction this box and stop	150, 355. 150, 355. 150, 355. 150, 355. Percentage (f) divided by line Part III, line 15 me Percentage column (f) divided e A, Part III, line I not check the bo The organization I not check a box here. The organiz	172,186. 172,186. 172,186. 172,186. 172,186. 172,186. 172,186. 172,186.	fifth tax year as a fifth	4, 618. 4, 618. 4, 618. 4, 618. 17. 18. 18. 19. 19. 19. 19. 19. 19	27,321,790. 419,485. 0. 419,485. 0. 27,741,275.)

Schedule A	A (Form 990 or 990-EZ	2009	APERTURE	FOUNDATION,	INC	13-3120	824 Page 4
Part IV	Supplemental Ir	formati	on. Comple	te this part to	provide	the explanations required by I other additional information. S	art II, line 10;
	Part II, line 17a	or 17b; a	and Part III	, line 12. Provid	de any	other additional information. S	ee instructions.
							-
							
						-	
	- 						
				-			
	- 						
-							
							_
							
		·		_ : 	_ _	·	-

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

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

OMB No 1545 0047

Open to Public Inspection Employer Identification number

APERTURE FOUNDATION, INC		
		13-3120824
Part I Organizations Maintaining Do the organization answered 'Yes	nor Advised Funds or Other Similar Fost to Form 990, Part IV, line 6.	unds or Accounts Complete if
	(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		
	donor advisors in writing that the assets held in do	inor advised Yes No
Did the organization inform all grantees, do used only for charitable purposes and not for purpose conferring impermissible private be	nors, and donor advisors in writing that grant fund or the benefit of the donor or donor advisor or for enefit??	ds may be any other Yes No
Part II Conservation Easements Com	plete if the organization answered 'Yes	s' to Form 990, Part IV, line 7.
1 Purpose(s) of conservation easements held		
Preservation of land for public use (e g	, recreation or pleasure)	of an historically important land area
Protection of natural habitat	Preservation	of certified historic structure
Preservation of open space	_	
2 Complete lines 2a through 2d if the organizal last day of the tax year	ation held a qualified conservation contribution in	the form of a conservation easement on the
		Held at the End of the Year
a Total number of conservation easements		2a
b Total acreage restricted by conservation ear	sements	2b
c Number of conservation easements on a ce	rtified historic structure included in (a)	2c
d Number of conservation easements included	d in (c) acquired after 8/17/06	2d
3 Number of conservation easements modifie- year ►	d, transferred, released, extinguished, or termina	ted by the organization during the tax
4 Number of states where property subject to	conservation easement is located ►	
and enforcement of the conservation easem		Yes No
during the year ►	oring, inspecting, and enforcing conservation ease	
7 Amount of expenses incurred in monitoring, during the year ►	inspecting, and enforcing conservation easemen	\$
8 Does each conservation easement reported 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	on line 2(d) above satisfy the requirements of se	ction Yes No
9 In Part XIV, describe how the organization r include, if applicable, the text of the footnot conservation easements.	reports conservation easements in its revenue and e to the organization's financial statements that d	d expense statement, and balance sheet, and escribes the organization's accounting for
Part III Organizations Maintaining Co	ollections of Art, Historical Treasures, on swered 'Yes' to Form 990, Part IV, In	or Other Similar Assets
		
1a If the organization elected, as permitted und treasures, or other similar assets held for pithe text of the footnote to its financial stater	der SFAS 116, not to report in its revenue statemoublic exhibition, education, or research in furtheral nents that describes these items.	ent and balance sheet works of art, historical nce of public service, provide, in Part XIV,
b If the organization elected, as permitted und treasures, or other similar assets held for pr amounts relating to these items	der SFAS 116, to report in its revenue statement aublic exhibition, education, or research in furthera	and balance sheet works of art, historical nce of public service, provide the following
(i) Revenues included in Form 990, Part V	III, line 1	▶\$
(ii) Assets included in Form 990, Part X		►\$ ►\$3,591,269.
2 If the organization received or held works of amounts required to be reported under SFA	f art, historical treasures, or other similar assets f S 116 relating to these items:	
a Revenues included in Form 990, Part VIII, Ii	ne 1	▶ \$

b Assets included in Form 990, Part X

• • •										
Schedule D (Form 990) 2009 APERT	URE FOUN	DATION,	INC				13-312	0824		Page 2
Part III Organizations Mainta	ining Colle	ctions o	f Art, Hist	orica	l Treasures, c	or Other	Similar As	sets (<u>'contır</u>	nued)
3 Using the organization's acquisition items (check all that apply)	on accession a	and other r	ecords, chec	ck any	of the following th	nat are a si	gnificant use	of its co	ollection	1
a X Public exhibition			d Loan	or exc	hange programs					
b Scholarly research			e Other		5, 5					
c X Preservation for future genera	ations		- 🗀				· · · · · · · · · · · · · · · · · · ·			
4 Provide a description of the organ Part XIV. SEE PART XIV		ctions and	explain how	they	further the organiz	zation's ex	empt purpose	e in		
5 During the year, did the organizat assets to be sold to raise funds ra	tion solicit or reather than to b	eceive dor e maintair	nations of art ned as part o	, histo	rical treasures, or organization's colle	other simi	lar	Yes		X No
Part IV Escrow and Custodia	l Arrangem	ents Co	mplete if	orgar	nization answe	red 'Yes	to Form	990, F	art IV	, line
9, or reported an amo	unt on Forr	n 990, P	art X, line	21.				_		
1 a Is the organization an agent, trus included on Form 990, Part X?	tee, custodian	, or other i	ntermediary	for co	ntributions or othe	er assets n	ot	Yes	[No
b If 'Yes,' explain the arrangement	ın Part XIV an	d complete	e the following	ng tabl	е					
								Amoun	t	
c Beginning balance						1 c				
d Additions during the year						1d	_			
e Distributions during the year						1 e				
f Ending balance						1f				
2a Did the organization include an ai	mount on Form	n 990. Pari	t X. line 21?					Yes		No
b If 'Yes,' explain the arrangement									L	_
Part V Endowment Funds Co		rganizati	on answe	red '	Yes' to Form 9	90. Part	IV. line 10).		
	(a) Current y		(b) Prior year		(c) Two years back	- 1	hree years back		Four year	s back
1 a Beginning of year balance	(a) canon y	- Cui	(0) 11101) cal		(c) Two Jours Duck	\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	moo youro buon	1 3	, ou. jour	0 50011
b Contributions										
b Contributions										
c Net Investment earnings, gains, and losses										
d Grants or scholarships										
 e Other expenditures for facilities and programs 					····					
f Administrative expenses										
g End of year balance										
Provide the estimated percentage	of the year e	nd balance	held as							
a Board designated or quasi-endow	ment 🕨		%							
b Permanent endowment ▶	%									
c Term endowment ►	%									
3a Are there endowment funds not in organization by	n the possessi	on of the a	organization t	that ar	e held and admın	istered for	the	[Yes	No
(i) unrelated organizations								3a(i)		
(ii) related organizations								3a(ii)		
b If 'Yes' to 3a(ıı), are the related o	rganizations lis	sted as red	ouired on Scl	hedule	R?			3b		
4 Describe in Part XIV the intended	•							<u> </u>		
Part VI Investments-Land, B						C. line 10).			
Description of investment		(a) Cost or	other basis stment)	(b)	Cost or other pasis (other)	(c) Acc	umulated eciation	(d)	Book V	alue
1a Land		,			54,208.				54	,208.
b Buildings	f				115,445.	·	41,848.			,597.
c Leasehold improvements	_				1,518,316.	g	48,706.			,610.

d Equipment 287,053. 192,479. 94,574. e Other Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) 791,989.

BAA

Schedule **D** (Form 990) 2009

for uncertain tax positions under FIN 48

13-3120824

Page 3

_	<u> </u>	-312	20024	Page 4
	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements			
	Total revenue (Form 990, Part VIII,column (A), line 12)			754,401.
2	Total expenses (Form 990, Part IX, column (A), line 25)			971,932.
3	Excess or (deficit) for the year Subtract line 2 from line 1		-2,	217,531.
4	Net unrealized gains (losses) on investments			
5	Donated services and use of facilities			
6	Investment expenses			
7	Prior period adjustments			
8	Other (Describe in Part XIV)			
9	Total adjustments (net). Add lines 4 through 8			
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9			217,531.
Pa	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per R	etur	n	
1	Total revenue, gains, and other support per audited financial statements	1	5,	430,015.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
	a Net unrealized gains on investments		1	
	Donated services and use of facilities 2b			
	Recoveries of prior year grants 2c			
	d Other (Describe in Part XIV) SEE PART XIV 2d 1,675,614.			
	e Add lines 2a through 2d	2 e	1	675,614.
	Subtract line 2e from line 1	3		754,401.
	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	-	- '	134,401.
	a Investments expenses not included on Form 990, Part VIII, line 7b			
	Other (Describe in Part XIV)			
	Add lines 4a and 4b	4c	+	754 404
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	3,	754,401.
	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Retu	<u>ırn</u>		
	Total expenses and losses per audited financial statements	1	1,	647,546.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	É		
ä	Donated services and use of facilities 2a	ĺ		
ŀ	Prior year adjustments 2b	į		
(Other losses 2c	ŀ		
(Other (Describe in Part XIV) SEE PART XIV 2d 1,675,614.			
	Add lines 2a through 2d	2e	1.	675,614.
	Subtract line 2e from line 1	3		971,932.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	Investments expenses not included on Form 990, Part VIII, line 7b	ĺ		
	Other (Describe in Part XIV)	ĺ		
	Add lines 4a and 4b			
		4c		071 022
	Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18)	5		971,932.
Pal	t XIV Supplemental Information			
line :	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Part IV, li 4, Part X, line 2; Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part mation	to pro	ovide any	additional
	PART III, LINE 4 - DESCRIPTION OF ORGANIZATION'S COLLECTIONS AND HOW FURTHER	'S EX	(EMPT P	PURPO
	COLLECTIONS ARE MAINTAINED TO SUPPORT THE ORGANIZATION'S MISSION OF F	'ROM	OTING	AN
	APPRECIATION OF PHOTOGRAPHY AND VISUAL ARTS.			
			. – – –	
		-		
	·	-		
			. – – –	

Schedule D (Form 990) 2009 APERTURE FOUNDATION, INC	13-3120824 Page 5
Schedule D (Form 990) 2009 APERTURE FOUNDATION, INC Part XIV Supplemental Information (continued)	
	

2009 SCHEDU	LE D, PART XIV - SUPPLEMENTAI	L INFORMATION PAGE
CLIENT APERTURE	APERTURE FOUNDATION, INC	13-312082
7/29/10		12.10P
OTHER REVENUE INCLUDE	NE 2D ED IN F/S BUT NOT INCLUDED ON FORM 990	
COST OF GOODS SOLD FUNDRAISING DIRECT EXP	ENSES	\$ 1,524,558. 151,056. \$ 1,675,614.
SCHEDULE D, PART XIII, LI OTHER EXPENSES AND LO	NE 2D SSES PER AUDITED F/S	
COST OF GOODS SOLD FUNDRAISING DIRECT EXP	ENSES	$\begin{array}{c} $ 1,524,558. \\ \hline 151,056. \\ \hline \text{TOTAL} & \hline 1,675,614. \\ \end{array}$

Department of the Treasury Internal Revenue Service Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered'Yes' to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form990 or Form 990-EZ. ► See separate instructions.

2009

Open to Public Inspection

Name of the organization Employer identification number APERTURE FOUNDATION, 13-3120824 Fundraising Activities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 17 Form 990EZ filers are not required to complete this part 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations Solicitation of non-government grants Solicitation of government grants Internet and email solicitations X Special fundraising events Phone solicitations X In-person solicitations 2a Did the organization have written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? XNo **b** If 'Yes,' list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (v) Amount paid to (or retained by) fundraiser listed in (iii) Did fundraiser (vi) Amount paid to (or retained by) (i) Name of individual (ii) Activity (IV) Gross receipts have custody or control of contributions? or entity (fundraiser) from activity organization col.(ı) Yes No **EVENT** TESS O'DWYER PLANNING 30,000 Х 0. 30,000. Total List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

Page 2

91	3 10	reported more than \$15,000 on F	form 990-EZ, line (6a. List events with	gross receipts gre	eater that	n \$5,0	00.
	-		(a) Event #1 ANNUAL BENEFIT	(b) Event #2	(c) Other Events	(d) Tot	al Ever	nts
Ë			(event type)	(event type)	(total number)			
REVERUE	1	Gross receipts	494,925.				494,9	25.
E	2	Less Charitable contributions	47,051.				47,0	<u>)51.</u>
	3	Gross income (line 1 minus line 2)	447,874.		••		447,8	374.
	4	Cash prizes						
	5	Noncash prizes						
D I R E C T	6	Rent/facility costs	4,770.				4,7	770.
	7	Food and beverages	64,038.		·-		64,0)38.
E X P	8	Entertainment						
EXPENSES	9	Other direct expenses	82,248.				82,2	248.
S	10	Direct expense summary Add lines 4- th	rough 9 in column (d)		•		151,0)56.
	11	Net income summary. Combine lines 3, c	olumn (d) and line 10		•		296,8	318.
Pai	t III	Gaming. Complete if the organiz \$15,000 on Form 990-EZ, line 6a	ation answered 'Yo	es' to Form 990, Pa	art IV, line 19, or re	eported r	nore t	han
		\$15,000 0111 01111 990-E2, line 02		435	4 > 00	407.4		
REVENUE			(a) Bıngo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total	ai gami (a) thro I. (c))	ng ough
E N				Dirigo			-	
Ĕ	1	Gross revenue						
D X	2	Cash prizes						
DIPENSE	3	Non-cash prizes						
' S	4	Rent/facility costs						
	5	Other direct expenses						
			Yes%	Yes%	Yes%			
	6	Volunteer labor	No No	No	No			
	7	Direct expense summary Add lines 2 thro	ough 5 in column (d)		•			
	8	Net gaming income summary Combine li	nes 1, column (d) and l	line 7	<u> </u>			
						F	YES	NO
		er the state(s) in which the organization op ne organization licensed to operate gaming				— ₉ ,		
		lo,' explain:	activities in oden or the	ose states		,		
			. 					
		e any of the organization's gaming license	s revoked, suspended of	or terminated during the	tax year?	10:	•	
t	ץ' זו נ	'es,' explain:						
11		s the organization operate gaming activitie				11		
12	Is th	ne organization a grantor, beneficiary or tru ninister charitable gaming?	istee of a trust or a mer	mber of a partnership or	other entity formed to	12	1	

Schedule G (Form 990 or 990-EZ) 2009 APERTURE FOUNDATION, INC	13-3120824	F	age 3
	. –	YES	NO
13 Indicate the percentage of gaming activity operated in a The organization's facility b An outside facility 13 14 Enter the name and address of the person who prepares the organization's gaming/special events both	b %		
Name			
Address: -			
15a Does the organization have a contact with a third party from whom the organization receives gaming rebuilding bild 'Yes,' enter the amount of gaming revenue received by the organization of gaming revenue retained by the third party clif 'Yes,' enter name and address of the third party		15a	
Name: ▶			
Address ►			
16 Gaming manager information			
Name •			
Gaming manager compensation ► \$			
Description of services provided.			
☐ Director/officer ☐ Employee ☐ Independent contractor			
17 Mandatory distributions			
a Is the organization required under state law to make charitable distributions from the gaming proceeds state gaming license?	1	17a	
b Enter the amount of distributions required under state law to be distributed to other exempt organization	ons or spent in the		
organization's own exempt activities during the tax year \$			<u> </u>
BAA TEEA3703L 02/05/10 S	Schedule G (Form 990 o	or 990-EZ	2009

. . .

SCHEDULE J (Form 990)

Compensation Information

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

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

APERTURE FOUNDATION, INC

Employer identification number

13-3120824

Par	rt I Questions Regarding Compensation			
			Yes	No
1 a	a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items	Part		
	First-class or charter travel Housing 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			
	X Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
ŧ	b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain	1ь	Х	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, director trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	s, <u>2</u>	Х	
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 Written employment contract		1	
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee	е [
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	a Receive a severance payment or change-of-control payment?	4a		X
t	b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
c	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	ļ		
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
ā	a The organization?	5 a		X
ŀ	b Any related organization?	5 b		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.			
ā	a The organization?	6 a		X
t	b Any related organization?	6 b		X
	If 'Yes' to line 6a or 6b, describe in Part III			
7	For person listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If 'Yes,' describe in Part III	7	_	Х
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the init contract exception described in Regs. section 53 4958-4(a)(3)? If 'Yes,' describe in Part III	tial 8		Х
۵	If 'Yes' to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations	9		, x

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

Schedule J (Form 990) 2009

13-3120824

Page 2

APERTURE FOUNDATION, INC

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed. Schedule J (Form 990) 2009

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

On Description Compensation Compensatio		(B) Breakdown o	(B) Breakdown of W-2 and/or 1099-MIS	C con	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
Careering Decreases Careering Decreases	(A) Name	(I) Base compensation	(ii) Bonus and incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(a)-(l)(b)	reported in prior Form 990 or Form 990-EZ
	JUAN GARCIA DE OTEYZA (I)	 - 	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1 1 1 1 1 1	0	982,205	0.
	3	,				0	0	
	(0)			1 1 1				
	(ii)							
	8							
	(n)							
	[())							
	(E)							
	Θ							
	(ii)							
	(0)							
	(ii)							
	Θ							
	3							
	0							
	(II)							
	Θ				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
	(11)							
	(O)			1 1 1 1 1	 			
	(11)							
	3	 	 	 	 	 	 	
	(II)							
	8		1 1 1 1 1 1 1	1 1 1 1 1 1	1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	 	1 1 1
	(11)							
(ii) (iii) (<u> </u>] 	1 1 1 1 1 1	 	 	 	
	(ii)		- 1					
(ii) (iii) (3	 	 	 	 	 	1 1	-
(ii) (iii) ((11)							
(ii)	€	 	 	 	 	 	 	
(ii)	(i)							
	<u>s</u>	1 1 1		 	1 1 1 1 1	1 1 1 1 1 1	 	1 1 1 1 1

Department of the Treasury Internal Revenue Service

or 990-EZ.

Transactions with Interested Persons

OMB No 1545 0047

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

Open to Public Inspection

Schedule L (Form 990 or 990-EZ) 2009

Name of the organization							ployer i			mber		
APERTURE FOUNDATION, INC							3-312					
Part I Excess Benefit Transaction Complete if the organization ans	ns (sec wered 'Yes	tion 50 s' on Fori	1(c)(3) a m 990, Pai	and section rt IV, line 25a	501(c) or 25b, o	(4) organız ır Form 990-E	ation Z, Par	s onl t V, Iır	ly). ie 40b			
(a) Name of disqualified person					h) Descriptio	on of transaction					(c) Corr	rected?
) (a) Name of disqualified person			(b) Description of dansaction							Yes	No	
			-									
											Ļ	
2 Enter the amount of tax imposed on the section 4958	ŭ		•	. ,	sons duri	ng the year u	nder	► \$				
3 Enter the amount of tax, if any, on line 2 Part II Loans to and/or From Inter				organization				▶ \$				
Complete if the organization ans				rt IV, line 26 c	r Form 9	90-EZ, Part V,	line 3	88a				
(a) Name of interested person and purpose	(a) Name of interested person and purpose (b) Loan the orga			Original pal amount	(d) B	alance due	(e) In c	lefault?	(f) App	ard or	(g) W agreer	
	To	From					Yes	No	Yes	No	Yes	No
CELSO GONZALEZ	X			200,000		200,000		Х	Х		Х	
WORKING CAPITA						·						
MARK LEVINE	X	X		100,000		100,000	Х		Х		Х	
WORKING CAPITAL												
ALAN STOGA	Х			20,000.		20,000.		X	X		Х	
WORKING CAPITAL												
Total				▶ \$		575,000.						
Part III Grants or Assistance Ben Complete if the organization	efitting on answ	Interes ered 'Y	ted Pers 'es' on F	s ons. Form 990, F	Part IV,	line 27.						
(a) Name of interested person	(b) Relations	ship between the organi	interested person ization	and	(c)	Amoun	t and ty	pe of as	sistance	e	-
· · · · · · · · · · · · · · · · · · ·												
	_											
Part IV Business Transactions In	volvina.	Intoros	tod Dov]						
Part IV Business Transactions In Complete if the organization	on answ	ered'Ye	es' on Fo	orm 990, P	art IV, I	line 28a, 28	3b, o	28c				
(a) Name of interested person	(b) Rountere	elationship sted persor organizati	n and the	(c) Amour transactio	nt of on \$	(d) Des	1) Description of transaction				(e) Sha organiz reven	ation's
											Yes	No
						ļ						
												
	 											

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

Department of the Treasury

Internal Revenue Service

Transactions with Interested Persons

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

OMB No 1545-0047 2009

Open to Public Inspection

Schedule L (Form 990 or 990-EZ) 2009

Name of the organization Employer identification number APERTURE FOUNDATION, INC 13-3120824 Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. (c) Corrected? (a) Name of disqualified person (b) Description of transaction 1 No 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 Ś 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Part II Loans to and/or From Interested Persons. Complete if the organization answered 'Yes' on Form 990, Part IV, line 26 or Form 990-EZ, Part V, line 38a. (b) Loan to or from the organization? (c) Original principal amount (d) Balance due (e) In default? (f) Approved by board or committee? (g) Written (a) Name of interested person and purpose From No Yes No Yes No То FREDERICK M R SMITH Х 100,000 100,000 Х X Х WORKING CAPITAL Х Χ Х 70,000 Х WILLARD SMITH 70,000 WORKING CAPITAL Х ANNETTE FRIEDLAND 50,000 50,000 Х Х Х WORKING CAPITAL **Total Grants or Assistance Benefitting Interested Persons.** Part III Complete if the organization answered 'Yes' on Form 990, Part IV, line 27. (a) Name of interested person (b) Relationship between interested person and the organization (c) Amount and type of assistance **Business Transactions Involving Interested Persons** Complete if the organization answered'Yes' on Form 990, Part IV, line 28a, 28b, or 28c. (a) Name of interested person (b) Relationship between interested person and the (d) Description of transaction (e) Sharing of (c) Amount of transaction \$ organization revenues? Yes No

or 990-EZ.

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

Transactions with Interested Persons

OMB No 1545-0047 2009

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

Department of the Treasury Internal Revenue Service

or 990-EZ.

Open to Public Inspection

Name of the organization		Employer identification number										
APERTURE FOUNDATION, INC							3-31:					
Part I Excess Benefit Transaction Complete if the organization ansi	ns (sect wered 'Yes	tion 50 ' on Fori	1(c)(3) a m 990, Pai	and section rt IV, line 25a	501(c)(4 or 25b, or	4) organız Form 990-E	ation Z, Par	is on t V, lir	ly). ie 40b			
1 (a) Name of disqualified person			(b) Description of transaction								(c) Corrected	
1 (a) Name of disqualified person			(พ) ขอระกษุแบบ ดา แสกรสะแบบ								Yes	No
				·						-		
 2 Enter the amount of tax imposed on the section 4958 3 Enter the amount of tax, if any, on line 2 	2, above, r	eımburs	ed by the		sons durin	g the year u	nder	► \$ ► \$			· · · · · · · · · · · · · · · · · · ·	L <u>-</u>
Part II Loans to and/or From Inte												
Complete if the organization answ	wered 'Yes	on For	m 990, Pai	rt IV, line 26 o	or Form 99	0-EZ, Part V,	, line 3	38a.				
(a) Name of interested person and purpose	(b) Loan the orga	to or from	(c) Original (d) Balance due (e) In default?		principal amount by		by b			(f) Approved by board or committee?		ritten ment?
	То	From	-				Yes	No	Yes	No	Yes	No
JORGE PINTO	Х			5,000		5,000.		Х	Х		Х	
WORKING CAPITAL					·							
BARRY GARFINKEL X 10,0		10,000		10,000.		Х	Х		Х			
WORKING CAPITAL		<u> </u>										<u> </u>
MATTHEW TIERNY	X			10,000.	10,000		ļ	Х	Х		Х	
WORKING CAPITAL		<u> </u>	<u> </u>				ļ			L		<u> </u>
Total .	****		 	▶ \$			<u> </u>					
Part III Grants or Assistance Ben Complete if the organization	on answ	interes ered 'Y	ted Pers	so ns. Form 990, F	Part IV, I	ıne 27.						
(a) Name of interested person	(b) Relations	ship between the organ	interested person ization	and	(c)) Amoun	t and ty	pe of as	sistanc	e	
				· · · · · · · · · · · · · · · · · · ·								
									-			
						· · · · · ·			-			
Part IV Business Transactions In Complete if the organization	olving on answ	Interes ered'Y	es' on F	sons. orm 990, P	art IV, III	ne 28a, 28	3b, o	r 28c				
(a) Name of interested person (b) Relations interested person organi			rson and the transaction \$		(d) Description of transaction				organi	aring of zation's nues?		
						 					Yes	No
												₩
					-						<u> </u>	
	 -											
		<u> </u>										
												
BAA For Privacy Act and Paperwork Reducti	on Act No	tıce, see	the Instru	ictions for For	rm 990	Sch	nedule	L (Fo	rm 99(0 or 9	90-EZ) 2009

Transactions with Interested Persons

OMB No 1545-0047 2009

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

Open to Public Inspection

Employer identification number

13-3120824

Department of the Treasury Internal Revenue Service Name of the organization

APERTURE FOUNDATION, INC

Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. (c) Corrected? (a) Name of disqualified person (b) Description of transaction 1 Yes No 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under \$ section 4958 Ś Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Part II Loans to and/or From Interested Persons. Complete if the organization answered 'Yes' on Form 990, Part IV, line 26 or Form 990-EZ, Part V, line 38a (c) Original principal amount (f) Approved by board or committee? (a) Name of interested person and purpose (b) Loan to or from (d) Balance due (e) In default? (g) Written From Yes No Yes Νo Yes No 10,000 10,000 Х Х JOSEPH T BAIO Х Х WORKING CAPITAL Total Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 27. (a) Name of interested person (b) Relationship between interested person and the organization (c) Amount and type of assistance

Business Transactions Involving Interested Persons. Complete if the organization answered'Yes' on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization (c) Amount of transaction \$		(d) Description of transaction	(e) Sha organia rever	aring of zation's nues?	
				Yes	No	
		_				
	·					

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

Schedule L (Form 990 or 990-EZ) 2009

or 990-EZ.

SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545 0047

2009

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990.

Open to Public Inspection

Name of the organization	Employer identification number
APERTURE FOUNDATION, INC	13-3120824
FORM 990, PART VI, LINE 11 - FORM 990 REVIEW PROCESS	
FORM 990 REVIEW CONDUCTED BY EXECUTIVE DIRECTOR	·
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AV	AILABLE
INFORMATION_AVAILABLE_UPON_REQUEST	
	.
-	

Schedule 0 (Form 990) 2009	Page 2
Name of the organization	Employer identification number
APERTURE FOUNDATION, INC	13-3120824
	·
	-
	

	····			
2009 F	PAGE 1			
CLIENT APERTURE	APERTURE FOUNDA	TION, INC		13-3120824
7/29/10				12 10PM
COMPUTATION OF COST OF GOOD	S SOLD (FORM 990)			
1. INVENTORY AT START OF YEAR 2. PURCHASES 3. COST OF LABOR 4. ADDITIONAL 263A COSTS 5. OTHER COSTS 6. TOTAL (ADD LINES 1 THROUGH 7. INVENTORY AT END OF YEAR 8. COST OF GOODS SOLD (SUBTRA	5)	NE 6)		1,536,256. 1,140,653. 0. 0. 2,676,909. 1,152,351. 1,524,558.
FORM 990, PART VIII, LINE 11D OTHER REVENUE				ï
	BUS. TOTAL CODE REVENUE \$ 17,079. 9,341. 7,250. 33,670.	RELATED OR EXEMPT FUNC TION REVENU	UNRELATED BUSINESS REVENUE	REVENUE EXCLUDED FROM TAX \$ 17,079. 9,341. 7,250.
FORM 990, PART IX, LINE 24 OTHER EXPENSES				
	(A) TOTAL	(B) PROGRAM	(C) MANAGEMENT	(D) FUNDRAISING
BANK & CREDIT CARD CHARGES CATALOGS & DIRECT MAIL LECTURES MILLERTON EXPENSES MISCELLANEOUS OUTSIDE SERVICES PAYROLL PROCESSING FEES POSTACE AND SHIPPING	54,601. 90,485. 19,681. 20,596. 92,359. 37,565. 9,025.	90,485. 19,681. 76,617. 37,565.	& GENERAL 54,601. 20,596. 9,025.	15,742.
POSTAGE AND SHIPPING RECRUITING REPAIRS SECURITY SHIPPING SPECIAL EVENTS & ANNUAL APPEA TAXES TELEPHONE	2,729. 22,786.	91,714.	32,355. 1,769. 14,798. 3,500. 2,729. 22,786.	29,043.
UTILITIES VAULT TO	52,614. 4,890. TAL \$ 580,510.	4,890. \$ 320,952.	52,614. \$ 214,773.	\$ 44,785.

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12/31/09 2009 FEDERAL BOOK SUMMARY DEPRECIATION SCHEDULE

PAGE 1

	T APERTURE			RE FOUND						3 -31208
/10		DATE	DATE	COST/	BUS	CUR 179/	PRIOR 179/ SDA/			CURRENT
10.	DESCRIPTION	ACQUIRED_	SOLD	BASIS	_PCT	SDA	DEPR	_METHOD	LIFE _	DEPR.
ORN	1 990/990-PF									
BU	ILDINGS									
3	BUILDING	1/01/94		115,448			41,849	S/L	40 _	2,
	TOTAL BUILDINGS			115,448		0	41,849			2,3
FU	RNITURE AND FIXTURES			•						
8	COMPUTER EQUIPMENT	8/21/03		77,481			65,385	S/L	5	12,
9	2003 COMPUTERS	7/01/03		14,871			14,871	S/L	5	
10	2004 COMPUTERS	1/01/04		16,095			9,657	S/L	5	
11	2005 COMPUTERS	1/01/04		65,311			39,186	S/L	5	13,
12	2006 COMPUTERS	1/01/06		4,065			2,033	S/L	5	
15	2007 ADDITIONS	7/01/07		7,594			1,988	S/L	5	1,
22	FURNITURE & FIXTURES	7/01/09		1,899				S/L	5 -	
	TOTAL FURNITURE AND FIXTURE			187,316		0	133,120			27,
IMI	PROVEMENTS									
1	BUILDING IMPROVEMENTS	1/01/97		75,004			75,004	S/L	7	
2	BUILDING IMPROVEMENTS	7/01/98		225,234			225,234	S/L	7	
5	WAREHOUSE IMPROVEMENTS	1/01/99		34,824			34,824	S/L	7	
7	WAREHOUSE IMPROVEMENTS	1/01/00		5,386			5,360	S/L	7	
13	LEASEHOLD IMPROVEMENTS	1/01/05		1,145,441			343,632	S/L	10	114
18	LEASEHOLD IMPROVEMENTS	1/01/07		13,987			2,798	S/L	10	1
21	LEASEHOLD IMPROVEMENTS	1/01/08		18,440			1,317	S/L	10 -	2
	TOTAL IMPROVEMENTS			1,518,316		0	688,169			118
LA —	ND —									
4	LAND	1/01/94		12,828						
6	LAND	1/01/99		41,380					_	
	TOTAL LAND			54,208		0	0			
MI	SCELLANEOUS 									
14	DATABASE	1/01/06		81,137			41,970	S/L	5	16
16	DATABASE	1/01/07		3,500			1,400	S/L	5	
17	WEBSITE	7/01/07		10,000			3,000	S/L	5	2,

12/31/09 2009 FEDERAL BOOK SUMMARY DEPRECIATION SCHEDULE PAGE 2

CLIEN	IT APERTURE	A	APERTUI	RE FOUND	ATION,	INC			1	3-3120824
7/29/10)									12 10PM
<u>NO.</u>	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS PCT	CUR 179/ SDA	PRIOR 179/ SDA/ DEPR.	_METHOD_	LIFE .	CURRENT DEPR
19	DATABASE	1/01/07		3,500			175	S/L	5	700
20	DATABASE	4/30/08		3,500			175	S/L	5	700
	TOTAL MISCELLANEOUS			101,637		0	46,720		•	20,327
	TOTAL DEPRECIATION			1,976,925		0	909,858		:	169,470

1,976,925

0

909,858

169,470

GRAND TOTAL DEPRECIATION

(Rev April 2009)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Treasury

► File a separate application for each return.

internal Revenue	Service	rio a separate application for each rotaliti			
• If you are	e filing for an Automatic 3-Month I	Extension, complete only Part I and check this box.			► X
•		omatic) 3-Month Extension, complete only Part II (on page 2	? of this form)		
•	-	dy been granted an automatic 3 month extension on a prev		m 8868	
		sion of Time. Only submit original (no copies n			
1 art i	Automatic 3-Month Extens	sion of time. Only submit original (no copies in	eeueu).		
A corporation	n required to file Form 990-T and i	requesting an automatic 6-month extension – check this bo	ox and complet	e Part I only	▶ 🗌
All other corp income tax r		partnerships, REMICS, and trusts must use Form 7004 to	request an ext	ension of time to	file
returns noted the additional Form 990-T	d below (6 months for a corporation in the corporation of the corporation is the corporation of the corporation in the corporation is the corporation of the corporation is the corporation of the corporation in the corporation is the corporation of the corporation of the corporation of the corporation is the corporation of the corporat	ectronically file Form 8868 if you want a 3-month automatic on required to file Form 990-T). However, you cannot file Fo on or (2) you file Forms 990-BL, 6069, or 8870, group return or completed and signed page 2 (Part II) of Form 8868 For in the for Charities & Nonprofits	rm 8868 electr ns. or a compo	onically if (1) you site or consolidate	want ed
	Name of Exempt Organization		Emple	yer identification num	ber
Type or					
print	APERTURE FOUNDATION,	TNC	13-	3120824	
File by the	Number, street, and room or suite number				
due date for filing your	547 WEST 27TH STREET	4TH FLOOR			
return See instructions		de For a foreign address, see instructions		•	
	NEW YORK, NY 10001				
Check type o	of return to be filed (file a separate	a application for each return):			
X Form 990		¬ · · ·	Form 4720		
Form 990	<u>j-</u>	-			
\vdash	<u>-</u>		Form 5227		
Form 990]	-	Form 6069		
Form 990)-PF [Form 1041-A	Form 8870		
Telephone If the org If this is the check this	for a Group Return, enter the orga	FAX No For place of business in the United States, check this box sinization's four digit Group Exemption Number (GEN) and attach a list with the integroup, check this box		s for the whole gro Ns of all members	-
		is for a corporation required to file Form 990-T) extension o	of time		
until _ The ex		the exempt organization return for the organization named turn for			
2 If this t	ax year is for less than 12 months		Change	e in accounting pe	eriod
	application is for Form 990-BL, 990 undable credits. See instructions.	0-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	, 3a	\$	0.
	application is for Form 990-PF or 9 Include any prior year overpayme	990-T, enter any refundable credits and estimated tax paym nt allowed as a credit	ents 3t	\$	0.
deposit	e Due. Subtract line 3b from line 3 with FTD coupon or, if required, l structions	Ba Include your payment with this form, or, if required, by using EFTPS (Electronic Federal Tax Payment System)	30	\$	0.
Caution. If yo payment inst		c fund withdrawal with this Form 8868, see Form 8453-EO a	and Form 8879	-EO for	
DAA For Dri	vacy Act and Panerwork Reduction	on Act Notice see instructions		Form 8868 (Pay	1 2000

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