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# Ferm **990**

Department of the Treasury Internal Revenue Service

# **Return of Organization Exempt From Income Tax**

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

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

2009
Open to Public Inspection

A F	or the	2009		ndar year,							009, an	d end	ing				, 20	3	
B cr	neck if app	okcable		C Name of	organiza	tion BUILE	-A-BEAR	WORKSHO	P FOUNDAT	TION, I	NC.			D Emp	oloyer Id	entific	ation num	ber	
	Address		use IRS		siness As	3								33	-100	718	8		
	Name o	change	print or		and stree	et (or PO	box if mail i	s not deliv	ered to stree	et addres:	5)	Roo	m/suite	E Tele	phone n	umber	7		
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	Termin	ated	Specific Instruc-		wn, state	or country	, and ZIP +	+ 4											
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ī	Tax-exe	mpt sta	atus	X 501(c)	(3)	<b>◀</b> (inse	ert no )	4947(	a)(1) or	52	 7			lf '	"No," atta	ch a list	t (see instru	ctions)	
J	Website	e: <b>&gt;</b>	WWW.	BUILDA						/BABV	FOUN	DATI	ON.ASP	<b>XH(c)</b> Gr	oup exem	ption n	umber 🕨		
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Activities																			0
Ę	٠.	Total	numbe	r of employe	ore (oct	mata if no	· · · · · · · ·	• • • •	• • • • •			• • •			• • • •	6	<del></del>		23
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_	В	net ur	relate	a business	taxable	income ii	om Form	990-1, 11	16 34		• • • •	• • • •	<del>· · · ·</del>		r Year	.   / D	Cui	rent Y	
		C4			- (D-+)	/III luna 41	L								67,2	71			,317.
e E	8	Contri	Dution	s and grant	s (Part )	/III, line 11	<sup>n)</sup>						$\cdots \vdash$		07,2	<del>/                                    </del>		902	, 517.
Revenue	9	Progra	am ser	vice revenue	e (Part \	/III, line 2(	g)						• •	<del></del>	4,9	00			,516.
æ	10	Invest	ment II	ncome (Pa	rt VIII, C	olumn (A)	, lines 3,	4, and /d	)				$\cdots \vdash$		4,9	00.			, 510.
				ue (Part VII											72,1	70		063	,833.
				ie - add line											06,5				,398.
	13	Grant	s and s	sımılar amo	unts pai	d (Part IX	, column (	A), lines	1-3)						00,5	0.		04/	
	14	Benef	its paid	d to or for m	nembers	(Part IX,	column (/	4), line 4)					$\cdot \cdot \vdash$			0.			$\frac{0.}{0.}$
es	15			ner compen												0.			
Expenses	16a	Profes	ssional	l fundraising	fees (F	art IX, co	lumn (A),	line 11e)								٠.			<u> </u>
×	1	Total	tupara — (	Heling/expen Ises (Parti)	ses, Pai	t IX, colui	mn (D), lir	ne 25) 🕨							50.0				
_	17 -	Ofbèr	expen	isės (Pārii)	<del>, Lo</del> ph	in (A), line	es 11a-11	d, 11f-24f	n						58,9				,354.
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Pa	art II	_		re Block															
		Unde	r penali	ties of perjur	ry, I dec	are that I	have exam	nined this	return, incl	luding a	company	ing sch	edules an	d statem	ents, ar	nd to t	the best o	f my k	nowledge
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Ма	y the II	RS dis	cuss t	this return v	vith the	preparer s	shown abo	ove? (see	instruction	ns)							$\neg \neg \neg$	Yes	No
For	Priva	cy Ac	t and F	Paperwork	Reduct	ion Act N	lotice, see	the sepa	arate instru	uctions.	*								0 (2009)

137,250

849,798.

) (Revenue \$

262,080

(Expenses \$

4e Total program service expenses ▶

137,250. including grants of \$

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Part	IV Checklist of Required Schedules			
			Yes	No
1 `	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4		Х
5	Sections 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)	Ť		
	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		Ιx
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	<u> </u>		<del>                                     </del>
•	the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i>			<del></del>
•	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,"			ļ
	complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or	-		<del>                                     </del>
	quasi-endowments? If" Yes, "complete Schedule D, Part V	10		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,	-10	-	<del>                                     </del>
• •	VII, 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? If "Yes," complete Schedule D, Part VII			
	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			1
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX			1
	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 statements for the tax year? If "Yes,"		l	
•	complete Schedule D, Parts XI, XII, and XIII	12	Х	<del> </del>
12A	Was the organization included in consolidated, independent audited financial statement for the tax year?  Yes No			<del> </del>
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			'
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a		14a	<u> </u>	X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	170		1
		14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	140	<del></del>	<del> </del>
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance		_	+
10	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	4.6	}	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	16	<del>                                     </del>	<del>  ^</del>
.,	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	4-		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17	├	+^
10	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II			X
19		18		+^
1 3	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			l x
20		19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		

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Part	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	,	X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	Х	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K If "No," go to question 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	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 committee member, or to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	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? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a			
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,			Ì
	Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified		Ì	
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	]	1	
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			٠,,
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,		١	
	III, IV, and V, line 1	34	X	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete	İ		١,,
	Schedule R, Part V, line 2	35	ļ	X
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	<u> </u>	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	l		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R			١.,
	Part VI	37	ļ	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	_	١.,	
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	<del></del>
		Form	1990	(2009)

an	Statements Regarding Other IRS Fillings and Tax Compliance	—-г		
	`	$\rightarrow$	Yes	No
	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns Enter -0- if not applicable		ļ	
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	ļ		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
_	gaming (gambling) winnings to prize winners?	1c	$\dashv$	
2 a	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	ا ۱		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see			
2.	Instructions)  Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			
зa		3 a		Х
<b>.</b>	this return?  If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3 b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	30		
44	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		Х
ь	If "Yes," enter the name of the foreign country	74		
U	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank	ŀ		
	and Financial Accounts	İ		
5 2	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding			
·	Prohibited Tax Shelter Transaction?	5c		
6a	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?	6a		Х
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
-	gifts were not tax deductible?	6ь		
7				
	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?	7a		X
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7 b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7 c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7 e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
_	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		X
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9 b		Х
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
	Gross income from 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		<u> </u>
<u>b</u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b	L		

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.

1a Enter the number of voting members of the governing body			
b Enter the number of voting members that are independent.  1 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?  3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?  4 Did the organization become aware during the year of a material diversion of the organization become aware during the year of a material diversion of the organization's assets?  5 Did the organization have members or stockholders?  7a Does the organization have members or stockholders?  7b Does the organization have members or stockholders?  7c Does the organization have members or stockholders?  7d Does the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:  a The governing body?  b Each committee with authority to act on behalf of the governing body?  c Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.  5 Section B, Policies (This Section B requests information about policies not required by the Internal Revenue Code.)  10a Does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with hose of the organization?  11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?  11A Describe in Schedule O the process, if any, used by the organization to review this Form 990.  12a Does the organization have a written conflict of interest policy? If "No," go to line 13.  b Are officiers, directors or trustees, and key employees required to disclose annually interests that could give rise to		Yes	No
b Enter the number of voting members that are independent.  Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?  Did the organization delegate control over management duties customanly performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?  Did the organization become aware during the year of a material diversion of the organization become aware during the year of a material diversion of the organization become aware during the year of a material diversion of the organizations assets?  Did the organization have members or stockholders?  Does the organization have members or stockholders?  Does the organization have members or stockholders?  A Does the organization have members or stockholders?  A Position of the governing body?  Are any decisions of the governing body subject to approval by members, stockholders, or other persons?  Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:  The governing body?  Each committee with authority to act on behalf of the governing body?  Is there any officer, director, trustee, or key employee listed in Part VII. Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.  Section B, Policies (This Section B requests information about policies not required by the Internal Revenue Code.)  Does the organization have local chapters, branches, or affiliates?  If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?  Has the organization have a written of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of th			-
any other officer, director, trustee, or key employee?  Did the organization delegate control over management duties customanily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?  Did the organization become aware during the year of a material diversion of the organization's assets?  Does the organization have members or stockholders?  Does the organization have members or stockholders, or other persons who may elect one or more members of the governing body?  Are any decisions of the governing body subject to approval by members, stockholders, or other persons?  The governing body?  The organization cannot be reached at the organizations mailing address? If "Yes," provice the names and addresses in Schedule O.  Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)  The governing body the Internal Revenue Code.  The governing body the Internal Revenue Code.  The governing body the Internal Revenue Code.  The organization have local chapters, branches, or affiliates?  The governing body the following are consistent with those of the organization for such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization for such chapters, affiliates, and branches	1 1	!	
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b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		Yes	X
affiliates, 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 before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990.  Does the organization have a written conflict of interest policy? If "No," go to line 13  b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  13 Does the organization have a written whistleblower policy?  14 Does the organization have a written document retention and destruction policy?  15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  a The organization's CEO, Executive Director, or top management official.  b Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)  16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  Section C. Disclosure  17 List the states with which a copy of this Form 990 is required to be filed ▶ ATTACHMENT 3  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3) available for public inspection. Indicate how you make these available Check all t	10a		
<ul> <li>Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?</li> <li>11A Describe in Schedule O the process, if any, used by the organization to review this Form 990.</li> <li>12a Does the organization have a written conflict of interest policy? If "No," go to line 13</li> <li>b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?</li> <li>c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done</li> <li>13 Does the organization have a written whistleblower policy?</li> <li>14 Does the organization have a written document retention and destruction policy?</li> <li>15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?</li> <li>a The organization's CEO, Executive Director, or top management official</li> <li>b Other officers or key employees of the organization</li> <li>if "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)</li> <li>16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?</li> <li>b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?</li> <li>Section C. Disclosure</li> <li>17 List the states with which a copy of this Form 990 is required to be filed ▶ ATTACHMENT 3</li> <li>Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3) available for public inspection. Indicate how you make these available. C</li></ul>			
form?  11A Describe in Schedule O the process, if any, used by the organization to review this Form 990.  12a Does the organization have a written conflict of interest policy? If "No," go to line 13	10b		
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Does the organization have a written conflict of interest policy? If "No," go to line 13	11	^	├──
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		Х	
rise to conflicts?  c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done  13 Does the organization have a written whistleblower policy?  14 Does the organization have a written document retention and destruction policy?  15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  a The organization's CEO, Executive Director, or top management official  b Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)  16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  Section C. Disclosure  17 List the states with which a copy of this Form 990 is required to be filed ▶ ATTACHMENT 3  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3 available for public inspection. Indicate how you make these available. Check all that apply	12a		
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done		Х	
<ul> <li>describe in Schedule O how this is done</li> <li>Does the organization have a written whistleblower policy?</li> <li>Does the organization have a written document retention and destruction policy?</li> <li>Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?</li> <li>The organization's CEO, Executive Director, or top management official</li> <li>Other officers or key employees of the organization</li> <li>If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)</li> <li>Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?</li> <li>If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?</li> <li>Section C. Disclosure</li> <li>List the states with which a copy of this Form 990 is required to be filed ► ATTACHMENT 3</li> <li>Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3 available for public inspection. Indicate how you make these available. Check all that apply</li> </ul>	12b		<del> </del>
<ul> <li>Does the organization have a written whistleblower policy?</li></ul>		Х	
<ul> <li>Does the organization have a written document retention and destruction policy?</li></ul>	12c	X	<del> </del>
<ul> <li>Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?</li> <li>The organization's CEO, Executive Director, or top management official</li></ul>	13	X	├
a The organization's CEO, Executive Director, or top management official	14	<u> </u>	<del>├</del>
a The organization's CEO, Executive Director, or top management official			
b Other officers or key employees of the organization	_		
If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)  16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	15a	<u> </u>	<del>                                     </del>
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b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16-	Ì	x
the organization's exempt status with respect to such arrangements?	16a		$\vdash$
the organization's exempt status with respect to such arrangements?			
<ul> <li>Section C. Disclosure</li> <li>List the states with which a copy of this Form 990 is required to be filed ► ATTACHMENT 3</li> <li>Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3 available for public inspection. Indicate how you make these available. Check all that apply</li> </ul>	16h		$\vdash$
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Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3 available for public inspection. Indicate how you make these available. Check all that apply		-	
available for public inspection. Indicate how you make these available. Check all that apply			
	s only)	,	
Own website X Another's website X Upon request			
19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of inte	rest		
policy, and financial statements available to the public			
State the name, physical address, and telephone number of the person who possesses the books and records of organization ► ERIC FENCL 1954 INNERBELT BUSINESS CENTER DRIVE ST. LOUIS, MO 6 314-423-8000	he 3114		

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

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

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

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

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

(A)	(B)	_		(0				(D)	(E)	(F)
Name and Title	Average hours per week	ें Individual trustee P or director	institutional trustee	Officer	a Key employee	ল Highest compensated ক 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
MAXINE CLARK DIRECTOR EMERITUS	0.00	х					-	0.	719,874.	(
TINA KLOCKE PRESIDENT	1.00	x		х				0.	317,713.	(
DARLENE ELDER SECRETARY	0.00	х		Х				0.	221,022	
PAUL BUNDONIS DIRECTOR	0.00	х						0.	247,562	
DAVE FINNEGAN VICE PRESIDENT	0.00	Х		х				0 .	283,541	
NANCY SCHWARTZ DIRECTOR	0.00	х				_		0.	141,044	
ERIC FENCL TREASURER	1.00	Х		х				0.	362,233	
JOHN HAUGH DIRECTOR	0.00	Х						0	382,297	
			ļ			ļ	ļ.,			
		<u>L</u> .		_						

Part VII Section A. Officers, Directors, Tru		;y <u> </u>	ipic			anu i	ng			53 (COI			
` (A) Name and title	(B)	D			C)		-1. 3	(D)	(E)			(F)	_
Name and tille	Average hours per		_		_	thatap <sub>l</sub>		Reportable compensation	Reportable compensation			imated ount o	
	week	호호	nst i	Officer	ey	ā ģ	Former	from	from related			ther	•
		re du	<u>E</u>	ğ	E S	loye	Ę	the	organization		comp		ion
		Individual truste or director	nai		Key employee	i g		organization	(W-2/1099-MI	SC)		m the	
		ustee	Institutional trustee		8	वि		(W-2/1099-MISC)			_	nızatıd relate	
	:	•	ê			Highest compensated employee						nizatio	
			<u> </u>	_	-								
	·												
		-											
<del></del>		-			ļ	<del> </del>	_						
		<b> </b>					-				<del></del>		
			_										
					<b>†</b>								
		-			$\vdash$		-	<del></del>		+	—		
									0.685				
1b Total						<u></u>	<b>&gt;</b>	0	1	286			0
2 Total number of individuals (including but not reportable compensation from the organizatio	limited to t		liste	d a	bov	e) wh	o re	eceived more than	\$100,000 in				
	· · · · ·						•					Yes	No
3 Did the organization list any former office employee on line 1a? If "Yes," complete Sched	er, direct	or or	tru	uste	e,	key e	emp	oloyee, or highes	t compensate	ed			х
											3		$\stackrel{\wedge}{\vdash}$
4 For any individual listed on line 1a, is the													
the organization and related organizations individual											4	х	
5 Did any person listed on line 1a receiv	e or acci	rue c	omp	oen:	satio	on fr	om	any unrelated of	rganization f	or	4		
services rendered to the organization? If "Yes," Section B. Independent Contractors	'complete	Sched	lule	J fo	r su	ch pe	rsoi	n	<u> </u>		5		X
1 Complete this table for your five highest	compensa	ted ir	nder	nen(	den	t con	trac	ctors that receive	d more than	\$100	000	of	
compensation from the organization										<b>—</b>			
(A) Name and business add	ress							(B) Description of se	rvices	Co	(C) mpens	ation	
NONE													
	,						+	<del></del>					
							$\downarrow$						
											<del></del>		
2 Total number of independent contractors (if more than \$100,000 in compensation from the	ncluding b ie organiza	ut no tion 1	t lin ►	nıte	d to	tho:	se I	listed above) who	received				
			-		_			· · · · · · · · · · · · · · · · · · ·				000	/2000

Par	t VIII	Statement of Revenue		33-1007188		<del></del>
		The second secon	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a b c d	Federated campaigns 1a  Membership dues 1b  Fundraising events 1c  Related organizations 1d  Government grants (contributions) 1e	જીવા કુંદ્ર કું કું કું કું કું કું કું કું કું કું	egyddiraeth e gent fe		
Contributi and other	f g	All other contributions, gifts, grants, and similar amounts not included above . 1f 962,317  Noncash contributions included in lines 1a-1f \$				
Program Service Revenue	2a b	Total. Add lines 1a-1f	962,317.			
ogram Servi	c d e f	All other program service revenue				
Pre	g 3	Total. Add lines 2a-2f ▶  Investment income (including dividends, interest, and other similar amounts) . ATTACHMENT 4 ▶	1,516.			
	4 5	Royalties · · · · · · · · · · · · · · · · · · ·	0. 0.			
	6a b c d	Gross Rents	0	-		
	7a b	Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses				
nue	c d 8a	Gain or (loss)	0			
Other Revenue	b	events (not including \$ of contributions reported on line 1c)  See Part IV, line 18 a  Less direct expenses b				
ō	9a	Net income or (loss) from fundraising events ▶  Gross income from gaming activities.  See Part IV, line 19	0			
	10a		O	建筑工业体制建筑。		
	b c	returns and allowances	0			
	11a b c					
	d e 12	All other revenue	963,833			

# Part IX Statement of Functional Expenses

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

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

Oo not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Grants and other assistance to governments and				
organizations in the U.S. See Part IV, line 21	827,179.	827,179.		
Grants and other assistance to individuals in			1	-
the U.S. See Part IV, line 22	0.			
Grants and other assistance to governments,			J	
organizations, and individuals outside the				
US See Part IV, lines 15 and 16	20,219.	20,219.		
Benefits paid to or for members	0.			
Compensation of current officers, directors,				
trustees, and key employees	0.			
Compensation not included above, to disqualified				
persons (as defined under section 4958(f)(1)) and				
persons described in section 4958(c)(3)(B)	0.1			
	0.1			<del></del>
Other salaries and wages	· · · · · · · · · · · · · · · · · · ·			
Pension plan contributions (include section 401(k)	_ 1			
and section 403(b) employer contributions)  Other employee benefits	0.			
Other employee benefits				
Payroll taxes	0.			
Fees for services (non-employees)				
a Management	0.			
<b>b</b> Legal	600.		600.	
c Accounting	8,200.	,	8,200.	
d Lobbying	0.			
e Professional fundraising services. See Part IV, line 17	0.			
f Investment management fees	0.			
g Other	0.			
Advertising and promotion	0.			
3 Office expenses	1,241.		1,241.	
Information technology	0.			
5 Royalties	0.			
6 Occupancy	0.			
7 Travel	484.		484.	,
B Payments of travel or entertainment expenses				<del>-</del>
for any federal, state, or local public officials	0.			
· · · · · · · · · · · · · · · · · · ·	188.		188.	
O Conferences, conventions, and meetings	0.			
Interest	0.			
Payments to affiliates	0.			
Depreciation, depletion, and amortization	0.			·
Insurance	U.			
Other expenses Itemize expenses not		ł		
covered above (Expenses grouped together				
and labeled miscellaneous may not exceed				
5% of total expenses shown on line 25 below )				
a STATE REGISTRATIONS	3,542.		3,542.	
b OUTSIDE SERVICES	14,449.	2,400.	12,049.	
c DUES AND SUBSCRIPTIONS	1,650.		1,650.	
d				
e				
f All other expenses				·
Total functional expenses. Add lines 1 through 24f	877,752.	849,798.	27,954.	
6 Joint Costs. Check here > If following				
SOP 98-2 Complete this line only if the				
organization reported in column (B) joint costs				
from a combined educational campaign and fundraising solicitation		ŀ	İ	

Par	t X	Balance Sheet			
	`		(A) Beginning of year		( <b>B</b> ) End of year
1	1	Cash - non-interest-bearing	0.	1	0.
	2	Savings and temporary cash investments	272,227.	2	356,583.
	3	Pledges and grants receivable, net	118,848.	3	631,619.
l	4	Accounts receivable, net		4	
ŀ	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II of			
İ		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	
Assets	7	Notes and loans receivable, net		7	
SS	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or  10a	······································		
		other basis Complete Part VI of Schedule D			
	b	Less accumulated depreciation	j	10c	
	11	Investments - publicly traded securities		11	
- 1	12	Investments - other securities See Part IV, line 11		12	
- 1	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	<del>- · · · · · · · · · · · · · · · · · · ·</del>
	16		391,075.		988,202.
	17	Total assets. Add lines 1 through 15 (must equal line 34)	331,073.	17	300,202.
i i	18		192,406.		696,345.
- 1	19	Grants payable	132,400.	19	0,00,040.
	20	Deferred revenue		20	<del></del>
	21	Tax-exempt bond liabilities		21	<del></del>
0	22	Escrow or custodial account liability. Complete Part IV of Schedule D		21	<del></del>
<b>.</b>	22	Payables to current and former officers, directors, trustees, key			
<u> </u>		employees, highest compensated employees, and disqualified			
	••	persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
1	24	Unsecured notes and loans payable to unrelated third parties		24	7 107
	25	Other liabilities Complete Part X of Schedule D		25	7,107.
$\rightarrow$	26	Total liabilities. Add lines 17 through 25	192,406.	26	703,452.
Se Se		Organizations that follow SFAS 117, check here ▶ X and complete lines 27 through 29, and lines 33 and 34.			
<u>اي</u>	27	Unrestricted net assets	52,887.	27	151,371.
32	28	Temporarily restricted net assets	145,782.	28	133,379.
ā	29	Permanently restricted net assets		29	
or Fund Balances		Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
Se	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
97	32	Retained earnings, endowment, accumulated income, or other funds		32	
<u>ē</u>	33	Total net assets or fund balances	198,669.		284,750.
	34	Total liabilities and net assets/fund balances	391,075.		988,202.
	<del></del>	Total navinties and het assets/fund balances	391,073.	34	5 900,202.

Form **990** (2009)

	rt XI Financial Statements and Reporting		Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other		1.00	-
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	Х	
b	Were the organization's financial statements audited by an independent accountant?	2b	Х	
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?	2 c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O			1
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were	Î		
	issued on a consolidated basis, separate basis, or both			
	X Separate basis Consolidated basis Both consolidated and separate basis			
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		İ	İ
	the Single Audit Act and OMB Circular A-133?	3 a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3 b		
		Form	990	(2009

#### SCHEDULE A (Form 990 or 990-EZ)

# **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.

OMB No 1545-0047
2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

BUILD-A-BEAR WORKSHOP FOUNDATION INC

Employer identification number

				NDATION, INC.						33-10	0/100
Pa				<b>ty Status</b> (All organi						tions	
The	orga	nization is no	t a private found	ation because it is: (F	or lines 1 t	hrough 11,	check onl	y one box	()		
1		A church, co	nvention of chur	ches, or association o	of churches	described	ın sectior	170(b)(	1)(A)(i).		
2	$\sqcup$	A school des	scribed in <b>sectio</b>	n 170(b)(1)(A)(ii). (Att	ach Schedi	ule E)					
3		A hospital or	r a cooperative h	nospital service organi	zation desc	ribed in sec	tion 170	(b)(1)(A)(	iii).		
4		A medical r	esearch organiz	ation operated in coi	njunction v	vith a hosp	oital desc	cribed in	section	170(b)(1)	(A)(iii). Enter the
		hospital's na	ime, city, and sta	te							
5		An organiza	ition operated fo	r the benefit of a coll	ege or uni	versity owi	ned or or	perated b	y a gove	rnmental	unit described in
			(b)(1)(A)(iv). (Co		•	•	•				
6				ernment or governme	ntal unit de	scribed in s	ection 17	70(b)(1)(A	A)(v).		
7	X		_	ly receives a substant						or from t	he general public
				1)(A)(vi). (Complete P							general promi
8				in section 170(b)(1)(	•	mplete Part	ШУ				
9			-	ly receives (1) more t			-	n contrib	utions. m	embersh	p fees, and gross
-		_		ted to its exempt fund							· -
				nent income and unr		-					
			-	after June 30, 1975				•		· · · · · · · · · · · · · · · · · · ·	
10			=	nd operated exclusive					•		
11	H	-	=	and operated exclusi	•		•			ns of or	to carry out the
	لـــا	-	=	ublicly supported orga	-						-
				at describes the type o					-	-	
		a Typ	_	Type II c		e III - Func		•			pe III - Other
e			<u></u>	rtify that the organiz			-	-	rectly by		•
			=	on managers and oth				-			•
			section 509(a)(				, a.a				
f				-, La written determina	tion from t	he IRS tha	it it is a	Type I T	voe II o	r Type III	supporting
·			n, check this box					.,,,, .	) PO O	, , , ,	
g	1	•	•	the organization acce	 nted anv o	 ift or contri	 hution fro	 m anv of	the		
2	,	following pe		ino organization acco	pica any g	01 0011111					
				or indirectly controls	either ald	one or tog	ether wit	h nerson	s describ	ned in (ii)	Yes No
				erning body of the supp			J	po.oo	0 4000710	()	11g(l) X
			-	erson described in (i) a	-						11g(ii) X
				of a person described		above?					11g(iii) X
ŀ			_	ation about the suppo		•	• • • • •			• • • • • •	
		e of supported	(ii) EIN	(iii) Type of organization			(v) Did v	ou notify	(vi) i	s the	(vii) Amount of
٠,		anization	(,	(described on lines 1-9	in col (I) lis	sted in your	the organ	nization in	organizat	tion in col	support
				above or IRC section (see instructions))	governing	document?		of your port?		zed in the l S?	
				(000 11100 0010110))	Yes	No	Yes	No	Yes	No	
					I	I					
											<del> </del>
				-			<del></del>	<del>                                     </del>			
		······································					ļ	L			
						_	<u> </u>				
Tot	al										

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

Schedule A (Form 990 or 990-EZ) 2009

Par	Support Schedule for Or (Complete only if you chec	ked the box or	line 5, 7, or 8	of Part I.)	J)(I)(A)(IV) al	IG 170(B)(1)(A	)(VI)
Sect	ion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	909,788	819,439	557,278	433,164	449,556	3,169,225
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf		:				
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	909,788.	819,439.	557,278.	433,164	449,556	3,169,225
5	The portion of total contributions by each		A STATE OF THE STA				
	person (other than a governmental unit or	I a la la la la la la la la la la la la l	The said and	*			
	publicly supported organization) included	त्र मुक्तिकार्तिकारी क्षेत्र के का कार्या । सम्बद्धिकारी क्षेत्र के कार्या कार्या के कार्या के कार्या के कार्या के कार्या के कार्या के कार्या के कार्या के					
	on line 1 that exceeds 2% of the amount	in h' griddinfel ken to van in in recent in	A MARCHANE TO THE STATE OF THE				
	shown on line 11, column (f)						1,098,333
6	Public support. Subtract line 5 from line 4			······································			2,070,892
	tion B. Total Support	·	r				
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	909,788.	819,439	557,278	433,164	449,556	3,169,225
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	1,533.	4,208	4,795	4,908	1,517	16,961
		1,3331	1,22	··	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
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			redge stationals to sewings	h · · · · · · · · · · · · · · · · · · ·		3,186,186
12	Gross receipts from related activities, etc. (					12	
13	First five years. If the Form 990 is organization, check this box and stop here	for the organizat	tion's first, secon	d, third, fourth,	or fifth tax ye	ar as a section	501(c)(3)
<u>Sec</u>	tion C. Computation of Public Sup	port Percenta	ge				
14	Public support percentage for 2009 (					14	65.00%
15	Public support percentage from 2008						58.34%
16a	331/3% support test - 2009. If the	-					
	this box and stop here. The organizat			_			
b	331/3% support test - 2008. If the	_					
	check this box and stop here. The org		•	<del>-</del>			
17a	10%-facts-and-circumstances test -	-					
	or more, and if the organization m					•	•
	Part IV how the organization meets			_	•	•	upported
b	organization	2008. If the or	ganization did n	ot check a box	on line 13, 16	a, 16b, or 17a,	
	Explain in Part IV how the organizat						-
18	supported organization Private foundation. If the organization						▶□
	instructions						
						chedule A (Form 9	

# Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I)

Sec	tion A. Public Support	<del> </del>		<u></u>			
	alendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and		, ,	, ,	, ,		
-	membership fees received (Do not include						
	any "unusual grants ")		ļ				
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
•	unrelated trade or business under section 513						
4	Tax revenues levied for the organization's						
•	benefit and either paid to or expended on						
	its behalf						
5	The value of services or facilities						
3	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
	i						
/ 8	Amounts included on lines 1, 2, and 3 received from disqualified persons			•			
ь	Amounts included on lines 2 and 3						
	received from other than disqualified persons that exceed the greater of						
	\$5,000 or 1% of the amount on line 13						
	for the year	<del>                                     </del>	<del>  -</del>				<del></del>
С 8	Add lines 7a and 7b Public support (Subtract line 7c from				<u> </u>		
Ü	line 6)						
Sec	tion B. Total Support	<u> </u>	·	L	l	1	<u> </u>
	alendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Amounts from line 6,	(4,2000	(2, 2000	(0, 200)	(4,200	(0, 2000	(,, , , , , , , , , , , , , , , , , , ,
9 10a	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar sources						
h	Unrelated business taxable income (less		<del> </del>				
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
_	Add lines 10a and 10b						
11							
• •	activities not included in line 10b,	1					
	whether or not the business is regularly						
	carried on		<del> </del>				
12	Other income Do not include gain or loss from the sale of capital assets	1					
	(Explain in Part IV)			1			
13			<b>†</b>		1		<del>                                     </del>
	and 12)	1					
14	First five years. If the Form 990 is for		on's first second	third fourth or	fifth tay year :	as a section 501	(c)(3)
14	organization, check this box and stop here	-			•		
500	ction C. Computation of Public Su			<u> </u>	• • • • • • • •	<u> </u>	
15	Public support percentage for 2009 (line 8			mn (f))		15	<u></u> %
16	Public support percentage from 2008 Sch					16	<u>~~~~</u> %
	ction D. Computation of Investme					1	
17	Investment income percentage for 2009 (I			13 column (ft)		17	%
18	Investment income percentage from 2008					18	<u>%</u>
	33 1/3% support tests - 2009. If the o						
138	17 is not more than 33 1/3%, check t	-					
<b>J.</b>	33 1/3% support tests - 2008. If the org			•			· · · · · · · · · · · · · · · · · · ·
C	line 18 is not more than 331/3%, check	-					. —
20	Private foundation. If the organization			-			. —
ZO JSA	ate roundation. If the organization	ara not check	a box on line	17, 18a, 01 191			990 or 990-EZ) 2009

Page 4

Part IV Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12 Provide any other additional information. See instructions

# SCHEDULE D (Form 990)

# **Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

BUILD-A-BEAR WORKSHOP FOUNDATION, INC.

Employer identification number 33-1007188

Pai	Organizations Maintaining Donor Advis		imilar Funds o	r Accounts. Complete if
		(a) Donor advise	d funds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor ad	visors in writing that the	assets held in d	onor advised
	funds are the organization's property, subject to the			
6	Did the organization inform all grantees, donors, an		-	
-	used only for charitable purposes and not for the be			
	purpose conferring impermissible private benefit?			
Pa	t II Conservation Easements. Complete if I	the organization answ	ered "Yes" to F	form 990 Part IV line 7
1	Purpose(s) of conservation easements held by the			
	Preservation of land for public use (e.g., recrea	· · · · · · · · · · · · · · · · · · ·	<b></b>	of an historically important land area
	Protection of natural habitat	Zilon or picacono,		of a certified historic structure
	Preservation of open space	_		or a dorting motorio di dotalo
2	Complete lines 2a through 2d if the organization he	ld a qualified conservat	ion contribution ii	n the form of a conservation
	easement on the last day of the tax year	.a a quaoa oo;,oo; va.		a do tom or a concertation
	•			Held at the End of the Year
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation easements			
c	Number of conservation easements on a certified h			1 1
d	Number of conservation easements included in (c)			
3	Number of conservation easements modified, trans			
	the tax year ▶		,	3
4	Number of states where property subject to conser	vation easement is locat	ed ▶	
5	Does the organization have a written policy regarding			
	violations, and enforcement of the conservation eas			
6	Staff and volunteer hours devoted to monitoring, ins			
	<b>&gt;</b>	5,		
7	Amount of expenses incurred in monitoring, inspect	ing, and enforcing cons	ervation easeme	ents during the year
	<b>▶</b> \$			• ,
8	Does each conservation easement reported on line	2(d) above satisfy the	requirements of se	ection
	170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)?			
9	In Part XIV, describe how the organization reports of			
	balance sheet, and include, if applicable, the text of	f the footnote to the ord	anization's finan	cial statements that describes
	the organization's accounting for conservation ease	-	•	
Pa	rt III Organizations Maintaining Collections Complete if the organization answered			er Similar Assets.
1 a	If the organization elected, as permitted under SF art, historical treasures, or other similar assets heliprovide, in Part XIV, the text of the footnote to its fin	d for public exhibition	education or res	search in furtherance of nublic service.
b	If the organization elected, as permitted under SF historical treasures, or other similar assets held f provide the following amounts relating to these item	or public exhibition, ens.	ducation, or reso	earch in furtherance of public service,
	(i) Revenues included in Form 990, Part VIII, line 1			
	(ii) Assets included in Form 990, Part X			<b>&gt;</b> \$
2	If the organization received or held works of art			
	following amounts required to be reported under SF			• • • • • • • • • • • • • • • • • • • •
а	Revenues included in Form 990, Part VIII, line 1			<b>&gt;</b> \$
b	Assets included in Form 990, Part X			

Par	t III Organizations Maintaini	ng Collections	of Art, Histo	rical Treas	ures, c	or Oth	er Similar A	Assets (d	continued)	
•	•							_		
З.	Using the organization's acquisition		d other records	, check any	of the	follow	ng that are a	significar	nt use of its	
	collection items (check all that appl	ly)								
а	Public exhibition		d	Loan	or exch	ange p	rograms			
b	Scholarly research		е	Other						
C	Preservation for future ge	nerations	<u>-</u>							
4	Provide a description of the organization	zation's collectio	ns and explain	how they fu	rther th	e orga	ınızatıon's exe	empt pur	pose in	
	Part XIV									
5	During the year, did the organization	on solicit or rece	ive donations of	of art, histor	ical trea	sures,	or other simil	ar		
	assets to be sold to raise funds rati	her than to be m	aintained as pa	art of the or	ganızatı	on's co	ollection?	[	Yes	No
Par	t IV Escrow and Custodial A	rrangements.	Complete if t	he organiz	ation a	nswer	ed "Yes" to	Form 99	0. Part	
	IV, line 9, or reported an	amount on Fo	orm 990, Part	X, line 21						
					·					
1 a	Is the organization an agent, truste	e, custodian or o	other intermedi	ary for cont	ribution	s or ot	her assets no	ot		
	included on Form 990, Part X?								Yes	No
b	If "Yes," explain the arrangement in									
				J		Т	A	mount		
С	Beginning balance				4	_				
	Additions during the year						··			
	Distributions during the year									
f	Ending balance						<del></del>			
2 a	Did the organization include an am							<u></u>	Yes	No
	If "Yes," explain the arrangement in		00, 1 01(7, 1110					[		
Par			ization answe	red "Ves"	to Forn	n 000	Part IV line	10		
, ai	Endownioner ands. Con	(a) Current Year			wo years		(d) Three ye		(e) Four yea	ars hack
1 a	Beginning of year balance	(a) carron roas	(4) 1 1101 ye	(0)	- years	DOCK	(d) Times yes	ars back	(6) 1 001 900	TO DECK
b	Contributions								<del> </del>	
_	Net investment earnings, gains,			-			<del> </del>	<del></del>		
•	and losses			1						
d	Grants or scholarships			<del></del>			-	<del></del>	-	
e	Other expenditures for facilities .									
٠	and programs									
f	Administrative expenses									
	End of year balance							·····	ļ	
g 2	·		<u> </u>				<u> </u>		<u> </u>	
_	Provide the estimated percentage	-								
a	Board designated or quasi-endown		%							
	Permanent endowment ►	<u></u> %								
	Term endowment ▶	_ ′ •	of the organiza	46-4	- 6-1-1			41		
Ja	Are there endowment funds not in	the possession	of the organiza	ation that ar	e neia a	ano ao	ministered for	tne	[ <del>]</del>	<del></del>
	organization by								Ye	s No
	(i) unrelated organizations								3a(i)	
h	(ii) related organizations								3a(ii)	<u> </u>
	If "Yes" to 3a(II), are the related org		•			• • •			3 b	
4	Describe in Part XIV the intended i									
Par	t VI Investments - Land, Buil	ldings, and Eq	uipment. See	Form 990	), Part	X, line	10.	··		
	Description of investment		ost or other basis (investment)	(b) Cost of basis (c			Accumulated fepreciation	(	d) Book value	
1 a	Land						-			
b	Buildings									
c	Leasehold improvements			,		1				
d	Equipment	<b></b>	· · · · ·							
е	Other			-						
	I. Add lines 1a through 1e (Column		Form 990, Part	X, column (	B), line	10(c) )			<del></del>	<del></del>
			,	//	,,	- (-//		0-1	Into D /5 /	2001 2000

Part VII	Investments - Other Securities. See F	orm 990, Part X, line	e 12	
•	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market	
Financial d	erivatives			
Closely-he	ld equity interests			
		-		
		-		
			1 1	
Total, (Colum	nn (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII	<u> </u>	orm 990 Part X line	e 13	
T GITE VIII	(a) Description of investment type	(b) Book value	(c) Method of valuation	1
	(a) Description of investment type	(b) Book value	Cost or end-of-year market	
		<del>                                     </del>		
<del></del>		<del>                                     </del>		
-				
	<del> </del>			
	· · · · · · · · · · · · · · · · · · ·			<del>.</del>
Total (Calus	nn (b) must equal Form 990. Part X. col (B) line 13 )			<u>-</u>
Part IX	onn (b) must equal Form 990, Part X, col (B) line 13)  Other Assets. See Form 990, Part X, I	ino 15		
Partix		Description		(b) Book value
	(4)	Description		(b) Book value
				· · · · · · · · · · · · · · · · · · ·
		<del> </del>		
-				
	mn (b) must equal Form 990, Part X, col (B) line 15)		<u></u>	
Part X	Other Liabilities. See Form 990, Part		<del>1 , , , , , , , , , , , , , , , , , , ,</del>	<del></del>
1.	(a) Description of liability	(b) Amount	A STATE OF THE STA	
	come taxes	7 107	4 .	
DUE TO	RELATED PARTY	7,107	4	
			and the state of t	
			1	
			]	
			]	
			1	
Total. (Colu	mn (b) must equal Form 990, Part X, col (B) line 25)	7,107	]	
			A	

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

Part	Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statem	ont		rage <del>v</del>
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	, 	963,833.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		877,752.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	<del> </del>	86,081.
4	Not uproduzed going (legecs) on investments		<del> </del>	
=	Net unrealized gains (losses) on investments	4		
5	Donated services and use of facilities	5		
6	Investment expenses	<u>6</u>		
7	Prior period adjustments	7		<del></del>
8	Other (Describe in Part XIV)	8		<del></del>
9	Total adjustments (net) Add lines 4 through 8	9	<u> </u>	06.001
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		L	86,081.
`	Reconciliation of Revenue per Audited Financial Statements With Revenue per Ret		<del></del>	002 214
1	Total revenue, gains, and other support per audited financial statements	·	1	993,214.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains on investments	$\dashv$		
b	Donated services and use of facilities	1		
С	Recoveries of prior year grants 2c	_		
d	Other (Describe in Part XIV)			
е	Add lines 2a through 2d	.  _	2 e	29,381.
3	Subtract line 2e from line 1	· L	3	963,833.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a			
b	Other (Describe in Part XIV )			
C	Add lines 4a and 4b	. L	4 c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	963,833.
Part	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per R	etur	n	
1	Total expenses and losses per audited financial statements		1	907,133.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	•		
а	Donated services and use of facilities 29,38	1.		
b	Prior year adjustments 2b			
С	Other losses 2c			
d	Other (Describe in Part XIV)			
е	Add lines 2a through 2d		2e	29,381.
3	Subtract line 2e from line 1		3	877 <b>,</b> 752.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIV.)		ŀ	
c	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	· :  -	5	877,752.
Part			<del> </del>	
Comp	lete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Pa b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b A art to provide any additional information			)

Part XIV Supplemental Information (continued)

## Schedule F (Form 990)

Part I

# Statement of Activities Outside the United States

General Information on Activities Outside the United States, Complete if the organization answered

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

➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

BUILD-A-BEAR WORKSHOP FOUNDATION, INC.

Inspection Employer identification number 33-1007188

	"Yes" to Form 9	90, Part IV, Iii	ne 14b.		proto ii tiro organizat	
1	For grantmakers. Does assistance, the grants or assistance?	eligibility for t	the grants or a	assistance, and the selec	tion criteria used to awa	
2	For grantmakers. Describ United States		-			s outside the
3	Activities per Region (Us	e Schedule F-	1 (Form 990) if	additional space is needed	d)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures in region
NORT	H AMERICA			GRANTMAKING	N/A	20,219
		· · · · · · · · · · · · · · · · · · ·				<u> </u>
		,,				
		·				
_						
			:			
Tot	als					20 219

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Schedule F (Form 990) 2009

JSA 9E1274 2 000

Schedule	33-1007188	Page 2
Part II	Part III Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990,	990,
	000 30 and the second for the second	>
	Part IV. line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000.	۲ ;
	bedress of a control of the state of the sta	

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) method or valuation (book, FMV, appraisal, other)
Thy, 4, 1								
Polinia.	,							
Maring								
**************************************								
र्वे इस्ट्रेट <b>स्ट्रे</b> ट						:		
1, ek2-								
, •								
							- 31-2	
• Enter total number of received persons lieted above that are recognized as charities by the foreign country recognized as fax-exempt	t avode betall acotes	o se periodoca ese ted	harities hy the	foreign country rec	oonized as fax	exempt		

2 Enter total number of recipient organizations listed above that are recognized as charities by the roreign counity, recognized as ιακ-εκεί by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter.

3 Enter total number of other organizations or entities ,

JSA 9E1275 1 000

Schedule F (Form 990) 2009

Page 3

33-1007188

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed. Schedule F (Form 990) 2009

Part III

Schedule F (Form 990) 2009 (h) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recipients (b) Region (a) Type of grant or assistance

SCHEDULEI (Form 990) Department of the Treasury Name of the organization Internal Revenue Service

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

OMB No 1545-0047 

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

ployer identification number	ployer iden
Inspect	
Open to P	
200	

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and

General Information on Grants and Assistance

Part I

BUILD-A-BEAR WORKSHOP FOUNDATION, INC.

33-1007188

×

Schedule I (Form 990) 2009				is for Form 990.	the Instruction	Act Notice, see	For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.
					it organizations	and governmen	<ul> <li>Enter total number of section 501(c)(3) and government org</li> <li>Enter total number of other organizations</li> </ul>
CHARITABLE GRANTS	NONE	NONE		82,800.		VARIOUS	MISC OTHER
CHILDREN'S PROGRAM	NONE	NONE		393, 535.		20-3021444	MARINE TOYS FOR TOTS FOUNDATION 715 BROADWAY ST QUANTICO, VA 22134
JUVENILE DIABETES RE	NONE	NONE		208,945.		23-1907729	JUVENILE DIABETES RESEARCH FOUNDATION INTL. 120 WALL ST NEW YORK, NY 10005
CHARITABLE GRANTS	NONE	NONE		98,528		VARIOUS	OTHER < \$5,000
AUSTISM AWARENESS	NONE	NONE		40,871		20-2329938	AUTISM SPEAKS 1060 STATE RD 2ND EL PRINCETON, NJ 08540
of (h) Purpose of grant	(g) Description of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(e) Amount of non-cash assistance		(c) IRC section if applicable	(b) EIN	1 (a) Name and address of organization or government
1 "Yes" to than \$5,000. Use	ation answered eceived more t	and Organizations in the United States. Complete if the organization answered "Yes" to treceived more than \$5,000. Check this box if no one recipient received more than \$5,000. Use space is needed	ns in the United States. Com than \$5,000. Check this box	nizations in the Un more than \$5,000 eeded		to Governme any recipient 990) if additio	Part II Grants and Other Assistance to Governments Form 990, Part IV, line 21, for any recipient tha Part IV and Schedule I-1 (Form 990) if additional
es			e United States	e of grant funds in th	onitoring the us	rants or assista ocedures for m	the selection criteria used to award the grants or assistance?
A Yes					nce	rants or assista	the selection criteria used to award the c

Schedule I (	Schedule   Form 990) 2009	Page 2
Part III	Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22	22
	Use Part IV and Schedule I-1 (Form 990) if additional space is needed.	•

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Part IV Supplemental Information. Complete this par		to provide the information required in Part I, line 2,	ormation required		and any other additional information.
US GRANTS	             		                 		
I, PART I, LINE					
S APPLY B	- 4 - 4	CONTRIBUTIONS CO	COMMITTEE MEETS	S TO	
E APPLICATION	OE D		APPROVE THE PF	PROPOSED	
TER APPROVAL FROM THE	ARD OF	ORS,	GRANT IS	GIVEN	
	IN THE U.S	 	                 		
,	1 1 1 1 1 1 1 1				
	! ! ! ! ! ! ! !				
					Schedule I (Form 990) 2009

## **SCHEDULE J** (Form 990)

Department of the Treasury Internal Revenue Service

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

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 Inspection

Name of the organization

BUILD-A-BEAR WORKSHOP FOUNDATION, INC.

Employer Identification number 33-1007188

Part	Questions Regarding Compensation					
			Yes	No		
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form					
	990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items					
	First-class or charter travel Housing allowance or residence for personal use	1				
	Travel for companions Payments for business use of personal residence					
	Tax indemnification and gross-up payments Health or social club dues or initiation fees	1		1		
	Discretionary spending account  Personal services (e.g., maid, chauffeur, chef)			1		
<b>h</b>	If any of the haves on line to in checked, did the organization follows a written nation recording narrows			l		
U	If any of the boxes on line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			l		
	explain	1b		<u> </u>		
2	Uid the organization require substantiation prior to reimbursing or allowing expenses incurred by all					
	officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?					
	3 Indicate which, if any, of the following the organization uses to establish the compensation of the					
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					
	The solution communities with the solution of					
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					
_	organization or a related organization			X		
a	Receive a severance payment or change-of-control payment?	4a	X	_^		
D	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4 b	X			
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		<b></b>		
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III					
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.					
5	5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any					
•	compensation contingent on the revenues of					
а	a The organization?					
b						
	b Any related organization?					
6						
	compensation contingent on the net earnings of					
а	a The organization?					
b						
	b Any related organization?  If "Yes" to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed	1				
	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 initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe					
	ın Part III	8		Х		
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in					
	Regulations section 53 4958-6(c)?	9				

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

Schedule J (Form 990) 2009

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

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

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

		(B) Breakdown of W-2	of W-2 and/or 1099-MISC compensation	Compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name		(I) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
	€	0	0		0		0	0.
MAXINE CLARK	: 8	.000,009	0	119,874.	2,475.	1,947.	724,296.	.0
	8	0		1	0	0	0	
TINA KLOCKE	€ €	285,000.	0	32,713.	2,566.	1,335.	321,614.	0
	ε	0		0	.0	.0	0	0
DARLENE ELDER	: 8	200,000.	0	21,022.	1,800.	1,341.	224,163.	
	ε	0	0		0.	0	0	
PAUL BUNDONIS	€	217,720.	12,824.	17,018.	2,017.	1,078.	250,657.	
	ε	0.	0	0	0	0	0	
DAVE FINNEGAN	€	256,731.	0	26,810.	2,310.	1,151.	287,002.	
	ε	0.	0	0	0	0	0	0.
ERIC FENCL	€	270,462.	0	91,771.	296.	1,276.	363,805.	
	€	0	0	0	0	0	0	0
JOHN HAUGH	<b>E</b>	269, 231.	.000,09	63,066.	0.	929.	383,226.	0
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	(II)							
							Sche	Schedule J (Form 990) 2009

33-1007188 Page 3
Part III Supplemental Information
Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.
STOCK OPTIONS
FORM 990, SCHEDULE J, LINE 4C
OFFICERS AND DIRECTORS OF BUILD-A-BEAR WORKSHOP FOUNDATION, INC. ARE
EMPLOYEES OF THE RELATED ORGANIZATION, BUILD-A-BEAR WORKSHOP, INC. AND
PARTICIPATE IN A STOCK OPTION PROGRAM.
Schedule J (Form 990) 2009

#### SCHEDULE O (Form 990)

# Supplemental Information to Form 990

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

► Attach to Form 990.

2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

BUILD-A-BEAR WORKSHOP FOUNDATION, INC.

Employer identification number 33-1007188

ATTACHMENT 1

OTHER PROGRAM SERVICES

FORM 990, PART III, LINE 4D

MISCELLANEOUS GRANTS (LESS THAN \$5,000) WERE PAID TO CHARITABLE
ORGANIZATIONS THAT SUPPORT OUR MISSION OF DOMESTIC ANIMAL PROGRAMS;
ENDANGERED SPECIES PROGRAMS; DISASTER RELIEF PROGRAMS AND ENVIRONMENTAL
CONCERNS.

GOVERNING BODY AND MANAGEMENT

FORM 990, PART VI, SECTION A, LINE 2

BUILD-A-BEAR WORKSHOP FOUNDATION, INC.'S OFFICERS AND DIRECTORS ARE

EMPLOYEES OF BUILD-A-BEAR WORKSHOP, INC., A RELATED PARTY. BUILD-A-BEAR

WORKSHOP FOUNDATION, INC.'S OFFICERS AND DIRECTORS ARE VOLUNTEERS.

GOVERNING BODY AND MANAGEMENT

FORM 990, PART VI, SECTION B, LINE 11

THE FORM 990 IS REVIEWED BY THE FINANCE COMMITTEE AND IS DISTRIBUTED TO THE BOARD OF DIRECTORS FOR THEIR REVIEW.

GOVERNING BODY AND MANAGEMENT

FORM 990, PART VI, SECTION B, LINE 12C

BUILD-A-BEAR WORKSHOP FOUNDATION, INC. ANNUALLY REQUIRES EACH OFFICER AND DIRECTOR TO COMPLY AND SIGN A WRITTEN CONFLICT OF INTEREST POLICY. IN ADDITION, WE REQUIRE MEMBERS OF THE CONTRIBUTIONS COMMITTEE TO DISCLOSE ANY CONFLICTS PRIOR TO DISCUSSING ANY GRANT REQUESTS. IF THERE IS SUCH A

Name of the organization

BUILD-A-BEAR WORKSHOP FOUNDATION, INC.

Employer identification number

33-1007188

ATTACHMENT 1 (CONT'D)

CONFLICT, THE CONTRIBUTIONS COMMITTEE AND/OR BOARD MEMBER MUST RECUSE THEMSELVES FROM THE DISCUSSION AND APPROVAL OF ANY GRANT.

GOVERNING BODY AND MANAGEMENT

FORM 990, PART VI, SECTION C, LINE 19

BUILD-A-BEAR WORKSHOP FOUNDATION, INC. ANNUALLY POSTS THEIR FORM 990 ON THE RELATED PARTY, BUILD-A-BEAR WORKSHOP, INC'S WEBSITE. WE WILL ALSO PROVIDE COPIES UPON REQUEST. THE DOCUMENTS ARE ALSO AVAILABLE TO BE INSPECTED AT OUR OFFICE.

ATTACHMENT 2

#### FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

BUILD-A-BEAR WORKSHOP FOUNDATION, INC. IS COMMITTED TO IMPROVING AND IMPACTING THE LIVES OF CHILDREN AND FAMILIES BY SUPPORTING PROGRAMS THAT PROVIDE RESEARCH, TREATMENT, AND EDUCATION FOR CHILDREN HEALTH AND WELLNESS CAUSES. THE FOUNDATION ALSO SUPPORTS PROGRAMS WHICH PROMOTE LITERACY AND EDUCATION, THE PRESERVATION OF ENDANGERED ANIMALS AND THEIR HABITATS, DOMESTIC ANIMAL SHELTERS, DISASTER RELIEF AND ENVIRONMENTAL CONCERNS.

ATTACHMENT

#### FORM 990, PART VI, LINE 17 - STATES

AL, AK, AZ, AR, CA, CO, CT, DE,

DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI,

MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA,

RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY

Schedule O (Form 990) 2009				Page 2
Name of the organization BUILD-A-BEAR WORKSHOP FOUNDATION	TNC		Employer identification 33-1007188	number
FORM 990, PART VIII - INVESTMENT	-		ATTACHMENT 4	
TORM 330, PART VIII - INVESTMENT				
	(A) TOTAL	(B) RELATED OR	(C) UNRELATED	(D) EXCLUDED
DESCRIPTION	REVENUE	EXEMPT REVENUE	BUSINESS REV.	REVENUE
INTEREST INCOME	1,516			
TOTALS	1,516			

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Department of the Treasury

Name of the organization

INC.

BUILD-A-BEAR WORKSHOP FOUNDATION,

OMB No 1545-0047

Related Organizations and Unrelated Partnerships

2009	Inspection
------	------------

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36 or 37.
 ► Attach to Form 990.

Employer identification number 33-1007188

Schedule R (Form 990) 2009 (f)
Direct controlling
entity (f) Direct controlling entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) (e)
Public chanty status
(if section 501(c)(3)) (e) End-of-year assets (d) Exempt Code section (d) Total income Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.) (c)
Legal domicile (state
or foreign country) (c)
Legal domicile (state
or foreign country) (b) Primary activity (b) Primary activity For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. (a)
Name, address, and EIN of related organization (a)
Name, address, and EIN of disregarded entity Part II Part I

Yes No Schedule R (Form 990) 2009 (j) . General or managing partner? 0.000.0 ownership Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) (g) Share of end-of-year assets Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) (h) Disproporteme albostors? Yes No ö (f) Share of total income (g) Share of end-of-year assets (e)
Type of entity
(C corp, S corp, (f) Share of total income C CORP (d)
Direct controlling
entity N/A Predominant income (related, unrelated, excluded from tax under sections 512-514) (c)
Legal domicile
(state or
foreign country) 30 (d)
Direct controlling (b) Primary activity RETAIL SALES (c)
Legal
domicile
(state or
foreign LOUIS, MO 63114 43-1883836 (b) Primary activity Name, address, and EiN of related organization 1954 INNERBELT BUSINESS CENTER DRIVE ST BUILD-A-BEAR WORKSHOP, INC Name, address, and EIN of related organization <u>e</u> Part III Part IV

37

Transactions With Related Organizations (Complete of the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36) Part V

;				Yes	ŝ.
Š,	Note. Complete line 1 if any entity is listed in Parts II, III, or IV or this scriedule	-1/2		***	***
_	During the tax year, and the organization engage in any or the romowing transactions with one or more organizations.	•	-		X
æ			: : :	ء ا	×
۵	Gift, grant, or capital contribution to other organization(s)				ľ
U	Gift, arant, or capital contribution from other organization(s)		<u>- </u> :: ::	اد	:  :
7			14	p	×
3			-	•	×
O	Loans or loan guarantees by other organization(s)	•	L_ : :	-	4
•			-		×
-	Sale of assets to other organization(s)				×
6	Purchase of assets from other organization(s)		:	ا د	*
_	Exchange of assets		<u> </u>	E .	1
	l ease of facilities equipment or other assets to other organization(s)		<u>= </u> : :		١
•			<u>, , , , , , , , , , , , , , , , , , , </u>	17,4, 1111	<b>*</b>
-	Lease of facilities, equipment, or other assets from other organization(s)		7) : :	<u> </u>	;;
<u></u>	Performance of services or membership or fundraising solicitations for other organization(s)		<u>*</u> : :	<u> </u>	<u>`</u>
-	Performance of services or membership or fundraising solicitations by other organization(s)		<u>키</u> : :		<u>~</u>
- 8		•	1	1m X	
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=		•		, ",	
c	Reimblirsement paid to other organization for expenses		. : .	•	×
•		•	<u>+</u>	а	×
2					1
5	Other transfer of cash or property to other programmation(s)			9	<u>~</u>
<b>.</b>	Other transfer of cash or property from other organization(s).			_	×
~	is for information on who must complete this line, including covered rela	ships and trans	action threshol	sp	
		(b)	(c)	Par Par	
	organization	type (a-r)	Amount inv	P P	
Ξ	BUILD-A-BEAR WORKSHOP, INC., A RELATED				
5	PARTY, SHARES FACILITIES AND EMPLOYEES ARE				
1					
3	VOLUNTEERS OF BUILD-A-BEAR WORKSHOP				
€	FOUNDATION, INC.				
1					
9					
9				İ	
			Schedule R (Form 990) 2009	066 m.c	50 50 60 70

Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3)	(e) Share of end-of-year assets	(f) Disproportionate allocations?	(g) Code V-UBI amount in box 20 of Schedule K-1	(h) General or managing partner?
			Yes No		Yes No	(Form 1065)	Yes No
							!
						;	_
					<del></del>		
						Schedule R (Form 990) 2009	990) 2009

PAGE 39

FINANCIAL STATEMENTS
WITH
INDEPENDENT AUDITORS' REPORT

**DECEMBER 31, 2009** 

### **TABLE OF CONTENTS**

	<u>Page</u>
Independent Auditors' Report	1
Financial Statements	
Statements of Financial Position	2
Statements of Activities	3
Statements of Cash Flows	5
Notes to Financial Statements	6



### **Independent Auditors' Report**

Board of Directors Build-A-Bear Workshop Foundation, Inc. St. Louis, Missouri

We have audited the accompanying statements of financial position of Build-A-Bear Workshop Foundation, Inc. (a nonprofit foundation) as of December 31, 2009 and 2008, and the related statements of activities and cash flows for the years then ended. These financial statements are the responsibility of the Foundation's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audits to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes consideration of internal control over financial reporting as a basis for designing audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Foundation's internal control over financial reporting. Accordingly, we express no such opinion An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Build-A-Bear Workshop Foundation, Inc. as of December 31, 2009 and 2008, and the changes in its net assets and its cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

Brown Snith Wellace, C. L. C.

August 2, 2010

### **Statements of Financial Position**

December 31, 2009 and 2008

		2009	2008
ASSETS	-		
Cash and cash equivalents	\$	356,583	\$ 272,227
Pledges receivable		631,619	 118,848
TOTAL ASSETS	\$	988,202	\$ 391,075
LIABILITIES AND NET ASSETS			
LIABILITIES			
Beverly Fund	\$	696,345	\$ 192,406
Due to related party		7,107	 <del>-</del>
Total Liabilities		703,452	192,406
NET ASSETS			
Unrestricted		151,371	52,887
Temporarily restricted		133,379	 145,782
Total Net Assets		284,750	 198,669
TOTAL LIABILITIES AND NET ASSETS	\$	988,202	\$ 391,075

## **Statement of Activities**

Year ended December 31, 2009

	Temporarily Unrestricted Restricted			Total		
Support and Revenues:						
Contributions	\$	241,150	\$	-	\$	241,150
Interest income		1,516	16 -			1,516
Children's cancer		-	33,687		33,687	
Health and wellness		-	666,550			666,550
Pet programs		-		-		-
Beverly Fund		-		12,230		12,230
Other programs		-		8,700		8,700
In-kind		29,381		-		29,381
Net assets released from restrictions		733,570		(733,570)		<u>-</u>
Total support and revenues		1,005,617		(12,403)		993,214
Expenses:						
Children's cancer		33,500		-		33,500
Health and wellness		651,070		-		651,070
Literacy and education		-		-		-
Pet programs		-		-		-
Endangered species		-		-		-
Scholarships		20,000		-		20,000
Disaster relief		-		-		-
Beverly Fund		18,100		-		18,100
Other programs		124,728		-		124,728
General and administrative		59,735		-		59,735
Total expenses	907,133 -			907,133		
CHANGE IN NET ASSETS		98,484		(12,403)		86,081
Net assets at beginning of year		52,887		145,782		198,669
Net assets at end of year	\$ 151,371 \$ 133,379 \$ 284,7			284,750		

The accompanying notes are an integral part of these financial statements

### **Statement of Activities**

Year ended December 31, 2008

			Τe	emporarily		
	Ut	nrestricted	R	estricted		Total
Support and Revenues:						
Contributions	\$	161,099	\$	-	\$	161,099
Interest income		4,908		-		4,908
Children's cancer		-	99,947		99,947	
Health and wellness		-		169,691		169,691
Pet programs		-		25		25
Beverly Fund		-	21,355		21,355	
Other programs		-		15,154		15,154
In-kind		53,508		-		53,508
Net assets released from restrictions		337,137		(337,137)		<u>-</u>
Total support and revenues		556,652		(30,965)		525,687
Expenses:						
Children's cancer		109,215		-		109,215
Health and wellness		325,516		-		325,516
Literacy and education		61,520		-		61,520
Pet programs		20,000		-		20,000
Endangered species		2,000		-		2,000
Scholarships		20,000		-		20,000
Disaster relief		16,500		-		16,500
Beverly Fund		26,612		-		26,612
Other programs		59,652		-		59,652
General and administrative		77,958		<u>-</u>		77,958
Total expenses		718,973		-		718,973
CHANGE IN NET ASSETS		(162,321)		(30,965)		(193,286)
Net assets at beginning of year		215,208		176,747		391,955
Net assets at end of year	\$	52,887	\$	145,782	\$	198,669

The accompanying notes are an integral part of these financial statements

## **Statements of Cash Flows**

Years ended December 31, 2009 and 2008

		2009	2008
Cash flows from operating activities:			 
Change in net assets	\$	86,081	\$ (193,286)
Adjustments to reconcile change in net assets			
to net cash provided by (used in) operating activities			
(Increase) decrease in operating assets			
Pledges receivable		(512,771)	(33,602)
Increase (decrease) in operating liabilities			
Contributions payable		503,939	15,651
Due to related party		7,107	 <del>-</del> ,
Net cash provided by (used in)			
operating activities		84,356	 (211,237)
NET INCREASE (DECREASE) IN CASH			
AND CASH EQUIVALENTS		84,356	(211,237)
Cash and cash equivalents at beginning of year		272,227	483,464
Cash and cash equivalents at end of year	_\$_	356,583	\$ 272,227

The accompanying notes are an integral part of these financial statements.

### **Notes to Financial Statements**

December 31, 2009

#### **Note A - Nature of Activities**

Build-A-Bear Workshop Foundation, Inc. (the "Foundation") is committed to improving and impacting the lives of children and families by supporting programs that provide research, treatment, and education for children health and wellness causes. The Foundation also supports programs which promote literacy and education, the preservation of endangered animals and their habitats, domestic animal shelters, disaster relief, and environmental concerns.

In 2004, the Foundation established a scholarship program originally funded with two separate \$100,000 donations by which associates of Build-A-Bear Workshop may apply for up to 20 individual \$1,000 scholarships to be awarded annually.

#### Note B - Summary of Significant Accounting Policies

#### **Basis of Accounting and Presentation**

The financial statements have been prepared on the accrual basis of accounting. Additionally, financial statement presentation follows the recommendations of the Financial Accounting Standards Board Accounting Standards Codification (FASB ASC) 958-205-05 (formerly Statement of Financial Accounting Standard (SFAS) No. 117, Financial Statements of Not-for-Profit Organizations). Under FASB ASC 958-205-05, the Foundation is required to report information regarding its financial position and activities according to three classes of net assets: unrestricted, temporarily restricted, and permanently restricted net assets.

#### Revenue and Support

The Foundation receives a substantial portion of its revenue from related parties. The related parties collect donations in their retail stores and through their websites on behalf of the Foundation under the authorized agent agreements as described in Note D.

Related parties also donate portions of proceeds of certain specifically identifiable products and restrict those donations for various Foundation charitable causes.

#### **Use of Estimates in Financial Statement Preparation**

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

#### Notes to Financial Statements - Continued

December 31, 2009

#### Note B - Summary of Significant Accounting Policies (Continued)

#### Restricted and Unrestricted Revenue and Support

Contributions received are recorded as unrestricted, temporarily restricted or permanently restricted, depending on the existence or nature of any donor restrictions. The Foundation reports donations of cash and other assets as restricted support if they are received with donor stipulations that limit the use of the donated assets. When the satisfaction of a restriction is accomplished, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions.

#### Cash and Cash Equivalents

For purposes of the statement of cash flows, the Foundation considers all highly liquid investments with an initial maturity of three months or less to be cash equivalents. The Foundation's cash and cash equivalents on deposit with financial institutions at times may be in excess of federally insured limits.

#### Pledges Receivable

Pledges receivable are made up of support due within one year from related parties. Pledges receivable are stated at the amount management expects to collect from balances outstanding at year-end. Due to the receivables being from related parties, management has concluded that there will be no realization losses on the balances outstanding.

#### **Contributed Services**

The Foundation received donated administrative services from a related party valued at \$29,381 and \$53,508 during 2009 and 2008, respectively. The services meet the criteria for recognition under FASB ASC 958-605-25 (formerly SFAS No. 116), and are recorded in the accompanying financial statements as in-kind support.

#### **Functional Allocation of Expenses**

Costs have been summarized on a functional basis in the statements of activities. Accordingly, certain costs have been allocated between program expenses and general and administrative expenses.

#### **Income Taxes**

The Foundation constitutes a qualified not-for-profit organization under Section 501(c)(3) of the Internal Revenue Code and is, therefore, exempt from federal income taxes.

### Notes to Financial Statements - Continued

December 31, 2009

### Note B - Summary of Significant Accounting Policies (Continued)

#### **Income Taxes** (Continued)

During 2009, the Foundation adopted recently issued accounting rules for uncertain tax positions. Those rules require financial statement recognition of the impact of a tax position if a position is more likely than not of being sustained on audit, based on the technical merits of the position. These rules also provide guidance on measurement, recognition, classification, interest and penalties, transition, and disclosure requirements for uncertain tax positions. The adoption of the new rules had no impact on the current financial statements. The Foundation's federal Form 990 for tax years 2006 and later remain subject to examination by taxing authorities.

#### Note C - Temporarily Restricted Net Assets

Temporarily restricted net assets account for all contributions that are restricted for specific purposes or time periods:

	<u>2009</u>	<u>2008</u>
Children's cancer	\$ 188	\$ -
Health and wellness	15,479	-
Scholarship	91,600	114,000
Beverly fund	24,912	30,782
Other	1,200	1,000
	\$ <u>133,379</u>	\$ <u>145,782</u>
Net assets released as of December 31,	<u>2009</u>	<u>2008</u>
Program restrictions	\$ <u>733,570</u>	\$ <u>337,137</u>

#### Note D - Related Party Transactions

Support and related pledges receivable for the years ended December 31, 2009 and 2008 primarily consist of amounts collected by related parties. The Foundation entered into authorized agent agreements with the related parties in December 2003, which specifies the relationship between the organizations. Under the terms of the agreements, the related parties collect donations in their retail stores and through their website on behalf of the Foundation.

### Notes to Financial Statements - Continued

December 31, 2009

#### **Note D - Related Party Transactions (Continued)**

The related parties also donate portions of public sales of certain specifically identifiable products and restrict these donations resulting from these sales for various Foundation charitable causes.

The Foundation received donated services from a related party as described in Note B.

#### Note E - Subsequent Events

The Foundation has evaluated events and transactions subsequent to December 31, 2009 through August 2, 2010. No events require recognition in the financial statements or disclosures of the Foundation per the definitions and requirements of FASB ASC Section 855-10.

Form 8868

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

Internal Revenue	Service	rile a separate application for each return.			
• If you are Do not com	filing for plete Part	an Automatic 3-Month Extension, complete only Part I and check this boa an Additional (Not Automatic) 3-Month Extension, complete only Part II ( II unless you have already been granted an automatic 3-month extension on a	on page 2 previously (		Z
Part I	Automa	tic 3-Month Extension of Time. Only submit original (no copies nee	ded)		
A corporation Part I only	on require	d to file Form 990-T and requesting an automatic 6-month extension—check	this box	and complete . ► [	
All other co	•	(including 1120-C filers), partnerships, REMICs, and trusts must use Form in territorial structures.	7004 to red	quest an extensioi	n 0
one of the electronicall returns, or a	returns no y if (1) yo composit	tie). Generally, you can electronically file Form 8868 if you want a 3-month aubted below (6 months for a corporation required to file Form 990-T). Howe is want the additional (not automatic) 3-month extension or (2) you file Forms or consolidated Form 990-T Instead, you must submit the fully completed and son the electronic filing of this form, visit www irs gov/efile and click on e-file files.	ver, you ca s 990-BL, a ld signed p	annot file Form 8- 6069, or 8870, gro age 2 (Part II) of Fo	868 oup
Type or	Name of	Exempt Organization	Employer	identification numb	oer
print	BUILD	A-BEAR WORKSHOP FOUNDATION, INC.	33	1007188	
File by the	Number,	street, and room or suite no. If a PO box, see instructions			
due date for filing your	1954 IN	INERBELT BUSINESS CENTER DRIVE			
return See instructions	, ,	on or post office, state, and ZIP code. For a foreign address, see instructions.  UIS MO 63114			
Check type	of return	to be filed (file a separate application for each return)			
✓ Form 99:	0	Form 990-T (corporation)		Form 4720	
☐ Form 99	0-BL	Form 990-T (sec. 401(a) or 408(a) trust)		Form 5227	
☐ Form 99	0-EZ	Form 990-T (trust other than above)		Form 6069	
Form 99	0-PF	☐ Form 1041-A		Form 8870	
Telephone	No ► (	e care of ► TINA KLOCKE  314 ) 423-8000 FAX No ► ( 314 ) 423-  oes not have an office or place of business in the United States, check this		  ▶ [	7
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for the whole	group, c	Return, enter the organization's four digit Group Exemption Number (GEN)_heck this box		If this is and attach	
1 I reque until for the	est an a 08/1: organizati calendar y	utomatic 3-month (6 months for a corporation required to file Form	named abo		
2 If this ta	ax year ıs	for less than 12 months, check reason.   Initial return   Final return	Change	in accounting peri	od 
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b If this a	pplication	is for Form 990-PF or 990-T, enter any refundable credits and estimated tax			
paymen	ts made.	Include any prior year overpayment allowed as a credit.		\$	_
deposit		btract line 3b from line 3a Include your payment with this form, or, if required, occupon or, if required, by using EFTPS (Electronic Federal Tax Payment ructions	3c	\$	
Caution. If yo	-	ng to make an electronic fund withdrawal with this Form 8868, see Form 845: is.	3-EO and I	Form 8879-EO	