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**Return of Organization Exempt From Income Tax** 

OMB No 1545-0047

Open to Public

Department of the Treasury

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

_		ue Service					use a	copy of this				orting requi	rements	Inspectio	n		
<u>A</u> _	For the	2009 ca	lendar	year, or ta							d ending			_ , 20			
В	Check if ap	pplicable	Please				<u>le</u>	Arts C	ounc	<u>il, </u>	Inc.			er identification n	umber		
	Address	change	use IRS label or	Doing Bus									<u>63-04</u>	17538			
	Name ch	ange	print or type.	Number and	d street (o	rPO boxıfma	ail is no	t delivered to str	eet addres	ss)	Room/suite		•	one number			
	nitial reti		See	Post (	<u>Offi</u>	ce Box	<u> 3</u>	72					<u> 251-4</u>	32-9796			
	Ferminate		Specific Instruc-	City or tov	wn, state	or country, a	ind ZIF	P + 4									
	Amended		tions.	Mobile	e, A	L 3661	LO _						G Gross re	ceipts \$ 236	,568		
	Application		F Nan	ne and addre	ss of pri	ncipal officer	Rob	ert B.	Burr	ett.	Jr.	LI(a) In this	a amua mhim	for affiliates? Yes	⊠ No		
	фриссион	· pc.iding						bile,						ncluded? Yes	□ No		
$\overline{1}$	Tax-exe	mpt status		501(c) (3 )													
				arts.c			(5/	<u>.,, v</u>	·•				No," attach a list (see instructions) exemption number				
_				oration 🔲 Tru		sociation	Other	<u> </u>		I Year	of formation		M State of legal domicile. AL				
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E	_						<b>-</b>										
<b>Governance</b>	2 (	Check this	box ►	if the org	ganızatıo.	n discontinue	d its o	perations or di	sposed o	of more th	nan 25% of	its net assets	S				
ಹ	1 8	Number (	of votin	ig member	rs of th	e governir	ng bo	dy (Part VI	, line 1	a)			. 3		<u> </u>		
es	4 1	Number (	of inde	pendent vo	oting m	embers of	f the	governing t	oody (F	art VI,	line 1b)		. 4		<u> </u>		
Activities				f employee									_ 5		4		
Act				f volunteer				arv)					6		370		
•								art VIII, colu	imn (C	 ) line 1	2		7a	<del>_</del> _			
								rm 990-T, li					. 7b				
_										<u> </u>	<u> </u>	Prior Y	<del></del>	Current Yea			
	8	Contribut		nd grants (	(Dod V	III lina 1h	`					349	8,780	236	, 568		
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	$\overline{}$							l Part VIII, c		<del></del>	12 )		8,903		<u>, 568</u>		
								nn (A), line			· ·		7,633		<u>, 200</u>		
			nefits paid to or for members (Part IX, column (A), line 4)								0	150	120				
Expenses	15										14	8,168	150	<u>, 138</u>			
56	16a l	Profession	nal fur	ndraising fe	es (Pa	rt IX, colun	nn (A	), line 11e)			.	War at the last	0		0		
X	b	Total fund	draising	g expenses	(Part I	X, column	(D), lì	ne 25)▶		42,	490	<b>李公</b> 公					
	17 (	Other ex	penses	s (Part IX,	columi	n (A), lines	<del>(11a</del>	-11d, 11f-2	24f)	,	_		4 <u>,139</u>		<u>, 534</u>		
	18	Total exp	enses	. Add lines	s 13–17	' (must eq	ual P	arFX-06	mh/Æ	ine 2	5) . L	36	9,940	272	<u>,872</u>		
_	19 1	Revenue	less ex	cpenses S	ubtract	line 18 fro	nh Jing	<del>2 12</del>	-142	<u> </u>		(2	1,037	(36	,304)		
0 0		_						A.110 =	0.00	. 7	В	eginning of C	urrent Year	End of Yea	r		
Net Assets or	20	Total ass	ets (P	art X, line	16)		!	AUG 1	9 20	10 15	ゴー [	13	7,393	102	,700		
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		and belie	f, it is	ue, correct, a	and comp	lete. Declara	tion d	preparer (oth	er than o	fficer) is	based on a	ll information	of which pr	eparer has any kn	owledge		
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		Preparer							Date		self	eckıf Tere	Preparer's (see instruc	identifying number ctions)			
Pai	id	signature	; <b>y</b>	<b>ا</b> ، ا	, 9	<u> </u>		•				oloyed 🕨 🛚	1	•			
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Ma	ay the	IRS disc	uss thi					n above? (s						. X Yes	☐ No		

'Pai	t III Statement of Program Service Accomplishments
1	Briefly describe the organization's mission:
	The Organization was formed for the purpose of coordination and developing literacy
	and education activities of the fine arts and sciences in the metropolitan area of
	Mobile, Alabama.
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and
	allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code: ) (Expenses \$ 96,927 including grants of \$ 2,200) (Revenue \$ )
	Services for member organizations - members include theatrical,
	musical, artistic and historical preservation groups. Approximately
	450 programs are sponsored annually.
	•
	•
4b	(Code: ) (Expenses \$ 12,011 including grants of \$ ) (Revenue \$ )
	Cultural calendar - calendar of cultural events in the Mobile area
	distributed to member erganizations and germunity members
	distributed to member organizations and community members.
	Approximately 450 calendars are mailed bi-monthly.
	***
4c	(Code: ) (Expenses \$ 16,515 including grants of \$ ) (Revenue \$ )
	Information services - Information about art organizations and their
	programs over the phone.
	•
	·····
4d	Other program services. (Describe in Schedule O.)
	(Expenses \$ 34,532 including grants of \$ ) (Revenue \$ )
4e	Total program service expenses ► 159,985

Form	990 (2009)		P	age 3
Par	t 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	х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3_		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		х
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III.	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete-Schedule D, Part III.	8-		x
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V.	10		x
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	х	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.			
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? 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 reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			K.5.
•	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.			
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12		X
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?  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		х
14a	o the state of the	14a	-	.х
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?

Did the organization operate one or more hospitals? If "Yes," complete Schedule H

18

19

Pai	t IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the 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		х
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
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Х
	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		x_
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Х_
	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		x
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		х
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		х
C	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, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35_		x
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37	<u> </u>	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note</b> . All Form 990 filers are required to complete Schedule O	38	х	

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		х
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 4	01:		4
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> this return. (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		х
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		ļ
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	 	×
b	If "Yes," enter the name of the foreign country: ▶	,	1	
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		- market 1	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х
b		5b		Х
C	If "Yes" to line 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
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6ь		
7	Organizations that may receive deductible contributions under section 170(c).		il	
а	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
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	<u> </u>	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year	-		
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	↓	X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? .	7 <u>g</u>	<b>↓</b>	X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		х
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	į		
	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		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	<u>9a</u>		┼
b	• • • • • • • • • • • • • • • • • • • •	9b	<u> </u>	
10	Section 501(c)(7) organizations. Enter:			
a	LAGI L			
b		-		
11	Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders	!		
a	Group modification in members of unarenesses at a contraction of the c			
b	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
12=	amounts due or received from them.)	12a	1	
	of f"Yes," enter the amount of tax-exempt interest received or accrued during the year.			

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.

Sec	tion A. Governing Body and Management					
			Yes	No		
1a	Enter the number of voting members of the governing body					
b	Enter the number of voting members that are independent	. 9	! !			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with		-			
	any other officer, director, trustee, or key employee?	2		<u> </u>		
3	Did the organization delegate control over management duties customarily performed by or under the direct					
	supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		<u>X</u> _		
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		<u>X</u> _		
5	Did the organization become aware during the year of a material diversion of the organization's assets?	_5		<u>X</u>		
6	Does the organization have members or stockholders?	6		<u> </u>		
7a	Does the organization have members, stockholders, or other persons who may elect one or more members					
	of the governing body?	7a		<u>x</u> _		
	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	1	X		
8	Did_the organization_contemporaneously document the meetings held or written actions undertaken during					
	the year by the following:	_				
	The governing body?	8a	_X			
_	Each committee with authority to act on behalf of the governing body?	8b	X			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached					
<del></del>	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a		_X		
	tion B. Policies (This Section B requests information about policies not required by the Interenue Code.)	ernai				
1100	ende Oode.)		Yes	No		
40-	Done the assessmention have local phonton, because of the C	10a	163	X		
	Does the organization have local chapters, branches, or affiliates?	IVA		_		
D	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	10b				
44	affiliates, and branches to ensure their operations are consistent with those of the organization?	100				
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the	11	x			
11 A	form?		Ŷ			
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	x			
	b Are officers, directors or trustees, and key employees required to disclose annually interests that could give					
D	rise to conflicts?	12b	l x			
		1				
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	x			
13	Does the organization have a written whistleblower policy?	13	Х	_		
14	Does the organization have a written document retention and destruction policy?	14	х			
15	Did the process for determining compensation of the following persons include a review and approval by					
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official	15a	х			
	Other officers or key employees of the organization	15b		х		
-	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?	16a		x		
ь	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate		1	i i		
	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?	16b				
Sec	ction C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ▶ None					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(or	c)(3)s	only)			
	available for public inspection. Indicate how you make these available Check all that apply.					
	☐ Own website ☒ Another's website ☒ Upon request					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	of int	terest			
	policy, and financial statements available to the public.					
20	State the name, physical address, and telephone number of the person who possesses the books and received	ords o	of the			
	organization: ▶ Robert B. Burnett, 318 Dauphin Street, Mobile, AL 36602 (251)-	432-	979	6		

# 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)	(C)						(D)	(E)	(F)	
Name and Title	Average hours per week	Individual trustee or director	Institutional trustee		Rey employee	Highest compensated employee	E 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	
Bunky Ralph	_										
President	2	x						0	0	0	
Tom Loehr					ļ				į		
Vice-President	2	х						0	. 0	0	
Marie Dyson	_								_	_	
Secretary	2	Х	<u> </u>					0	0	0	
Henry T. Morrissette											
<u>Treasurer</u>	2	х						0	0	0	
Bobby Williams											
Immediate Past-President	2	x						0	0	0	
Mary Cousar											
	1	X	<u>L</u> .		<u>l_</u>			0	0	0	
Lakeshia Dotson		·									
	1	x	<u></u>					0	0	0	
Jeanette Fresne			١		l	ŀ			!		
	1	х	L		_			0	0	0	
Gaydrea Brown	}	1	l		1	}	1	1		_	
	1	Х			L			0	0	0	
Alison Herlihy											
	1	Х		<u> </u>	_	<u>L.</u> .	<u> </u>	0	0	0	
Danette Richards	_	1		ł							
	1	Х						0	0	0	
Dee Ann Rutens											
	1	х						0	0	0	
Kate Seawell					Ī	ļ					
	] 1	x						o	0	0	
Matt Singleton					Τ						
	]1	_ x	}	}	\		1	0	0	0	
Sally Adams Trufant											
	1 1	x	L			L		0	0	0	
Matt Whitfield					Τ						
	]1	<u> </u>			$\perp$		上	0	0	0	

(A)	(B)	<u></u>			<del></del>	<u>5</u>		(D)	(E)	(F)
Name and title	Average hours per			_		hat ap		Reportable compensation	Reportable compensation	Estimated amount of
	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
Janetta Whitt-Mitchell	1	х						0	0	0
Robert B. Burnett, Jr.										
	40	ļ	_	Х	_			57,449	0	14,795
	-									
										-
			_	_	_	_	_			
						-	<u> </u>			
		ļ				-	<u> </u>			
		-								
			-		-		-			
				_		ļ	-			
	<del>]</del> _	<b>}</b> —	-	-		<b>├</b>				
		_								
	-							_		
1b Total		<u> </u>		•			<u> </u>	57,449		
Total number of individuals (including but reportable compensation from the organization)		to the	ose ——	liste		bove 0	) wh	no received mo	re than \$100,00	Yes No
3 Did the organization list any former offic employee on line 1a? If "Yes," complete							oye	e, or highest c	ompensated	3 x
4 For any individual listed on line 1a, is the the organization and related organizations individual.										4 X
5 Did any person listed on line 1a receive services rendered to the organization? If	or accrue	com	pen: Sch	sationedu	on 1 ule .	 from <i>I for</i> :	any suct	unrelated org	anization for	5 X
Section B. Independent Contractors										
Complete this table for your five highest compensation from the organization	ompensate	d ind	epe	nde	nt c	ontra	ctor	s that received	more than \$10	0,000 of
(A) Name and business at	ddress							(B) Description of s	services	(C) Compensation
							$\Gamma$			
							1			
							+			
Total number of independent contractors more than \$100,000 in compensation fro				ited	to t	hose	liste	ed above) who	received	

Part	VIII	Statement of Revenue				
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
इं इ	1a	Federated campaigns 1a				
Contributions, gifts, grants and other similar amounts		Membership dues 1b				
S, E		Fundraising events 1c				
# 1		Related organizations 1d				
S, E		Government grants (contributions). 1e 67,252				
Sign		3				[
돌	•	All other contributions, gifts, grants, and similar amounts not included above 11 169, 316				\
ᅙᄅ	_					
5 5		Noncash contributions included in lines 1a-1f: \$  Total. Add lines 1a-1f	236,568			
$\overline{}$		Total. Add lines 1a–1f	236,300			<del></del>
, n						<b> </b>
eve	2a		-·			
92 92	b		<del></del>			
Ž	С					
ုလိ	<u>d</u>				<u> </u>	<u> </u>
am	e					
Program Service Revenue		All other program service revenue .				
	g	Total. Add lines 2a–2f	0			
	3	Investment income (including dividends, interest, and				
		other similar amounts)				
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties				
		(i) Real (ii) Personal				
	62	Gross Rents				
	1	Less: rental expenses				ļ
		Rental income or (loss) 0 0				
		Net rental income or (loss)	0	<del></del>		<del> </del>
	1	(i) Converting (ii) Other				
	/a	Gross amount from sales of assets other than inventory				
	Ι.					
	6	Less: cost or other basis				
		and sales expenses . 0 0			1	
	d	Cull of (1003) : :	0		<del></del>	<del> </del>
4						<del> </del>
īe	8a	Gross income from fundraising				
Λer	ì	events (not including \$			1	
Š		of contributions reported on line 1c)		1		
Ξ.		See Part IV, line 18 a			}	
Other Revel		Less direct expenses b				ļ
0	C	Net income or (loss) from fundraising events	0			
	9a	Gross income from gaming activities.				
		See Part IV, line 19 a				
		Less: direct expenses b	ļ	<u> </u>	<b> </b>	<b>\</b>
	C	Net income or (loss) from gaming activities >	0			ļ
	10a	Gross sales of inventory, less				
		returns and allowances a	]			
	) b	Less: cost of goods sold b	<u> </u>		<u> </u>	<u></u>
	c	Net income or (loss) from sales of inventory ▶	0			<u> </u>
		Miscellaneous Revenue Business Code				
	11a			<u> </u>		
	l b					
	1 -	I All other revenue				
	1	• Total. Add lines 11a–11d	0			
		Total Revenue. See instructions	236,568			
		· · · · · · · · · · · · · · · · · · ·				1

## Part IX Statement of Functional Expenses

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

	All other organizations must complete col not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	2,200	2,200		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16		_		
4	Benefits paid to or for members				
	Compensation of current officers, directors, trustees, and key employees	57,659	39,785	5,766	12,108
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)————				
<b>7</b> -	Other salaries and wages	65,254	45,026	6,525	13,703
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	17,852	12,318	1,785	3,749
10	Payroll taxes	9,373	6,468	937	1,968
11	Fees for services (non-employees):				
а	Management				
b	Legal				
С	Accounting	1,500		1,500	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion	10,962			10,962
13	Office expenses	11,427		11,427	
14	Information technology	533		533	
15	Royalties				
16	Occupancy	34,864		34,864	
17	Travel	912		912	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	404		404	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	1,447		1,447	
23	Insurance	4,297		4,297	
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)			2)	
а	Program expenses	54,188	54,188		
a b	220924				
C					
d					
e					<del></del>
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	272,872	159,985	70,397	42,490
26	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				

Part X **Balance Sheet** (B) End of year (A) Beginning of year 28,384 16,173 1 2 2 104,705 83,670 3 3 4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete 6 7 8 9 Prepaid expenses and deferred charges . Land, buildings, and equipment: cost or 10a 10a other basis. Complete Part VI of Schedule D Less: accumulated depreciation . . . . 10b 4,304 10c 2,857 11 Investments—publicly traded securities . . . 11 12 12 Investments—other securities. See Part IV, line 11 13 13 Investments—program-related. See Part IV, line 11 14 14 Other assets. See Part IV, line 11 . . . . . 15 15 102,700 16 Total assets. Add lines 1 through 15 (must equal line 34) 137,393 16 10,183 17 17 18 18 19 19 20 20 Liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . . Unsecured notes and loans payable to unrelated third parties . . . 24 24 Other liabilities Complete Part X of Schedule D . . . . . . . 25 25 Total liabilities. Add lines 17 through 25 . . . . 10,183 11,794 26 Organizations that follow SFAS 117, check here ▶ 🛛 and or Fund Balances complete lines 27 through 29, and lines 33 and 34. 107,393 85,593 27 19,817 28 5,313 28 29 Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. 30 Net Assets 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 32 32 Retained earnings, endowment, accumulated income, or other funds 90,906 127,210 33 33 Total liabilities and net assets/fund balances 137,393 102,700

Pai	t XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990:   Cash   Accrual   Other			
	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	L
b	Were the organization's financial statements audited by an independent accountant?	2b		х
	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of	2-	.,	
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	<u>2c</u>	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in		:	
	Schedule O.			::  }
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were		1	
	issued on a consolidated basis, separate basis, or both			il I
	☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in	l	l	l
	the Single Audit Act and OMB Circular A-133?	3a		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.	3b		1

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.

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

Employer identification number

Mobile Arts Council, Inc. 63-0417538

Pai	rt II	Reason	for Public Ch	arity Status (All org	<u>janizatio</u>	ns must	comple	<u>te this p</u>	art.) Se	e instruc	tions
he	orga	anization is no	t a private found	lation because it is: (I	For lines	1 through	n 11, che	ck only o	ne box.)		
1		A church, cor	nvention of churc	ches, or association o	f churche	s descrit	ed in se	ction 17	0(b)(1)(A	)(i).	
2		A school des	cribed in section	170(b)(1)(A)(ii). (Atta	ach Sche	dule E.)					
3		A hospital or	a cooperative he	ospital service organiz	zation des	scribed ir	section	170(b)(1	)(A)(iii).		
4		A medical res	search organizat	ion operated in conju	inction wi	th a hos	pital desc	ribed in	section	170(b)(1)	(A)(iii). Enter the
			ne, city, and sta			•					
5		An organizati	on operated for	the benefit of a colleg	e or unive	ersity ow	ned or op	erated by	y a gove	nmental	unit described in
			b)(1)(A)(iv). (Co			•		•			
6		A federal, sta	ite, or local gove	ernment or governmer	ntal unit d	lescribed	in sectio	n 170(b)	(1)(A)(v)		
7				receives a substantia							e general public
				1)(A)(vi): (Complete							<b>,</b>
8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)											
9				receives: (1) more that				contribu	tions, me	mbership	fees, and gross
receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3%											
				nt income and unrela						511 tax)	from businesses
		acquired by t	he organization	after June 30, 1975.	See sect	ion 509(	<b>a)(2)</b> . (Co	mplete P	art III.)		
10		An organizati	on organized ar	d operated exclusive	ly to test	for public	safety.	See <b>sect</b>	ion 509(	a)(4).	
11	$\mathbf{x}$	An organizat	ion organized a	nd operated exclusive	ely for the	e benefit	of, to pe	erform the	e functio	ns of, or	to carry out the
				licly supported organi							
		<b>509(a)(3).</b> Ch	eck the box that	describes the type o	f supporti	ing orgar	nization a	nd comp	lete lines	11e thro	ugh 11h.
		a 🗌 Type	I b 🗌	Type !I c	□ Тур	e III-Fun	ctionally	integrate	d	d 🗵	Type III-Other
e	X			fy that the organization							
				n managers and other	than one	or more	publicly s	upported	organiza	itions des	cribed in section
		509(a)(1) or	section 509(a)(2	).							
f		If the organiz	zation received	a written determination	on from ti	he IRS t	hat it is a	Type I,	Type II,	or Type	III supporting
		organization,	check this box								🛘
g	1			the organization acce	pted any	gift or co	ontribution	from an	y of the		
		following per	sons?								[ <del></del> ]
			•	indirectly controls, ei		_		persons	describe	ed in (ii)	Yes No
		and (iii) b	pelow, the gover	ning body of the supp	orted org	anızatior	1? .				11g(i)
				rson described in (i) a			<u>.</u>				11g(ii)
				f a person described							11g(iii)
<u>_</u>				tion about the suppor							1
(1)		ne of supported ganization	(ii) EIN	(iii) Type of organization (described on lines 1–9	in col (i) lis	organization sted in your		ou notify		ls the tion in col	(vii) Amount of support
		•		above or IRC section	governing		∞l (i)	of your	(i) organi	zed in the	'''
			 	(see Instructions)	<del></del>		——·	ort?	<del></del>	S?	}
_					Yes	No	Yes	No	Yes	No	
		e for the	62 1026562	٥					١	ł	2 200
<u> 17 1</u>	vin	g Arts	63-1236563	·	ļ	X	X		X		2,200
					ļ	ļ	[	l	l		
					ļ	<u> </u>		<b>!</b>	<del> </del>	<del> </del>	<del> </del>
_			<del></del>	<del> </del>	<del> </del>	<del> </del>	├	<del> </del>	<del> </del>	<del>                                     </del>	<del> </del>
			<del> </del>		-	<del> </del>	-	<del> </del>		<del> </del>	<del> </del>
										}	
				<u> </u>	<u> </u>						<del> </del> -
To	tal										2,200.00

Par	(Complete only if you chec	<b>janizations</b> ( ked the box (	<b>Described in</b> on line 5, 7, c	Sections 17 or 8 of Part I.	'U(b)(1)(A)(IV )	) and 170(b)	(1)(A)(Vi)
Sect	ion A. Public Support				<u></u>		
Cal	endar 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")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						
6~	shown on line 11, column (f)						
_	tion B. Total Support		<u></u>	·	<del></del>	<u></u>	
	lendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
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 .		<u></u>	<u></u>	.l <u> </u>	40	
12	Gross receipts from related activities, etc					12	
13	First five years. If the Form 990 is for organization, check this box and stop h		on's first, secor				
Sec	tion C. Computation of Public Su			<del>· · · · ·</del>	<u> </u>	<u> </u>	<u> </u>
14	Public support percentage for 2009 (line			1 column (fl)		14	%
15	Public support percentage from 2008 Sc					15	%
	33%% support test—2009. If the organ and stop here. The organization qualifie	nzation did not	check the box	on line 13, and		% or more, che	eck this box
b	33%% support test—2008. If the organization qu	ialifies as a pul	olicly supported	organization .			▶ □
17a	10%-facts-and-circumstances test—20 more, and if the organization meets the "organization meets the "facts-and-circum	facts-and-circui	mstances" test, e	check this box a	and stop here	. Explaın in Par	t IV how the
b	10%-facts-and-circumstances test—2008 more, and if the organization meets the organization meets the facts-and-circumstance.	facts-and-circun ances" test The	nstances" test, c organization qua	heck this box a ilifies as a public	nd <b>stop here</b> bly supported org	Explain in Part janization .	IV how the
18	Private foundation. If the organization de	d not check a b	ox on line 13, 16	a, 16b, 17a, or	17b, check this	box and see ins	structions >

	Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I)						
	tion A. Public Support						
Ca	endar 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						
2	any "unusual grants ")						
	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 furnished by a governmental unit to the organization without charge				. – – - –		
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)		" ' <sup>1</sup>		r 1	} <u></u> _	
$\overline{}$	tion B. Total Support	1 1000	T (1) 2222	· · · · · · · · · · · · · · · · · · ·	1		T
Ca	llendar year (or fiscal year beginning in) ▶	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6		<del> </del>	_	<del></del>	<del>                                     </del>	<del> </del>
iva	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b			<u> </u>		ļ	<del> </del>
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)			~ · · · · · · · · · · · · · · · · · · ·	<u> </u>		
14	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						
Sec	ction C. Computation of Public Su	<del></del>				<del></del>	
15 16					<u>%</u> %		
Sec	tion D. Computation of Investment Income Percentage						
17	Investment income percentage for 200	•	• • •	•		17	%
18		ntage from 2008 Schedule A, Part III, line 17					
19a	17 is not more than 331/3 %, check this b	oox and stop h	nere. The organ	nization qualifie	s as a publicly	supported org	anızation 🕨 🗌
b	33½% support tests—2008. If the orga line 18 is not more than 33½%, check this						anızation 🕨 🔲
20	Private foundation. If the organization	ı did not check	a box on line	14, 19a, or 19b	o, check this bo	ox and see ins	tructions _▶ 🔲

	OTH 990 OF 980-EZ) 2009			Page 4
Part IV	Supplemental Information. Part II, line 17a or 17b; and	. Complete this part to provide the Part III, line 12. Provide any other	explanations required additional information.	by Part II, line 10, See instructions.
	_			
		·····		
	·			
		·		
		·····		
		·		

#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

### **Supplemental Financial Statements**

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

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

2009
Open to Public

Employer identification number

Open to Public Inspection

Mobile Arts Council, Inc. 63-0417538 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year . . . . 2 Aggregate contributions to (during year) Aggregate grants from (during year) . Aggregate value at end of year . . . Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . . Yes No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II \_ Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area ☐ Protection of natural habitat ☐ Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements . . . . . 2a 2b Number of conservation easements on a certified historic structure included in (a) . 2d Number of conservation easements included in (c) acquired after 8/17/06 . . . . . Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: Assets included in Form 990, Part X . . .

<u>Par</u>	Organizations Maintainir	ng Collections	of Art, H	istorica	d Treasures,	or Other Similar	Assets (continued)
3	Using the organization's acquisition, collection items (check all that apply)	accession, and o	ther reco	rds, che	ck any of the	following that are a	significant use of its
а	Public exhibition		d		oan or exchai		
b	Scholarly research		9		Other		••••••
C	Preservation for future generation	ons					
4	Provide a description of the organiza Part XIV.	tion's collections	and expla	ain how	they further th	ne organization's exe	empt purpose in
5	During the year, did the organization stassets to be sold to raise funds rather	olicit or receive do than to be maintai	nations of ned as pa	art, hist art of the	oncal treasures organization's	s, or other similar collection?	Yes No
Par	Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.						
	Is the organization an agent, trustee included on Form 990, Part X?					s or other assets no	t Yes No
b	If "Yes," explain the arrangement in	Part XIV and com	plete the	followin	ig table		<del> </del>
							Amount
C	Beginning balance					1c	
d	Additions during the year		. <u>.</u> .	··	<u> </u>	1d	<del></del>
~е	Distributions during the year					18	
f	Ending balance						
b	Did the organization include an amo if "Yes," explain the arrangement in	Part XIV.					
Par	t V Endowment Funds. Cor	nplete if the org	anizatio	<u>n answ</u>			
		(a) Current year	(b) Pro	or year	(c) Two years	back (d) Three years ba	ck (e) Four years back
1a	Beginning of year balance					. <del></del>	
b	Contributions					<del>eral</del> a da remera era er <del>ala</del> z el colo	e energy and a service of the servic
С	Net investment earnings, gains, and losses					· · · · · · · · · · · · · · · · · · ·	=::::::::::::::::::::::::::::::::::::::
d	Grants or scholarships					221 8	and the second second
е	Other expenditures for facilities						
	and programs				<u></u>	una de de como esta de la como	ender og ender endere ender
f g	Administrative expenses End of year balance					era di di salah di di salah d	rav <b>a</b> in the second second
2	Provide the estimated percentage of	the year end bal	lance hele	d as			
а	Board designated or quasi-endowme	ent ▶	%				
b	Permanent endowment ▶						
С	Term endowment ▶ %						
	Are there endowment funds not in the organization by:		e organiz	ation tha	at are held and	administered for the	Yes No
	-						3a(i)
	-						3a(ii)
b	If "Yes" to 3a(ii), are the related orga	anizations listed a	is require	d on Sc	hedule R? .		. 3b
4	Describe in Part XIV the intended us						
Pa	t VI Investments—Land, Bu	ildings, and Ed	quipmer	it.See	Form 990, Pa	art X, line 10.	
	Description of investment	(a) Cost or of (investment)			ost or other sis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land						
b	Buildings	1					
5	Leasehold improvements			1	2,805	2,805	0
d	Equipment			i	47,248	44,391	2,857
	Other	: :					
	II. Add lines 1a through 1e (Column (d)	must equal Form	990. Part	X. colum	n (B), line 10(c	),)	2,857

Part VII	Investments—Other Secur	<u>rities. See Form 990, Part X</u>	K, line 12.	
(a)	Description of security or category (including name of security)	(b) Book value	(c) Method of valua Cost or end-of-year man	tion ket value
Financial de	erivatives			
	erivatives			
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Total /Column	(b) must equal Form 990, Part X, col (B) line 12	1		
Part VIII		elated. See Form 990, Part )	K line 13	
	a) Description of investment type	(b) Book value	(c) Method of valua	
"		_ (b) book value	Cost or end-of-year man	rket value
			<del> </del>	
			<del>                                     </del>	
	<del></del>		<del></del>	
Total. (Column	(b) must equal Form 990, Part X, col (B) line 13			
Part IX	Other Assets. See Form 99	0, Part X, line 15.		
		(a) Description		(b) Book value
<del></del>	4) 45 000 5 4	V (6) ii (5)		
Part X	umn (b) must equal Form 990, Part 2 Other Liabilities. See Form		<u> </u>	
1.	(a) Description of liability	(b) Amount		<del> </del>
	come taxes	(b) Allount		
			_	
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Total. (Colum	n (b) must equal Form 990, Part X, col. (B) line 2	25) ▶		

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.

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	lines 3 and 9 ments With Revenue  ta   tb   tc   td   td   te   td   td   td   td   td   td   td   td

Schedule D (For	om 990) 2009	Page 5
Part XIV	Supplemental Information (continued)	
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#### SCHEDULE O (Form 990)

#### Supplemental Information to Form 990

20**09** 

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

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Name of the organization **Employer Identification number** 63-0417538 Mobile Arts Council, Inc. Form 990, Part VI, Line 11 - A copy of the final form of the Form 990 and the required schedules were provided to the Board of Directors electronically for their review prior to the return being filed. The Treasurer is Henry T. Morrissette. Form 990, Part VI, Line 12c - The Organization, on an annual basis, asks each member of the Board of Directors to review the Conflict of Interest Policy to verify that they do not have any conflicts of interest with the Organization. Form 990, Part VI, Line 15a - The compensation of the Executive Director was reviewed by the Budget and Finance Committee and approved by the Board of Directors as part of the approval of the annual budget. Form 990, Part VI, Line 18 - The Organization's Form 990 is posted to Guidestar and a paper copy of the return will be mailed to anyone who requests a copy of the form. Form 990, Part VI, Line 19 - The Organization's governing documents, Conflict of Interest Policy, the annual Audited Financial Statements and the Form 990 are made available to anyone who requests the documents.

Schedule O (Form 990) 2009	Page 2
Name of the organization	Employer identification number
Mobile Arts Council, Inc.	63-0417538
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