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Department of the Treasury Internal Revenue Service

**Short Form** 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)

> Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form

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

OMB No 1545-1150

2009

Open to Public Inspection

A	For the	2009 calend	ar year,	or tax year	beginning		,	2009, an	d ending			, 20
В	Check if ap	oplicable	Please	C Name of o	rganization		<del></del>	*****		D Empl	oyer ident	ification number
=		label of							41123	39		
=	Name cha	-	print or	Number and	street (or P O b	ox, if mail is not deliv	ered to street add	ress) R	loom/suite	E Telep	hone numb	per
=	initial retui Terminate		type. See	1101 N	First					(325	5) 67	7-1161
=	reminate Amended		Specific		state or country	, and ZIP + 4					ıp Exemp	
=	Application		Instruc- tions.	Ahilen	e Teva	s 79601				Num		\text{\tin}\text{\tin}\exitt{\text{\tetx{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tin\tint{\text{\text{\text{\text{\text{\text{\text{\tin}\text{\tin}\text{\ti}\tin}\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\texi}\text{\text{\text{\texi}\tint{\text{\text{\text{\text{\texi}\tint{\text{\texi}\tint{\ti}\tint{\tin}\tint{\text{\text{\texi}}\tint{\text{\texi}\ti
<u></u>			\ organi		•• ••		.1. 4	-44-ab	G Accou	<b></b>	<del></del>	Cash
	∪ Seci	1011 50 1(0)(3)				nexempt charitab n 990 or 990-EZ).	ne trusts must	attacn	1	_		1 Casii   Acciual
				iipicica ociii	COUNTY (1 OII		····			(specify)		<del></del>
	0/- L-:4								1		-	anization is not
	Vebsit		-11		7504()(2		7	<del></del>				dule B (Form 990,
						) ◀ (insert no )				Z, or 99	<u> </u>	
	Check 🕨					a)(3) supporting org						than \$25,000 A
						he organization ch					te return	
						s, if \$500,000 or mo					• \$	
P	art I					s in Net Asset				instru	ctions to	
	1	Contributio	ns, gift:	s, grants, ar	nd similar an	nounts received					1	64,770.50
	2					nment fees and o					2	
	3	Membersh	ip dues	and assess	sments						3	
	4	Investment	t incom	е							4	7,392.25
	5a	Gross amo	ount from	m sale of as	sets other th	nan inventory		5a			· 44.	
	b					ses		5b		·		
	C					an inventory (Su		rom line	5a) .		5c	0.00
ne	6					ts of Schedule G) If				⊳⊓l	- 27	
e e	а			ot including		of c			,	_		
2010 Revenue	-	reported or	_	•				6a				
-	b							6b				
<u> </u>	C		-			and activities (Su			, 6a)		6c	0.00
•	7a		-	-		allowances .			oa)			
5	1 .				returns and	allowances .		7a		-	1.00	
-	Ь	Less: cost	_					7b				0 00
ب	C					ry (Subtract line	7b from line 7	a) .		•	7c	0.00
勞	8			escribe ▶ I						,	8	135.44
SCANNEL Series	9				., 3, 4, 5c, 6d		REC	EIVE	$\mathbf{D}$	$\triangleright$	9	72,298.19
Ş	10			•	•	chedule)			اد، حنت		10	139,167.02
<b>.</b>	11	•		r for membe			6	0 = 00			11	
	12				, and employ		24. JUN	<b>0</b> .7.20	.10.   잇		12	
ű	13			•	•	ndependent conf	tractors		RS-OSC		13	4,906
ğ	14				maintenand		DGD	EN, I	17		14	· <u>·</u>
Щ	15				e, and shippi		000	<u></u>			15	15,120.64
	16				<u>ck pri</u>					)	16	62.42
	17	Total expe	enses. /	Add lines 10	through 16	<u> </u>				. ▷	17	159,256.08
φį	18					ne 17 from line 9					18	(86,957.89
Net Assets	19	Net assets	or fun	d balances	at beginning	g of year (from I	ine 27, colum	n (A)) (r	must agree	with		_
As		end-of-yea	r figure	reported or	n prior year's	return) .		•			19	663,817.21
a F	20	Other chan	nges in	net assets o	or fund balar	ices (attach expl	anation)				20	166,025.25
Z	21		_			r Combine lines	•			▶	21	742,884.57
P	art II								ore, file Fo	rm 990		of Form 990-EZ.
					instructions					inning of		(B) End of year
22	Ca	sh, savings	and in	•		,					. 21 22	~- <del>-</del>
23		nd and build				•			1 303	, ) _ '	23	<del></del>
24		her assets (	-		•	•			,		24	
25		tal assets (							1 663	Ω17		742,884.57
				wiha N		•			003	01/		<del>                                     </del>
26 27		tal liabilitie			27 of oct	ımn (B) must agr	oo wath line of		) ((2)	017	26	742 884 57
77	IVE		ALDERET D		// OT COIL	ooo on and an an an an an an a	WILL HITE /		1 00 5	× 1 /	/ I 1777	1141 004 51

Form **990-EZ** (2009)

	· · · · · · · · · · · · · · · · · · ·					1 age &			
Par	Statement of Program Service Accomp	plishments (See the instr	uctions for Part II	II.)		Expenses			
What is the organization's primary exempt purpose? <u>support for arts programs</u> Rescribe what was achieved in carrying out the organization's exempt purposes. In a clear and concise  500									
Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise									
manner describe the converse provided the number of persons benefited, and other relevant information for									
	program title	•				(a)(1)trusts, optional hers)			
28	Young Audiences- grants for	arts education	in area ni	hlic	-				
	schools	ares caacacron	in area po						
	(Cronto # 26, 000) K41:			<del></del>		36,000			
	(Grants \$ 36,000) If this amount	includes foreign grants, che	eck nere	• <del>• • • • • • • • • • • • • • • • • • </del>	28a	30,000			
29	Childrens' Performing Arts S		r live ber	Torming					
	arts performances in Abilene								
	(Grants \$ 14,000) If this amount	includes foreign grants, che	eck here	. ▶ 🗆	29a	14,000			
30	Abilene Cultural Affairs Cou	ncil- grant for	CIP progr	am					
	(Grants \$ 66, 667.02) If this amount	includes foreign grants, che	eck here	. ▶ 🗆	30a	67,667.02			
31	Other program services (attach schedule)								
	(Grants \$ 21,500) If this amount	includes foreign grants, che	eck here	. ▶ 🗆	31a	21,500			
32	Total program service expenses (add lines 28a t				321	39,167.02			
Par	IV List of Officers, Directors, Trustees, and Key	Employees. List each one ev	ven if not compensa	ted. (See the i	nstruc	tions for Part IV.)			
•		(b) Title and average	(c) Compensation	(d) Contribution	ns to	(e) Expense			
	(a) Name and address	hours per week devoted to position	(if not paid, enter -0)	employee benefit deferred compen	plans & sation	account and other allowances			
see	attached	• • • • • • • • • • • • • • • • • • • •		†					
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Part '	Other Information (Note the statement requirements in the instructions for Part V.)			
<del>-:</del>			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		х
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of			
	the changes	34		<u>X</u>
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.	12 V 0.5	i.	
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a		x
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets			
A7-	during the year? If "Yes," complete applicable parts of Schedule N	36	,	X 7
	Enter amount of political expenditures, direct or indirect, as described in the instructions    37a	37b	``	X X
	Did the organization file Form 1120-POL for this year?	3/0	, ,	1-7
<b>30</b> a	any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a	<u>!</u>	X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved   38b	30a	r'	
39	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on line 9	,		
b	Gross receipts, included on line 9, for public use of club facilities	1 1	,	,
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:	1.3		<b>黎</b> ·沙
	section 4911 ▶ 0 ; section 4912 ▶ 0 ; section 4955 ▶ 0	1	¥ .	3
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit	المناء ا	5	
	transaction during the year or is it 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	40b		х
c	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on		30-	
	organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c	2. 3	}:: 15	
	reimbursed by the organization	* **	; à	1
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter		in the	Å.
	transaction? If "Yes," complete Form 8886-T	40e		x
41	List the states with which a copy of this return is filed. ▶			
42a	The organization's books are in care of $\blacktriangleright$ Lynn Barnett Telephone no. $\blacktriangleright$ 325		7-1	161
	Located at ▶ 1101 N First, Abilene, Tx ZIP+4 ▶ 796	01		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority	ı	V	I NI -
	over a financial account in a foreign country (such as a bank account, securities account, or other financial	$\overline{}$	Yes	No
	account)?	42b	7	X < \$51.1
	If "Yes," enter the name of the foreign country: ►  See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
	and Financial Accounts.			
_		42c		X
С	At any time during the calendar year, did the organization maintain an office outside of the U.S? If "Yes," enter the name of the foreign country:	[+ZU]		
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here			▶ □
43	and enter the amount of tax-exempt interest received or accrued during the tax year	•	•	
	and enter the amount of tax-exempt interest received of accorded during the tax year			
		[	Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of	97		٦
••	Form 990-EZ	44		X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If	12.5	>	ħ.
	"Yes," Form 990 must be completed instead of Form 990-EZ	45		X
		- agr	E7	<del></del>

Part	Section 501(c)(3) organizations and s 501(c)(3) organizations and section 494 and complete the tables for lines 50 and	s <b>ection 4947(a)(1)</b>	i <b>onexempt</b> charitable tr	charitat usts mus	ole trusts only. A st answer questic	All sec ons 40	ction 6–49	b	
.46	Did the organization engage in direct or indirect		vities on bel	alf of or i	n opposition to		Yes	Νo	
	candidates for public office? If "Yes," complete Se					46		Х	
47	Did the organization engage in lobbying activities					47 48		_ X	
	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E								
	Did the organization make any transfers to an ex	·	-			49a		X	
	If "Yes," was the related organization a section 52					49b		X	
	Complete this table for the organization's five hig employees) who each received more than \$100,0							кеу	
	ompleyees, who east received more than \$100,0	(b) Title and average	•	pensation	(d) Contributions to		Exper		
	(a) Name and address of each employee paid more than \$100,000	hours per week devoted to position	(4)		employee benefit plans & deferred compensation	aci	count a	nd	
None	······································	devoted to position				00101	diiotto	11003	
				-				-	
						ļ			
						ļ	_		
	Total number of other employees paid over \$100	000 🔈	•		L	·			
None	(a) Name and address of each independent contractor p	paid more than \$100,000		(b) Ty	pe of service	(c) Co	npensa	ition	
d	Total number of other independent contractors ea	ach receiving over \$100	0,000	<b>▶</b>					
	Under penalties of perjury, I declare that I have examine and belief, it is true, correct, and complete Declaration of							dge	
Sign Here	Signature of officer	<u> </u>			Am 1, 201,	0	<del></del>		
	Lynn Barnett, Executive Type or print name and title	e Director	·						
Paid Prepare	Preparer's signature		- ∣ self-		Preparer's identifying nur			tions)	
Use On		rehead, P.C. # 1400 Abile	ene, Tx	7960 <del>21</del>			314 757	5	
May the	e IRS discuss this return with the preparer shown	above? See instruction	ns			Yes		No	
					Fo	rm 99	∪-⊏Z	(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 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Αb	il€	ne Arts	Alliance						75-24	11239	)	
	rt I			narity Status (All or	ganizati	ons mus	t comple	ete this	1			
The	orga		-	dation because it is:								
1				rches, or association								
2		A school des	scribed in <b>sectio</b>	n 170(b)(1)(A)(ii). (At	tach Scho	edule E)						
3				nospitał service organ								
4	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:											
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)											
6		A federal, st	ate, or local gov	ernment or governme	ntal unit	described	l in secti	on 170(b	)(1)(A)(v	).		
7	X			receives a substantia		its suppoi	rt from a	governme	ental unit	or from th	ne general i	oublic
				(1)(A)(vi). (Complete		Ole4e	Dark II V					
9		An organizat receipts from support from	ion that normally n activities relate n gross investme	in section 170(b)(1) receives: (1) more the ed to its exempt functi ent income and unrel after June 30, 1975.	an 33⅓ % ons—sub ated bus	of its sup eject to ce iness tax	oport fron ertain exc able inco	eptions, me (less	and (2) n	o more ti	nan 33 <i>1</i> /3%	of its
10 11		An organizat	tion organized a	nd operated exclusive and operated exclusive Dicly supported organ	ely for th	e benefit	of, to p	erform th	e functio	ns of, or		
		509(a)(3). Cl	neck the box tha	t describes the type of	of suppor	ting orgar	nization a	and comp	lete lines	11e th <u>ro</u>	ugh 11h.	
		a ☐ Type			• •	e III-Fun	•	_			Type III–	
e	Ш			ify that the organizati n managers and other								
			section 509(a)(2	=	man one	or more	publicly s	supportec	organiza	นเบทร นธร	CIDEU III St	CHOIT
f				a written determination	on from t	the IRS t	hat it is	a Type I	, Type II,	or Type	III support	ing
			, check this box									. 🗆
g				the organization acce	pted any	gift or co	ontributio	n from ar	ny of the			
		following per									Yes	No
				indirectly controls, e				persons	describe	ed in (ii)	11g(i)	HO
			~	ning body of the supp	_						11g(ii)	+-
				rson described in (i) a of a person described		 ii) above'					11g(iii)	+
h				ation about the suppo							L	
(i)		of supported anization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section	in col (i) la	organization sted in your document?	the organ	ou notify nization in of your port?	organizat (i) organi	Is the gon in col zed in the S?	(vii) Amou suppo	
				(see instructions)	Yes	No	Yes	No.	Yes	No		
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Total

Pai	Support Schedule for Org (Complete only if you check	anizations (	Described in on line 5, 7, c	Sections 17 or 8 of Part I.	0(b)(1)(A)(iv	) and 170(b)	(1)(A)(vi)
Sec	tion A. Public Support						
Ca	lendar year (or fiscal year beginning in) >	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")	187,290	68 <b>,</b> 575	169,184	157,0 <b>87</b>	4,770.,50	6,896.50
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 i o	7 200 08	D 575 06	0 104 045	7 077 678	4 770 DO	6,896.50
4	Total. Add lines 1 through 3	7,290.00	p, 3/3.wo	9,104.00	7,077.00	1 , 1 / U. 4 2CD	0,090.30
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						1,641.30
_6_	Public support. Subtract line 5 from line 4			, (!) /		30	5,255.20
	tion B. Total Support	· · · · · · · · · · · · · · · · · · ·					·
Ca	lendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4 $\frac{18}{9}$	7,290.00	8,5/5.00	9,184.00	7,077.60	4,//01,5205	6,896.50
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	7,483	10,096	11,105	22,204	7,392.25	8,280.25
9	Net income from unrelated business activities, whether or not the business is regularly carned on	0	0	0	0	0	0.00
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	0	0	0	0	0	0.00 5,176.75
11	Total support. Add lines 7 through 10 .		<u> </u>	Ë		T T T T T T T T T T T T T T T T T T T	5,170.75
12 13	Gross receipts from related activities, etc First five years. If the Form 990 is for organization, check this box and stop he	the organizatio	-	d, third, fourth,	or fifth tax ye	ar as a section	n 501(c)(3)
Sec	tion C. Computation of Public Su		ntage	<u> </u>	· · · · ·	<u> </u>	
14	Public support percentage for 2009 (line 6			column (fi)		14	73.39%
15	Public support percentage from 2008 Sch		=			15	49.61%
16a	33%% support test—2009. If the organization qualifies	zation did not c as a publicly s	heck the box o supported organ	n line 13, and l	ine 14 is 33 1/3 9	% or more, che	ck this box
	331/3 % support test—2008. If the organization qua	ilifies as a publi	icly supported o	organization .			⊳ □
17a	10%-facts-and-circumstances test—200 more, and if the organization meets the "facts-and-circums organization meets the "facts-and-circums"	cts-and-circum	stances" test, c	heck this box ar	nd stop here.	Explain in Part	IV how the
b 18	10%-facts-and-circumstances test—2008. more, and if the organization meets the "facts-and-circumstance organization meets the "facts-and-circumstance organization did organizat	acts-and-circums	stances" test, ch organization qual	eck this box an ifies as a publicly	d stop here legs of supported organical states of the stat	Explain in Part lance	lV how the
10	i iivate ioutiuauon. Ii tiie organization did	not Gleck a DO	A GIT IIII C 13, 100	i, 100, 17a, 01 I	rb, Great tris b	oz and see mst	Idoliona 🗸 🔲

Pa	rt III Support Schedule for Orga (Complete only if you checke				a)(2)		_
Sec	tion A. Public Support						
	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")						
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 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 .						
Þ	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						
C	Add lines 7a and 7b						<b>_</b>
8	Public support (Subtract line 7c from line 6)			L. Marie		teri'nakata se	
	tion B. Total Support				_		T
Ca	alendar year (or fiscal year beginning in) ⊳	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 10a	Amounts from line 6 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						
с 11	Add lines 10a and 10b  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)						
14	First five years. If the Form 990 is for organization, check this box and stop	here	<u> </u>				n 501(c)(3) ▶ □
Sec	tion C. Computation of Public Su	pport Perce	ntage			,	
15 16 _	Public support percentage for 2009 (lin Public support percentage from 2008 S			e 13, column		15 16	49.61 <b>%</b>
Sec	tion D. Computation of Investmen						
17	Investment income percentage for 200	9 (line 10c, co	olumn (f) divide	d by line 13, o	column (f)) .	17	%
18	Investment income percentage from 20	308 Schedule	A, Part III, line	17		18	<u></u> %
19a	331/3 % support tests—2009. If the org						
b	331/3 % support tests—2008. If the organ line 18 is not more than 331/3 %, check this	nization did not box and <b>sto</b> p	check a box on here. The orga	lıne 14 or line nızatıon qualıfı	19a, and line 10 es as a publicly	6 is more than supported orga	ınızatıon ▶ 🔲
20 _	Private foundation. If the organization	did not check	a box on line 1	4, 19a, or 19b	, check this bo	x and see inst	ructions 🕨 🗌

Schedule A (Fo	orm 990 or 990-EZ) 2009						Page 4
Part IV			Complete th	is part to p 12. Provide	rovide the any other	explanations required additional information	by Part II, line 10; . See instructions.
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Form 990-EZ

2009

:

Abilene Arts Alliance

Part III, Line 31

Expenses

Texans for the Arts (Grants: \$ 1,000)

Abilene Cultural Affairs Council (Grants: \$ 20,500)

live performing arts in Abilene

\$20,500.00

\$1,000.00

\$21,500.00 Total

### Attachment to Form 990 Abilene Arts Alliance 75-2411239 FYE 12-31-09

Line 22, Part II	Investments
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	Endowment Fund at Community Foundation of Abilene (value at 12-31-09)	\$ 659,992.86
	Cash	82,891.71
		\$ 742,884.57 ======
Line 20, Part	I	
	Unrealized gain on endowment fund Realized loss on endowment fund BOY cash adjustment -Draft acct	\$ 134,431.66 (19,326.97) 50,920.56
		\$ 166,025.25 =======
Line 4, Part I		
	Net income from endowment fund at Community Foundation of Abilene Bank interest	\$ 6,912.32 479.93
		\$ 7,392.25 =======