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Form 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 Fo	r the	2009 ca	lendar yea	r, or tax year beginning 06-01-20	09 and ending 05-31-201	0				
<b>B</b> Ch	eck ıf a	pplicable	Please	C Name of organization Ringling College of Art and Design			D Employer ide	ntification number		
☐ Add	dress ch	nange	use IRS label or				59-063790			
┌ Na	me cha	nge	print or	Doing Business As			E Telephone nu	Imper		
┌ Init	al retu	rn	type. See Specific	Number and street (or P O box if ma	all is not delivered to street addre	ess) Room/suite	(941) 351-5	5100		
Г те	mınate	d	Instruc- tions.	2700 North Tamiami Trail		, , , , , , , , , , , , , , , , , , , ,	<b>G</b> Gross receipts	\$ 59,433,987		
☐ Am	ended	return		City or town, state or country, and Z	IP + 4		-			
_		n pending		Sarasota, FL 34234						
i Abi	Jicatioi	rpending				1				
				ne and address of principal office thompson	r		hıs a group returr ıates?	n for □ Yes 🔽 No		
			2700 N	North Tamıamı Trail		"	iates.	j les je No		
			Saraso	ta,FL 34234		H(b) Are	all affiliates includ	ed?		
		nt status	- FO4/ )	) ( 3 ) ◀ (insert no )				(see instructions)		
<u> </u>	x-exem	ipi status	J♥ 501(c)	) (3) <b>¬</b> (Insert no )   4947(a)(1) o	r   527	H(c) Gro	oup exemption nu	mber 🟲		
) W	ebsite	e: F www	v rınglıng e	du						
K For	n of or	ganızatıon	Corporat	tion Trust Association Other		<b>L</b> Year of t	formation 1931 M	State of legal domicile FL		
Pa	rt I	Sumr	nary				'	-		
Governance	1	ringling discerni teaching that pro	college of ng visual t g of technic vide histor	e organization's mission or most art and design is a small, private thinkers and ethical practitioners cal knowledge and skills with the rical, multicultural, global and futi	college offering programs l in their chosen area of art development of critical, co ure perspectives	and design r nceptual and	ingling's curricul creative abilities	um balances the and supports courses		
	2	Check t	hıs box 🟲	if the organization discontinued	its operations or disposed	of more than	n 25% of its net a	issets		
$\widetilde{g}$	3	Number	of voting r	nembers of the governing body (F	Part VI, line 1a)		. 3	35		
Activities &	4	Number	ofındepen	ndent voting members of the gove	rning body (Part VI, line 11	o)	. 4	32		
털	5	Total nu	ımber of en	nployees (Part V , line 2a)			5	832		
4	6	Total nu	ımber of vo	olunteers (estimate if necessary)		6	200			
		-		ted business revenue from Part V		7a				
	b	Net unre	elated busi	ness taxable income from Form 9	990-T, line 34		7b			
						Pri	or Year	Current Year		
an an	8			d grants (Part VIII, line 1h) .			11,755,809	10,443,947		
Ravenue	9			revenue (Part VIII, line 2g)			40,225,144	47,017,903		
桑	10			me (Part VIII, column (A), lines 3			394,931	396,017		
	11			art VIII, column (A), lines 5, 6d, dd lines 8 through 11 (must equa			-67,842	-10,723		
	12			ud illes o tillough 11 (illust equa		e	52,308,042	57,847,144		
	13			ar amounts paid (Part IX, column			2,307,813	3,351,644		
	14	Benefit	s paid to c	or for members (Part IX, column (	A), line 4)			0		
ch	15		s, other co	ompensation, employee benefits (	Part IX, column (A), lines !	5 –	24 026 242	24.060.725		
δ.		10)					21,036,212	21,860,735		
Expenses	16a			raising fees (Part IX, column (A)						
五	Ь			enses (Part IX, column (D), line 25) $\blacktriangleright \frac{1}{2}$						
	17			(Part IX, column (A), lines 11a-1		20,730,984	24,895,342			
	18			Add lines 13–17 (must equal Par		44,075,009	50,107,721			
. 02	19	Revenu	ue less exp	penses Subtract line 18 from line	. 12	<del> </del>	8,233,033	7,739,423		
Not Assets or Fund Balances						Beginnii	ng of Current Year	End of Year		
9 Kg	20	Total a	ıssets (Par	rt X, line 16)			163,868,053	164,630,994		
A A	21			Part X, line 26)			87,699,797	80,055,583		
쁐	22			d balances Subtract line 21 from			76,168,256	84,575,411		
Pai	rt II		ature Blo					<u> </u>		
				erjury, I declare that I have examined th correct, and complete Declaration of pre						
Sign Here		Signa	Signature of officer Date				1-04-15 e			
			r thompson or print nam							
 Paid		Preparer' signature		A Ratica		Check if self-	Preparer's identif			
	arer's	empol				empolyed 🕨				
Use		ıf self-employed),						_ EIN ▶		
·	<b>,</b>	address,	and ZIP + 4	1111 Metropolitan Avenue Suite 10	00		Phone no 🕨 (7	04) 377-1678		
				Charlotte, NC 28204				<u> </u>		
Mav	the IR	S discus	s this retu	rn with the preparer shown above	? (see instructions)			▼ Yes		

#### Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

Ringling College of Art and Design is a private, not-for-profit, fully accredited college offering the Bachelor's degree in 14 disciplines Advertising Design, Business of Art & Design, Computer Animation, Digital Filmmaking, Fine Arts, Game Art & Design, Graphic & Interactive Communication, Illustration, Interior Design, Motion Design, Painting, Photography & Digital Imaging, Printmaking and Sculpture The College is a member of the Association of Independent Colleges of Art and Design [AICAD] and is accredited by the National Association of Schools of Art and Design [NASAD], the Commission on Colleges of the Southern Association of Colleges and Schools to award the Bachelor of Fine Arts degree [SACS], and by the First Professional Degree Level by the Council for Interior Design Accreditation [CIDA], formerly [FIDER]

_		or 990-EZ?	ant program services during the	· · · · · · · ·	┌ Yes ┌ No
	If "Yes," describe	these new services on S	chedule O		
3			make sıgnıficant changes ın how ı		┌ Yes ┌ No
	If "Yes," describe	these changes on Scheo	ule O		
4	Section 501(c)(3)	and 501(c)(4) organiza	ts for each of the organization's th tions and section 4947(a)(1) trus and revenue, if any, for each progr	sts are required to report the am	
4a	(Code	) (Expenses \$	42,800,989 including grants of \$	3,351,644 ) (Revenue \$	47,115,812 )
	educational institution community art progra		ated program services to approximately 2	2,000 students in fully accredited four y	ear degree and non-credit
4b	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
4c	(Code	) (Expenses \$	ıncludıng grants of \$	) (Revenue \$	)
4d		ervices (Describe in Scl	·		
	(Expenses \$		luding grants of\$	) (Revenue \$	)
4e	Total program se	rvice expenses►\$	42,800,989		

Dart TV	Checklis	t of De	auired	Schadula	
allutv	CHECKIIS	LUIKE	uuneu	Scheuule	318

			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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
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		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
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		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
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		No
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	Yes	
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D,  Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? 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.			
	◆ 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," complete Schedule D, Parts XI, XII, and XIII	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	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	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Νο
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		Νο
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 U S? <i>If</i> "Yes," complete Schedule F, Part II	15		No
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 U S ? If "Yes," complete Schedule F, Part III	16		Νο
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? <i>If</i> "Yes," complete Schedule G, Part I	17		N o
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		N o
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νo

Par	Checklist of Required Schedules (continued)			
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		Νο
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	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 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	Yes	
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 questions 24b-24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
c	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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νo
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Νο
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		Νo
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		No
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		Νο
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	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
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 owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νο
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		Νο
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? <i>If</i> "Yes," complete Schedule R, Part I	33		Νο
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		No
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		No
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		No
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	Yes	

Part V	Statements	Regarding	Other	IRS Filings	and Tax	Compliance
--------	------------	-----------	-------	-------------	---------	------------

			Yes	No				
la	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  1b 0							
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<b>1</b> c						
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							
Ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see	2b	Yes					
a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this							
L	return?	3a 3b		Νο				
a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Νο				
b	If "Yes," enter the name of the foreign country  See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts							
а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο				
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo				
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						
ì	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	Yes					
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes					
	Organizations that may receive deductible contributions under section 170(c).							
	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	Yes					
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes					
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo				
	If "Yes," indicate the number of Forms 8282 filed during the year							
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νo				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo				
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g						
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h						
	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						
	Sponsoring organizations maintaining donor advised funds.							
а	Did the organization make any taxable distributions under section 4966?	9a						
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b						
)	Section 501(c)(7) organizations. Enter							
	Initiation fees and capital contributions included on Part VIII, line 12 10a							
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities							
L	Section 501(c)(12) organizations. Enter							
а	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 )							
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year							

2700 n tamıamı trail sarasota, FL 34234 (941) 359-7514

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

Se	ection A. Governing Body and Management						
			Yes	No			
		1					
_		1					
1a	Enter the number of voting members of the governing body 1a 35	!					
ь	Enter the number of voting members that are independent 1b 32	•					
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		Νο			
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		Νο			
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Νo			
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		No			
6	Does the organization have members or stockholders?	6		No			
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		N o			
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following						
а	The governing body?	8a	Yes				
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the		100				
•	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νo			
	ection B. Policies (This Section B requests information about policies not required by the Internal						
Re	evenue Code.)		3.5				
			Yes	No			
	Does the organization have local chapters, branches, or affiliates?	10a		No			
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?	10b					
11	L 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 the Form 990						
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes				
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise						
	to conflicts?	12b	Yes				
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	Yes				
13	Does the organization have a written whistleblower policy?	13	Yes				
14	Does the organization have a written document retention and destruction policy?	14	Yes				
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	Yes				
b	Other officers or key employees of the organization	15b	Yes				
	If "Yes" to line a or b, 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		Νο			
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?	16b					
	ection C. Disclosure						
17	List the States with which a copy of this Form 990 is required to be filed FL						
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(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 interest policy, and financial statements available to the public. See Additional Data Table						
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	ie orga	nızatıor	ı <b>-</b>			
	monica waid						

# Part VIII 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, and current key employees 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, or 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 i	not compen	sate any	y curi	rent	or fo	rmer	ffice	r, dırector, trustee	or key employee	
<b>(A)</b> Name and Title	(B) Average hours	<b>(C)</b> Position (check all that apply)						<b>(D)</b> Reportable compensation	<b>(E)</b> Reportable compensation	<b>(F)</b> Estimated amount of other
	per week	Institutional Trustee Individual trustee or director		Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data										

2	Total number of individuals (including but not limited to those listed above) who received more than	
	#100 000	

Z	rotal number of individuals (including but not limited to those listed above) who received more than
	\$100,000 in reportable compensation from the organization 16

			Yes	No	
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual				
	on the lar it res, complete schedule Froi such mulvidual	3		No	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such				
	ındıvıdual	4	Yes		
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services				
	rendered to the organization? If "Yes," complete Schedule J for such person	5		Νo	

### **Section B. Independent Contractors**

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	( <b>B</b> ) Description of services	(C) Compensation
willis a smith construction 5001 lakewood ranch blvd n sarasota, FL 34240	construction management	1,014,939
custodial maintenance inc norma desor 4550 n lake drive sarasota, FL 34232	custodial services	739,671
lawson group inc 4910 lakewood ranch blvd suite 10 sarasota, FL 34240	architectural services	363,894
fiber solutions 12120 metro parkway fort meyers, FL 33966	technology ınstallatıons	234,466
compass group co bank of america illino po box 91337 chicago, IL 606931337	food service management	200,000
2 Total number of independent contractors (including but not limited to those listed above) \$100,000 in compensation from the organization ►10	who received more than	

Form 9								Page <b>9</b>
Part \	<b>/1111</b>	Statement o	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
mts =	1a	Federated cam	paigns 1a					
g in	Ь	Membership du	es <b>1b</b>					
ts,	C	Fundraising eve		234,216				
<u>=</u>	d	Related organiz  Government grants	rations 1d	508,102				
ons. Siri	e •	_	ons, gifts, grants, and <b>1f</b>	9,701,629				
buti	<u>'</u>	sımılar amounts no	butions included in					
Contributions, gifts, grants and other similar amounts	g	lines 1a-1f \$ _	93,885					
္မ	h	Total. Add lines	s 1a-1f	🔸	10,443,947			
<u> </u>				Business Code				
Program Serwce Revenue	2a	tuition & fees		900,099	38,959,320	38,959,320		
<u> 8</u>	b	auxiliary services		900,099	7,296,466	7,296,466		
¥CA	C C	continuing education	on	900,099	762,117	762,117		
Š	d e							
<u> </u>	f	All other progra	am service revenue					
<u>~</u>					47.047.000			
	g 3		s 2a-2f ome (including dividence		47,017,903			
			aramounts)	. F	185,321			185,321
	4	Income from inves	stment of tax-exempt bond p	proceeds 🕨				
	5	Royalties						
	6a	Gross Rents	(ı) Real	(II) Personal				
	ь	Less rental						
	c	expenses Rental income						
	d	or (loss) Net rental incoi	me or (loss)					
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	1,617,929					
	Ь	Less cost or other basis and sales expenses	1,407,233					
	c	Gain or (loss)	210,696		210,696			210,696
	d 8a	Gross income f	rom fundraising		210,696			210,696
Other Revenue		events (not inc \$ 234 of contributions See Part IV, lin	luding ,216 s reported on line 1c) le 18 a	83,478				
Ě	b c		penses <b>b</b> (loss) from fundraising e	179,610	-96,132			-96,132
•	9a	Gross income f	rom gaming activities ie 19					
	b c		penses b  (loss) from gaming activ	/ities				
	10a	Gross sales of returns and allo	ınventory, less					
	b c		oods sold <b>b</b> (loss) from sales of inve	entory ►				
		Miscellaneous	s Revenue	Business Code				
	11a	other revenue		900,099	85,409	85,409		
	b							
	C	Λ II α+b						
	d e	All other revenue Total. Add lines	ı					
	12		See Instructions		85,409			
	]	iotai ievellue.	oce manuchons	•	57,847,144	47,103,312	С	299,885

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	Section 501(c)(3) and 501(c)(4) organizations mu	•		(D)	
	ll other organizations must complete column (A) but are not required to		(B), (C), and	(D).	(D)
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	10,832	10,832		
2	Grants and other assistance to individuals in the	10,832	10,632		
	U.S. See Part IV, line 22	3,340,812	3,340,812		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,039,919		1,039,919	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	16,325,489	14,008,950	1,512,693	803,846
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	479,523	407,765	43,979	27,779
9	Other employee benefits	2,781,914	2,260,062	410,385	111,467
10	Payroll taxes	1,233,890	1,028,991	160,466	44,433
11	Fees for services (non-employees)	, , , , ,	. ,	· · ·	· · ·
а	Management				
ь	Legal	124,073		124,073	
c	Accounting	71,565		71,565	
d	Lobbying	10,000		10,000	
e	Professional fundraising See Part IV, line 17				
f	Investment management fees	50,530		50,530	
g	Other	1,755,029	1,557,574	187,056	10,399
12	Advertising and promotion	964,108	588,704	272,421	102,983
13	Office expenses	2,050,598	1,758,755	236,611	55,232
14	Information technology	586,593	583,319	3,274	
15	Royalties				
16	Occupancy	2,723,758	2,621,982	101,776	
17	Travel	530,015	421,812	69,855	38,348
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	234,760	189,322	35,820	9,618
20	Interest	2,529,361	2,212,100	317,261	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	8,285,407	7,697,556	587,851	
23	Insurance	336,335	323,319	13,016	
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)				
а	contracted food service	1,707,659	1,643,540		64,119
ь	other contracted servic	911,603	865,342	46,261	0
С	WRITE DOWN CAPITALIZED	505,961	505,961		
d	writeoff of loan fees	502,956		502,956	
e	student life programmin	393,278	388,778	4,500	
f	All other expenses	621,753	385,513	179,647	56,593
25	Total functional expenses. Add lines 1 through 24f	50,107,721	42,800,989	5,981,915	1,324,817
26	Joint costs. Check here ► ☐ If following SOP 98-2	,,	, ==,= 25	, :=,:==	, -,
	Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Pa	rt X	Balance Sheet					
					(A)		(B)
					Beginning of year	_	End of year
	1	Cash—non-interest-bearing			44.050.000	1	47.005.000
	2	Savings and temporary cash investments	•		14,056,202	2	17,685,263
	3	Pledges and grants receivable, net	•		10,651,521	3	14,490,986
	4	Accounts receivable, net			152,531	4	219,024
	5	Receivables from current and former officers, directors, trustee highest compensated employees Complete Part II of	s, key	employees, and			
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined under spersons described in section $4958(c)(3)(B)$ Complete Part II of		n 4958(f)(1)) and			
		Schedule L				6	
ssets	7	Notes and loans receivable, net				7	
8	8	Inventories for sale or use				8	
⋖	9	Prepaid expenses and deferred charges			1,089,648	9	967,209
	10a	Land, buildings, and equipment cost or other basis <i>Complete</i> Part VI of Schedule D	10a	146,095,404			
	b	Less accumulated depreciation	10b	37,042,441	108,666,139	10c	109,052,963
	11	Investments—publicly traded securities				11	
	12	Investments—other securities See Part IV, line 11			17,400,185	12	19,302,540
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			11,851,827	15	2,913,009
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			163,868,053	16	164,630,994
	17	Accounts payable and accrued expenses .			9,627,495	17	4,223,384
	18	Grants payable				18	
	19	Deferred revenue			908,575	19	754,943
	20	Tax-exempt bond liabilities			73,602,954	20	70,869,109
<u> </u>	21	Escrow or custodial account liability Complete Part IV of Schedu.	le D			21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified	•				
- 23		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D			3,560,773	25	4,208,147
	26	Total liabilities. Add lines 17 through 25			87,699,797	26	80,055,583
- N		Organizations that follow SFAS 117, check here ▶ 🔽 and comp	olet e l	ines 27			
Fund Balance		through 29, and lines 33 and 34.					
<u>a</u>	27	Unrestricted net assets			32,984,261	27	35,967,750
8	28	Temporarily restricted net assets			30,631,869	28	34,046,667
2	29	Permanently restricted net assets			12,552,126	29	14,560,994
Ξ		Organizations that do not follow SFAS 117, check here ► □ and	ıd con	ıplet e			
5		lines 30 through 34.					
	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other for	ınds			32	
Net	33	Total net assets or fund balances			76,168,256	33	84,575,411
	34	Total liabilities and net assets/fund balances			163,868,053	34	164,630,994

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	▼ Separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
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	Yes	

Form **990** (2009)

OMB No 1545-0047

Inspection

# **SCHEDULE A**

(Form 990 or 990EZ)

Name of the organization

Ringling College of Art and Design

Department of the Treasury Internal Revenue Service

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

**Public Charity Status and Public Support** 

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

**Employer identification number** 

Do	rt I	Book	on for Dul	blic Charity Stat	us (All org	anizations	must sampl	loto this pai	59-063790			
				<b>blic Charity Stat</b> e foundation because						ucuons		
1	- Gain			on of churches, or as					,			
2	,    -							( <b>1</b> )( <b>A</b> )( 1).				
	<b>-</b>			in section 170(b)(1)				170/5//1//	/ ::: .			
3	<u> </u>			perative hospital serv						= ·		
4	ı			organization operate y, and state	ed in conjunc	tion with a h	ospital desci	ribed in <b>secti</b>	on 1/0(b)(1)	( <b>A</b> )(III). Ent	erthe	
5	$\vdash$	An orga	anızatıon ope	erated for the benefit	of a college	or university	owned or op	erated by a g	jovernmental	unıt describ	 ed ın	
	_			<b>A)(iv).</b> (Complete Pa	•							
6	Ŀ	A feder	al, state, or	local government or	governmenta	al unit descri	bed in <b>sectio</b>	n 170(b)(1)(	(A)(v).			
7		describ	ed ın	t normally receives a  A)(vi) (Complete Pa		part of its s	upport from a	ı government	al unit or fror	m the genera	l public	C
8	$\Gamma$	A comn	nunity trust	described in <b>section</b>	170(b)(1)(A	(Com	olete Part II	)				
9	$\sqcap$	Anorga	nization tha	t normally receives	(1) more tha	n 331/3% of	fits support f	rom contribu	tions, membe	ership fees, a	nd gro	SS
		receipt	s from activi	ties related to its ex	empt functio	ns—subject	to certain ex	ceptions, and	d (2) no more	than 331/3%	6 of	
		ıts supp	oort from gro	ss investment incom	ne and unrela	ated busines	s taxable ınc	ome (less se	ction 511 ta	x) from busır	nesses	
		acquire	d by the org	anızatıon after June 3	30,1975 Se	e section 50	<b>9(a)(2).</b> (Co	mplete Part 1	III )			
10	Г	An orga	anization org	anized and operated	exclusively	to test for pu	ublic safety S	see <b>section 5</b> 0	09(a)(4).			
11												
•	_	аГ	— Туре I	<b>b</b> Type II ox, I certify that the c	c	Type III	- Functionally	/ integrated	d	Type II		
e	'	other th		on managers and oth								
f		check t	his box	received a written de						[ supporting	organız	zation,
g			ugust 17, 2 g persons?	006, has the organiz	ration accept	ted any gift o	or contributio	n from any of	tne			
				ectly or indirectly co	ntrols, eithe	r alone or to	gether with p	ersons descr	ribed in (ii)		Yes	No
		and (III)	) below, the g	governing body of the	the support	ed organizat	ion?			11g(i)		
				r of a person describ						11g(ii)		
		• •	•	ed entity of a person	• •		ove?			11g(iii	_	<del>                                     </del>
h				g information about t							<u>′ 1</u>	
	(i) Name Suppo rganiz	e of	(ii) EIN	(iii)  Type of  organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organizate col (i) list your gove docume	e ion in ted in rning	(v) Did you not organizat col (i) of suppor	ion in your	(vi) Is the organizat col (i) org	e ıon ın anızed	Am	( <b>vii)</b> ount of pport?
				instructions))	Yes	No	Yes	No	Yes	No		
								1			1	
								1		1		
Tota	I		1	I		I	1	1	1	1	1	

ınstructions

P	Support Schedule (Complete only if yo					and 170(b)	(1)(A)(vi)
S	ection A. Public Support	a checked tile	DOX OII IIIC 3,	,, or o or rare.	÷·/		
	endar year (or fiscal year beginning	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	( <b>b)</b> 2006	(6) 2007	(d) 2008	(e) 2009	(I) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual						
_	grants ") Tax revenues levied for the						
2	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 shown on line 11, column						
_	(f) <b>Dublic Support</b> Subtract line F from						
6	<b>Public Support.</b> Subtract line 5 from line 4						
S	ection B. Total Support	1		-			
	endar year (or fiscal year beginning	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	( <b>b</b> ) 2000	(6) 2007	(d) 2008	(e) 2009	(1) Total
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
9	sources Net income from unrelated						
9	business activities, whether or						
	not the business is regularly						
	carried on						
10	Other income (Explain in Part						
	IV ) Do not include gain or loss						
	from the sale of capital assets						
11	Total support (Add lines 7						
4.5	through 10)	/5					
12	Gross receipts from related activities	,	•			12	
13	First Five Years If the Form 990 is f	or the organizati	on's first, second	, third, fourth, or	fifth tax year as a	501(c)(3) orga	inization, ▶□
	check this box and <b>stop here</b>						-1
S	ection C. Computation of Pub	lic Support P	ercentage				
14	Public Support Percentage for 2009			11 column (f))		14	
15	Public Support Percentage for 2008	Schedule A . Pa	rt II. line 14			15	
	33 1/3% support test—2009. If the	•	,	v on line 13 and	line 14 is 33 1/30		k this hox
<b></b>	and <b>stop here.</b> The organization qua	-		·	IIIIC 14 13 33 1/3/	o or more, ence	<b>▶</b> □
ь	33 1/3% support test—2008. If the				5a, and line 15 is	33 1/3% or moi	
	box and <b>stop here.</b> The organization				,		▶
17a	10%-facts-and-circumstances test-	<b>-2009.</b> If the org	anızatıon dıd not	check a box on lı	ne 13, 16a, or 16	b and line 14	
	ıs 10% or more, and ıf the organizat						
	in Part IV how the organization mee	ts the "facts and	l cırcumstances"	test The organiz	ration qualifies as	a publicly supp	
L	organization	_2009 Ifthe c==	onization did net	chack a bay as li	no 12 165 164	or 17a and line	▶□
D	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ	_					
	Explain in Part IV how the organizat						clv
	supported organization						<b>▶</b> ┌
10	Deiveta Farmdation Ifthe averages	on did not obselv	a hay an line 12	16- 16- 17-	17	hay and cas	•

**▶**□

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

	(Complete only if you	cnecked the	box on line 9 o	r Part I.)			
	ction A. Public Support				1	T	ı
Cale	ndar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	( <b>d)</b> 2008	(e) 2009	<b>(f)</b> 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						
3	purpose Gross receipts from activities that				+		
3	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	A mounts included on lines 1, 2, and 3 received from disqualified						
	persons				1		
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						
с	Add lines 7a and 7b						
8	Public Support (Subtract line 7c						
	from line 6 )						
	ction B. Total Support		1			1	Γ
Cale	ndar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	<b>(c)</b> 2007	( <b>d)</b> 2008	(e) 2009	(f) Total
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
ь	Unrelated business taxable						
	ıncome (less section 511 taxes)						
	from businesses acquired after						
_	June 30, 1975 Add lines 10a and 10b						
c 11	Net income from unrelated						
	business activities not included						
	ın lıne 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,						
14	11 and 12 ) First Five Years If the Form 990 is for	or the organizat	lon's first, second	L third fourth or	l fifth tax vear as a	1 a 501(c)(3) organ	l uzation
	check this box and <b>stop here</b>	or the organizat		., 4,	men tax your as t	(c)(c) c.gu.	<b>▶</b> ┌
	ction C. Computation of Publ						
15	Public Support Percentage for 2009	(line 8 column	(f) divided by line	13 column (f))		15	
16	Public support percentage from 200	8 Schedule A , F	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	ome Percenta	ge			
17	Investment income percentage for 2	<b>009</b> (line 10c c	olumn (f) dıvıded	by line 13 columi	n (f))	17	
18	Investment income percentage from	<b>2008</b> Schedule	A, Part III, line 1	L 7		18	
19a	33 1/3% support tests—2009. If the	organization di	d not check the b	ox on line 14, and	d line 15 is more	than 33 1/3% and	d line 17 is not
	more than 33 1/3%, check this box a	ind <b>stop here.</b> T					
L	organization 33 1/3% support tests—2008. If the	► C	d not chastes here	on line 14 amilion	100 and line 4	5 ic mara +ha= 22	1/20/2 and line
b	שר בו בע suppoit tests—zouo. If the	organization (I	и посепеска вох	OILLINE TH OLINE	= ⊥⊃a, anu nne 1(	us more man 33	1/370 and ine

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV

**Supplemental Information.** 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 A (Form 990 or 990-EZ) 2009

DLN: 93493105005101

# OMB No 1545-0047

# **SCHEDULE C**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

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

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities),

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

Se If the	ction 501(c)(3) organizations that	t have filed Form 5/68 (election und t have NOT filed Form 5768 (electio s," to Form 990, Part IV, Line 5 ( zations, Complete Part III	n under section 501	(h)) Complete Part II-B Do n	ot complete Part II-A
Na	me of the organization gling College of Art and Design	editions complete rare in			tification number
Dar	t I-A Complete if the or	ganization is exempt unde	r section 501/	59-0637903	organization
	-				organization.
1	•	ganization's direct and indirect po	litical campaign act	civities in Part IV	
2	Political expenditures			•	\$
3	Volunteer hours				
Par	t I-B Complete if the or	ganization is exempt unde	er section 501(	c)(3).	
1	Enter the amount of any excise	e tax incurred by the organization	under section 4955	<b>&gt;</b>	\$
2	Enter the amount of any excise	e tax incurred by organization man	agers under section	n 4955 🕨	\$
3	If the organization incurred a s	ection 4955 tax, did it file Form 4	720 for this year?		┌ Yes ┌ No
4a	Was a correction made?				┌ Yes
ь	If "Yes," describe in Part IV				
Par	t I-C Complete if the or	ganization is exempt unde	r section 501(	c) except section 50:	L(c)(3).
1	Enter the amount directly expe	ended by the filing organization for	section 527 exemp	ot function activities 🕨	\$
2	Enter the amount of the filing o exempt funtion activities	rganızatıon's funds contributed to	other organizations	s for section 527	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter he	re and on Form 112	0-POL, line 17b	¢
4	Did the filing organization file <b>F</b>	Form 1120-POL for this year?			⊤ Yes
5	were made For each organizat contributions received that we	nd employer identification number ion listed, enter the amount paid fi re promptly and directly delivered iittee (PAC) If additional space is	rom the filing organi to a separate politi	ızatıon's funds Also enter t cal organızatıon, such as a	he amount of political
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0 -

e Grassroots ceiling amount (150% of line 2d, column (e))

**f** Grassroots lobbying expenditures

Pa	rt II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c	)(3) and file	d Form 5768	(election
	Check   If the filing organization belongs to a Check   If the filing organization checked box		d" provisions apply	,		
<u> </u>	Limits on Lobbying E  (The term "expenditures" means ar	Expenditures			(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	yıng)			
c	Total lobbying expenditures (add lines 1a and 18	b)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount f	from the following table	ın both			
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxa 20% of the amount on lir				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	0		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,0	000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,00	00		
	Over \$17,000,000	\$1,000,000				
		•				
g	Grassroots nontaxable amount (enter 25% of lin	ne 1 f)				
h	Subtract line 1g from line 1a If zero or less, enter	er -0-				
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -				
j	If there is an amount other than zero on either line section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file F	orm 4720 repoi	rtıng	┌ Yes ┌ No
	(Some organizations that made a columns below. See the	he instructions fo	ection do not l r lines 2a thro	nave to com ugh 2f on pa		ne five
	Lobbying Exp	enditures During	4-Year Averag	ing Period	I	ı
	Calendar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	<b>(c)</b> 2008	( <b>d)</b> 2009	<b>(e)</b> Total
2a	Lobbying non-taxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots non-taxable amount					

Part II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768
	(election under section 501(h)).

		(a	a)	(b)	
		Yes	No	A mount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?		Νo		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Νo		
c	Media advertisements?		Νo		
d	Mailings to members, legislators, or the public?		Νo		
e	Publications, or published or broadcast statements?		Νo		
f	Grants to other organizations for lobbying purposes?		Νo		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		Νo		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo		
i	Other activities? If "Yes," describe in Part IV	Yes		10,000	
j	Total lines 1c through 1i		•	10,000	
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Νo		
b	If "Yes," enter the amount of any tax incurred under section 4912				
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				

#### Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section Part III-A 501(c)(6).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		

#### Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

- Dues, assessments and similar amounts from members 1 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a Current year Carryover from last year
- Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues
- If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)

### Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Ident if ier	Ret urn Reference	Explanation
· · · · · · · · · · · · · · · · · · ·	Activities	the college employs a lobbyist for the purposes of surveying activity concerning the florida resident access grant which benefits florida college students and the community contribution tax credit program which supports donations from eligible donors to the college's capital construction and improvement program

1

2b

2c 3

4

5

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DLN: 93493105005101

OMB No 1545-0047

**SCHEDULE D** (Form 990)

Department of the Treasury

**Supplemental Financial Statements** 

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

Open to Public

erna	l Revenue Service	► Attach to Fo	orm 990. ► See separate in	st ruct ions.			Inspec	tion
	me of the organi				Emp	oyer identifica	ation numb	er
Ring	gling College of Art a	and Design			50-0	0637903		
Рa	rt I Organi	izations Maintaining Donor A	dvised Funds or Othe	er Similar F			. Comple	te if the
	organız	zation answered "Yes" to Form 99	1		ı <u>-</u>			
			(a) Donor advised	d funds	(	<b>b)</b> Funds and o	other accou	unts
•	Total number at	,						
!	33 3	tributions to (during year)						
•		its from (during year)						
		e at end of year						
	funds are the o	ration inform all donors and donor advi rganization's property, subject to the	organization's exclusive le	gal control?			☐ Yes	☐ No
i	-	zation inform all grantees, donors, and haritable purposes and not for the ben	<del>-</del>	-				
	•	ermissible private benefit		41,551, 51 151 4.	., στσ	, parpose	☐ Yes	┌ No
Pa	rt III Consei	rvation Easements. Complete	ıf the organization ansv	wered "Yes" t	o Form	າ 990, Part I՝	/, line 7.	
	_ ` ` ` `	conservation easements held by the o	· -					
	_	on of land for public use (e g , recreati	· · · · ·	servation of an		•	•	a
	<u></u>	of natural habitat	) Pre	servation of a	certified	nistoric struc	ture	
	·	on of open space						
2	•	s 2a-2d if the organization held a qual he last day of the tax year	ıfıed conservatıon contrıbu	tion in the form	ofaco	nservation		
						Held at the	End of the	e Year
а		of conservation easements			2a			
Ь	_	restricted by conservation easements			2b			
<b>c</b>		servation easements on a certified his		(a)	2c			
d		servation easements included in (c) a			2d			
3	Number of cons	servation easements modified, transfe	erred, released, extinguishe	ed, or terminate	d by th	e organization	during	
	the taxable yea	ar ▶						
ļ	Number of stat	es where property subject to conserva	ation easement is located l	<b>-</b>				
;	_	nization have a written policy regarding the conservation easements it holds?		nspection, hand	dling of	violations, and	☐ Yes	┌ No
•	Staff and volun	teer hours devoted to monitoring, insp	pecting and enforcing cons	ervation easem	nents du	iring the year	<b>-</b>	
,	A mount of expe	enses incurred in monitoring, inspecti	ng, and enforcing conserva	ition easements	s during	the year 🟲 \$		
ţ.		servation easement reported on line 2 ) and 170(h)(4)(B)(ii)?	2(d) above satisfy the requ	irements of sec	tion		☐ Yes	┌ No
)	balance sheet,	escribe how the organization reports co and include, if applicable, the text of t in's accounting for conservation easer	the footnote to the organiza		•	•		
ar	t IIII Organi	izations Maintaining Collection etc. If the organization answered '	ns of Art, Historical		or Otl	ner Similar	Assets.	
la	If the organizat art, historical t	tion elected, as permitted under SFAS reasures, or other similar assets held t XIV, the text of the footnote to its fir	116, not to report in its re for public exhibition, educ	evenue stateme ation or researd	ch in fui			е,
b	historical treas	tion elected, as permitted under SFAS sures, or other similar assets held for owing amounts relating to these items	public exhibition, education				•	
	(i) Revenues in	ncluded in Form 990, Part VIII, line 1				<b>►</b> \$		
	(ii) Assets incl	luded in Form 990, Part X						
!	If the organizat	tion received or held works of art, hist nts required to be reported under SFA			or financ			
а	Revenues inclu	uded in Form 990. Part VIII. line 1				<b>▶</b> - \$		

**b** Assets included in Form 990, Part X

ar.	TIPE Organizations Maintaining Co	illections of Art	, HISTOI	icai ire	asures, or	Otne	er Similai	ASSE	ets (co	ntinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	y of the fo	llowing th	at are a sıgnıfı	cant	use of its co	llectio	n	
а	Public exhibition		d 🗆	Loan or	exchange pro	gram:	s			
b	Scholarly research		еГ	Other						
c	Preservation for future generations									
ı	Provide a description of the organization's c Part XIV	ollections and expla	ın how th	ey further	the organization	on's e	xempt purp	ose in		
5	During the year, did the organization solicit assets to be sold to raise funds rather than		,				mılar	굣	Yes	┌ No
aı	t IV Escrow and Custodial Arrang					ed "`	Yes" to For	m 990	ວ,	
	Part IV, line 9, or reported an ar			·						
.a	Is the organization an agent, trustee, custod included on Form 990, Part X?		•		ons or other as	ssets	not	Γ	Yes	Г No
b	If "Yes," explain the arrangement in Part XI	V and complete the	following	table						
						<u> </u>		A mou	unt	
с	Beginning balance					1c				
d	Additions during the year					1d				
е	Distributions during the year					1e				
f	Ending balance					1f				
a	Did the organization include an amount on F	orm 990, Part X, line	e 21?					Γ	Yes	☐ No
b	If "Yes," explain the arrangement in Part XI\									
'a	rt V Endowment Funds. Complete	If the organization (a)Current Year		red "Yes' or Year	' to Form 990 (c)Two Years Ba				o)Four V	aare Back
а	Beginning of year balance	17,998,684		21,572,835	(c) Two Tears Be	ack (	a)Tillee Tears	Dack (e	<u>= 71 Out 16</u>	cars back
-	Contributions	1,901,933		1,073,027		$\dashv$		-+		
c	Investment earnings or losses	1,764,143		-3,864,911		-				
d	Grants or scholarships	37,003		232,125		$\neg$				
e	Other expenditures for facilities			498,500						
	and programs							$\rightarrow$		
f	Administrative expenses	50,530		51,642		_		$-\!\!\!+$		
g	End of year balance	21,577,227		17,998,684						
	Provide the estimated percentage of the year		as							
а	Board designated or quasi-endowment 🕨	31 000 % %								
b	Permanent endowment 🕨 69 000 % %	)								
c	Term endowment ► 0 % %									
а	Are there endowment funds not in the posse organization by	ssion of the organiza	ation that	are held a	and administer	ed fo	r the			NI-
	(i) unrelated organizations							3a(i)	Yes Yes	No
	(ii) related organizations					٠. ٠		3a(ii)	_	Νο
ь	If "Yes" to 3a(II), are the related organization			dule R?				3b		
	Describe in Part XIV the intended uses of th									
aı	t VI Investments—Land, Building	s, and Equipme	nt. See	Form 99	0, Part X, lin	e 10.				
	Description of investment			n) Cost or otl sis (investme			(c) Accumu depreciati		( <b>d</b> ) Boo	k value
a	Land				16,42	29,232			16	5,429,232
b	Buildings				93,95	8,074	19,45	7,401	74	1,500,673
c	Leasehold improvements				Ğ	2,416	4	4,462		47,954
d	Equipment		.		34,74	14,829	17,54	0,578	17	7,204,251
e	Other		. $\vdash$		87	70,853				870,853

109,052,963

Part VII Investments—Other Securities. See	Form 990, Part X, line 1	
<ul><li>(a) Description of security or category (including name of security)</li></ul>	(b)Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives		Social single si
Closely-held equity interests		
Other cash value of life insurance	42,805	F
corporate bonds	786,915	F
mutual funds	11,327,713	
us government obligations	130,089	
debt related securities	2,611,639	F
hedged equity fund	1,040,094	F
distressed opportunities fund	1,268,965	F
investment in property	2,094,320	F
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	25,002,010	
Part VIII Investments—Program Related. See		(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13 )		
Part IX Other Assets. See Form 990, Part X, lin	e 15.	
(a) Descrip	tion	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1.	<i>E</i> )	
Part X Other Liabilities. See Form 990, Part X		· · · · · · · · · · · · · · · · · · ·
(-) D     -	( <b>b</b> ) A mount	
	(B) Amount	
Federal Income Taxes		
funds held in custody for others	63,919	
annuity payable	774,901	
interest rate swap liability	2,880,128	
student deposits	489,199	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25 ) ▶	4,208,147	

Pai	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	57,847,144
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	50,107,721
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	7,739,423
4	Net unrealized gains (losses) on investments	4	1,326,517
5	Donated services and use of facilities	5	
6	Investment expenses	6	50,530
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-709,315
9	Total adjustments (net) Add lines 4 - 8	9	667,732
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	8,407,155
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Re	turn
1	Total revenue, gains, and other support per audited financial statements	1	52,528,197
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments 2a		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d -3,305,962		
e	Add lines 2a through 2d	2e	-3,305,962
3	Subtract line <b>2e</b> from line <b>1</b>	3	55,834,159
4	A mounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
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	4c	2,012,985
5	Total Revenue Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 12)	5	57,847,144
Par	Reconciliation of Expenses per Audited Financial Statements With Expenses	per F	
1	Total expenses and losses per audited financial statements	<sub>1</sub>	46,141,033
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
ь	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV)		
e	Add lines <b>2a</b> through <b>2d</b>	2e	179,610
3	Subtract line <b>2e</b> from line <b>1</b>	3	45,961,423
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 4a 50,530		
b	Other (Describe in Part XIV) 4b 4,095,768	]	
c	Add lines <b>4a</b> and <b>4b</b>	4c	4,146,298
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 18 )	5	50,107,721
Pa	t XIV Supplemental Information		

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information

Ident if ier	Return Reference	Explanation
Part III, Line 4		paintings, prints and sculpture reflecting a myriad of artistic styles donated by individuals to the college for selective public display
Part V , Line 4	Description of Intended Use of Endowment Funds	endowment funds are used to support student scholarships, academic programs and institutional support
Part X	Description of Uncertain Tax Positions Under FIN 48	THE COLLEGE'S POLICY IS TO RECORD A LIABILITY FOR ANY TAX POSITION TAKEN THAT IS BENEFICIAL TO THE COLLEGE, EXCLUDING ANY RELATED INTEREST AND PENALTIES, WHEN IT IS MORE LIKELY THAN NOT THE POSITION TAKEN BY MANAGEMENT WITH RESPECT TO A TRANSACTION OR CLASS OF TRANSACTIONS WILL BE OVERTURNED BY A TAXING AUTHORITY UPON EXAMINATION MANAGEMENT BELIEVES THERE ARE NO SUCH POSITIONS AS OF MAY 31, 2010 AND ACCORDINGLY, NO LIABILITY HAS BEEN ACCRUED
Part XI, Line 8 - Other Adjustments		unrealized loss on interest rate swap -709315
Part XII, Line 2d - Other Adjustments		scholarship allowance shown net of revenue on financials - 3317812 investment appreciation designated for operations 11850
Part XII, Line 4b - Other Adjustments		non-operating activities on financials gifts 1901933 non- operating activities on financials investment income 79966 NON-operating activities on financials REALIZED GAIN 210696 fundraising expenses -179610
Part XIII, Line 2d - Other Adjustments		fundraising expenses 179610
Part XIII, Line 4b - Other Adjustments		write off of loan fees 502956 scholarship allowance shown net of revenue on financials 3317812 write down of capitalized assets 275000

### **Additional Data**

Software ID: Software Version:

**EIN:** 59-0637903

Name: Ringling College of Art and Design

Form 990, Schedule D, Part VII - Investments— Other Securities

<ul><li>(a) Description of security or cateory (including name of security)</li></ul>	(b)Book value	(c) Method of valuation Cost or end-of-year market value
cash value of life insurance	42,805	F
corporate bonds	786,915	F
mutual funds	11,327,713	F
us government obligations	130,089	F
debt related securities	2,611,639	F
hedged equity fund	1,040,094	F
distressed opportunities fund	1,268,965	F
investment in property	2,094,320	F

**Employer identification number** 

#### **SCHEDULE E**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Ringling College of Art and Design

# **Schools**

►Complete if the organization answered "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

2009

Open to Public

	59-0637903			
			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain the policy is published on the college's website for prospective student applicants	3	Yes	
4	Does the organization maintain the following?			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
Ь	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	If you answered "No" to any of the above, please explain If you need more space, use Schedule O (Form 990)			
5	Does the organization discriminate by race in any way with respect to			
а	Students' rights or privileges?	5a		No
b	Admissions policies?	5b		No
c	Employment of faculty or administrative staff?	5с		Νo
d	Scholarships or other financial assistance?	5d		No
е	Educational policies?	5e		Νo
f	Use of facilities?	5f		No
g	Athletic programs?	5g		Νo
h	Other extracurricular activities?	5h		Νo
6a	If you answered "Yes" to any of the above, please explain If you need more space, use Schedule O (Form 990)  Does the organization receive any financial aid or assistance from a governmental agency?		Yes	
Ь	Has the organization's right to such aid ever been revoked or suspended?	6b		Νo
7	If you answered "Yes" to either line 6a or line 6b, explain on Schedule O (Form 990) #  Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05  of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Schedule O (Form	7	Yes	
	agn)	'	1162	I

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In-person solicitations

DLN: 93493105005101

OMB No. 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

# **Supplemental Information Regarding Fundraising or Gaming Activities**

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

Internal Revenue Service

Department of the Treasury Attach to Form 990 or Form 990-EZ. P See separate instructions.

Name of the organization Employer identification number Ringling College of Art and Design Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations Internet and e-mail solicitations Solicitation of government grants Special fundraising events Phone solicitations

If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization Form 990-EZ filers are not required to complete this table

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising activities?

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		fundraiser have custody or control of		fundraiser have custody or control of		fundraiser have custody or control of contributions?		fundraiser have custody or control of		(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization																												
		Yes	No																																							
Total																																										

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

Pai	rt II	Fundraising Events. Com more than \$15,000 on Form					repor	ted
			(a) Event #1  avant garde (event type)	(b) Event #2  golf outing (event type)	(c) O ther Events  3 (total number)	(d) Tot (Add col		
Mare €	1	Gross receipts	138,790	101,145	77,759		31	7,694
Reveilue	2	Less Charitable contributions	99,928	86,155	48,133		23	4,216
	3	Gross income (line 1 minus line 2)	38,862	14,990	29,626		8	3,478
	4	Cash prizes						
ရှ	5	Non-cash prizes		1,660				1,660
Expenses	6	Rent/facility costs	110					110
	7	Food and beverages	22,363	6,935	22,870		5	2,168
Direct	8	Entertainment			3,216			3,216
莅	9	Other direct expenses .	51,515	43,261	27,680		12	2,456
	10	Direct expense summary Add lin	es 4 through 9 ın column	(d)			17	9,610
	11	Net income summary Combine III	nes 3, column d, and line	10	🕨		- 9	6,132
Par	t III	<b>Gaming.</b> Complete if the or \$15,000 on Form 990-EZ, lir		"Yes" to Form 990, Pa	rt IV, line 19, or repo	rted mor	e thar	1
Reveilue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Tot (Add col col		
	1	Gross revenue						
Ses	2	Cash prizes						
Expenses	3	Non-cash prizes						
Direct B	4	Rent/facility costs						
퉙_	5	Other direct expenses						
	6	Volunteer labor	Г Yes	┌ Yes	∀es			
		Direct expense summary Add lines  Net gaming income summary Com						
9 a b	Ist	er the state(s) in which the organiza he organization licensed to operate No," Explain			<del></del> .	· 9a	Yes	No
10a b	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?							
11 12	Is t	es the organization operate gaming a the organization a grantor, beneficia ned to administer charitable gaming	ry or trustee of a trust or	a member of a partnersh	p or other entity	11 12 99 or 990-	EZ) 20	009

		Yes	No
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records		
	Name 🟲		
	Address -		
15a	Does the organization have a contract with a third party from whom the organization receives gaming		
	revenue?	,	
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the	+	
	amount of gaming revenue retained by the third party 🟲 \$		
c	If "Yes," enter name and address		
	Name 🟲		
	Address •		
16			
16	Gaming manager information		
	Name 🟲		
	Name F		
	Gaming manager compensation 🕨 \$		
	Description of services provided -		
	Director/officer Employee Independent contractor		
	I Independent contractor		
<b>.7</b>	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	<u> </u>	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent		
	in the organization's own exempt activities during the tax year ▶ \$	1	

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DLN: 93493105005101 OMB No 1545-0047

(Form 990)

Department of the Treasury

Internal Revenue Service

Schedule I

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

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

Open to Public

Name of the organization						Employer identifica	ition number
Ringling College of Art and Des	sign					59-0637903	
Part I General Infor	mation on Gra	nts and Assistance					
the selection criteria use  Describe in Part IV the c	ed to award the gra organization's proc	substantiate the amount of to nts or assistance? edures for monitoring the us	e of grant funds in the	United States			F Yes □
Form 990, Part	IV, line 21 for a	e to Governments and ny recipient that receive 1990) if additional space	d more than \$5,000	. Check this box if n	io one recipient receiv	ed more than \$5,00	0. Use
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)		(h) Purpose of grand or assistance
		d government organizations					
For Privacy Act and Paperwork Re	eduction Act Notice,	, see the Instructions for Forn	າ 990.	Cat No 50055P		Sche	dule I (Form 990) 2009

Part III	Grants and Other Assista	nce to Individuals in the United States	. Complete if the organization	answered "Yes'	" to Form 990,	Part IV, line 2	2.
	Use Schedule I-1 (Form 990	) if additional space is needed.					

(a)Type of grant or assistance	( <b>b)</b> Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
scholarships & grants	229	2,147,870			
See Additional Data Table					
		-			·

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Ident if ier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 disbursements to students receiving financial aid are made in accordance with institutional procedures to ensure that those receiving aid are qualifying recipients federal financial aid and/or assistance from governmental agencies is distributed and monitored in accordance with federally approved need analysis criteria or other agency provided criteria
•		

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -**Compensation Information** 

DLN: 93493105005101

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

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

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name	of	t he	org	gar	iza	t ioı	n
Rıng lıng	Co	llege	of	Art	and	De	sıgı

**Employer identification number** 

	59-003/903			
Pa	art I Questions Regarding Compensation		1	<u> </u>
			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			
	Travel for companions Payments for business use of personal residence			
	Tax idemnification and gross-up payments F Health or social club dues or initiation fees			
	Discretionary spending account  Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	1b		No
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	_	,,	
	officers, unectors, trustees, and the CLO/Executive Director, regarding the items checked in line 1a.	2	Yes	
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			
	✓ Compensation committee			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	Form 990 of other organizations  Approval by the board or compensation committe	е		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organ or a related organization	ızatıon		
а	Receive a severance payment or change-of-control payment?	4a		Νo
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only $501(c)(3)$ and $501(c)(4)$ organizations only must complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a		Νo
b	Any related organization?	5b		Νο
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		Νo
ь	Any related organization?	6b		Νο
	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 payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was			
	subject to the initial contract exception described in Regs-section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		N o
0				INO
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulatio section 53 4958-6(c)?	ns q		

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

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

Note. The sum of columns (B)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	( <b>D)</b> Nontaxable	(E) Total of columns	<b>(F)</b> Compensation	
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ	
larry r thompson	(ı) (ıı)	270,560 0	10,000 0	76,516 0	57,250 0	31,307 0	445,633 0		
tracy a wagner	(I)	153,397 0	0 0	20,518 0	8,924 0	18,758 0	201,597 0		
melody m weiler	(ı) (ıı)	174,693 0	0 0	4,332 0	0	12,138 0	191,163 0		
christine c degeorge	(ı) (ıı)	158,155 0	0 0	12,981 0	8,835 0	22,176 0	202, <b>14</b> 7 0		
lance burchett	(ı) (ıı)	162,923 0	0 0	16,525 0	9,098	26,307 0	214,853		
mahmoud pegah	(II)	153,302 0	0 0	24,704 0	9,057 0	17,748 0	204,811		
tammy walsh	(I)	134,812 0	0 0	10,383 0	7,100 0	11,898 0	164,193 0		

### 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

Ident if ier	Return Reference	Explanation									
	ŕ	Dr Larry R Thompson, President receives a taxable housing allowance gross-up payment which is reported as Reportable Compensation on Form 990, Page 7, Part VII, Section A, Column D and Schedule J, Page 2, Part II, Column B(iii) The Organization pays Country Club and Social Club dues on behalf of Dr Larry R Thompson, President Personal use is not reimbursed, but the portion of the payment for Country Club and Social Club dues that is deemed to be for personal use is taxable to the employee and is reported as Reportable Compensation on Form 990, Page 7, Part VII, Section A, Column D and Schedule J, Page 2, Part II, Column B(iii) The Organization paid social club dues on behalf of Lance Burchett, Vice President for Advancement for November 2009 Personal use is not reimbursed No portion of the payment for Yacht Club dues was reported as personal use by the employee for 2009 and therefore no taxable amount was reported as Reportable Compensation on Form 990, Page 7, Part VII, Section A, Column D and Schedule J, Page 2, Part II, Column B(iii)									
	,	The Board of Trustees determined that the College would provide the housing allowance and Social Club dues for the President (described above) and those benefits are included in the President's appointment letter from the Board of Trustees. The President determined that the College would provide the social club dues for Lance Burchett, Vice President for Advancement. That benefit (described above) was approved by the Board of Trustees.									
		Dr Larry R Thompson, President participated in a supplemental nonqualified retirement plan described in section 457(f) of the IRS Code The Organization made a \$45,000 contribution to the plan which is reported as Other Compensation on Form 990, Page 7, Part VII, Section A, Column F and Schedule J, Page 2, Part II, Column C									

Schedule J (Form 990) 2009

DLN: 93493105005101

OMB No 1545-0047

Schedule K (Form 990)

Department of the Treasury

Internal Revenue Service

# **Supplemental Information on Tax Exempt Bonds**

200

Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule 0 (Form 990).
 Attach to Form 990.

Open to Public Inspection

Name of the organization
Ringling College of Art and Design

**Bond Issues** 

Employer identification number

59-0637903

	(a) Issuer Name	(b) Issuer EIN	<b>(c)</b> CUSIP #	(d) Date	Issued	(e) Issue	Price	(f) Desc	ription of P	urpose	<b>(g)</b> De	feased		On alf of uer
											Yes	No	Yes	No
A	higher educational facilities financing authority	90-0058227		12-01-	2009	19,4	00,000	currently reforms sued 06-1		2004		х		Х
В	higher educationAL facilities financing authority	90-0058227	34073Taz0	06-26-	2008	52,5	00,000		onstruct academic & residential uildings, acquire land & refinance ote			х		Х
Pa	Part II Proceeds													
					<b>\</b>	ı	В	(	С	D	D		E	
1_	Total proceeds of issue			1	9,400,000	5	2,500,00	00						
2	Gross proceeds in reserve funds													
3	Proceeds in refunding or defeasance escrows													
4	Other unspent proceeds			2,199,531		L	2,199,531							
5	Issuance costs from proceeds				411,129	9	411,12	29						
6	Working capital expenditures from proceeds													
7	Capital expenditures from proceed	ds		4	1,131,510	4	1,131,5	10						
8	Year of substantial completion			2006		2009								
				Yes	No	Yes	No	Yes	No	Yes	No	Ye	s	No
9	Were the bonds issued as part of a	a current refunding is	sue?	Х		×								
10	Were the bonds issued as part of a	an advance refunding	ıssue <sup>?</sup>		Х		Х							
11	Has the final allocation of proceed	Is been made?		Х			×							
12	Does the organization maintain ad the final allocation of proceeds?	lequate books and red	cords to support	Х		Х								
Pa	rt IIII Private Business Use					1		1				_		
				<b>A</b>	В		C		D			E		
	Was the sure was to see a see			Yes	No	Yes	No	Yes	No	Yes	No	Ye	5	No
1 	Was the organization a partner in a which owned property financed by		emper of an LLC,		Х		Х							
2	Are there any lease arrangements which may result in private busine		inanced property		х		Х							
For	For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.  Cat No 50193E  Schedule K (Form 990) 2009													

Schedule K (Form 990) 2009

Part III Private Business Use (Continued)

			A		В		С	1	)		E
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts with respect to the financed property which may result in private business use?	Х		Х							
3b	Are there any research agreements with respect to the financed property which may result in private business use?		Х		Х						
3с	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?	Х		Х							
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		1 900 %		1 100 %		•				
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		0 %		0 %						
6	Total of lines 4 and 5		1 900 %		1 100 %						
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	Х		Х							
Dai	rt IV Arhitrage										

Part IV Arbitrage

			Α	ı	В		С	D			E
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		х		х						
2	Is the bond issue a variable rate issue?	Х		Х							
3a	Has the organization or the governmental issuer identified a hedge with respect to the bond issue on its books and records?	х		х							
ь	Name of provider	suntrust bank s		suntrust bank			•				
c	Term of hedge	10 000	00000000	10 000	00000000						
4a	Were gross proceeds invested in a GIC?		Х		Х						
ь	Name of provider										
С	Term of GIC										
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
5	Were any gross proceeds invested beyond an available temporary period?		х		х						
6	Did the bond issue qualify for an exception to rebate?	х			Х						
									Cahadul	o V /Eorm 00/	33.2000

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DLN: 93493105005101

OMB No 1545-0047

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#### Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

**Transactions with Interested Persons** 

Inspection

Name of the organization	Er	Employer identification number										
Ringling College of Art and Design							59	59-0637903				
Part I Excess Benefit Tra												
Complete if the organizat				m 990, P <b>I</b>	Part IV, line 25a d	or 25	b, or Form 9	990-EZ,	Part V , line 4	(c) Coi	rostod	
1 (a) Name of disq	ualıfıed	person			<b>(b)</b> Desc	rıptı	on of transa	nsaction <del>  ` ´</del>			No No	
										Yes	140	
										-		
2 Enter the amount of tax impos	ed on tl	he orgai	nızatıon man	agers or				ear unde	r · •			
3 Enter the amount of tax, If any	on line	· · 2 aho	ve reimhiirs	ed hy th	e organization .				→ <del></del>			
					e organization:				Ψ			
Part II Loans to and/or							- 000 5	<b>-</b>				
Complete if the organi			d "Yes" on F	orm 990	, Part IV, line 26	, or i	-orm 990-E	2, Part v (f)	, line 38a			
(a) Name of interested person and purpose	( <b>b)</b> Loan d nerson and   or from t						<b>e)</b> In	Approved		<b>g)</b> Writte		
	1	zation? principal			(d)Balance due		fault?	by board or ag		jreemen	t?	
	То	From				Yes	s No	Yes	_	res	No	
Total				<b>▶</b> \$	l		<u> </u>					
Part IIII Grants or Assista								•	•			
Complete if the orga	nızatıd				•		e 27.					
(a) Name of interested pers	on	(			en interested per ganization	son	(c)A m	ount of g	rant or type	ofassist	ance	
				•	•							
Part IV Business Transact	ions I	 [nvolv	ing Inter	ested I	Persons.							
Complete if the orga						', lın	e 28a, 28l	o, or 28	с.			
			) Relationsh								aring of	
(a) Name of interested perso	n		ween interes erson and the		(c) A mount of transaction		(d) Descr	iption of	transaction	_	zation's nues?	
			organızatıon							Yes	No	
peter weill		peter	weill is a trus	stee	36,0		legal servic				Νο	
							negotiated are at fair n		_			
william kirtley		william	n kırtley ıs a		20,0	_	bond-relate				Νο	
		truste	e				fees were n					
							length and a value	are at Tal	market			
carolyn johnson			e carolyn		113,7				ıshıp, salary		Νο	
			n's daughte the director			is reasonable and comparable to employees at the same level of						

development

employment

OMB No 1545-0047

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**SCHEDULE M** (Form 990)

Department of the Treasury

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

**NonCash Contributions** 

Internal Revenue Service Name of the organization Ringling College of Art and Design

**Employer identification number** 

59-0637903

Pa	rt I Types of Property	_						
		(a) Check If applicable	<b>(b)</b> Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line	<b>(d</b> Method of de reven	- etermı	nıng	
1	Art—Works of art	Х	1	0				
	Art—Historical treasures .							
	Art—Fractional interests							
4	Books and publications							
_	Clothing and household							
•	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .	Х	2	15,626	FAIR MARKET VAL	UE		
10	Securities—Closely held stock							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxıdermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ▶ ( <u>computers</u> )	Х	2	743,759	faır market value			
26	Other►( <u>69 rds - golf</u> )	Х	1	34,500	faır market value			
27	O ther ▶()							
28	O ther ▶ ()							
29	Number of Forms 8283 receive for which the organization comp		<del>-</del> ,		29			1
30a	During the year, did the organiz	atıon receiv	e by contribution any prope	erty reported in Part I, lines	1-28 that it		Yes	No
	must hold for at least three yea	rs from the	date of the initial contributi	on, and which is not require	d to be used			
	for exempt purposes for the ent	ire holding p	period?			30a		No
Ь	If "Yes," describe the arrangem	ent in Part :	II					
31	Does the organization have a gi	ft acceptan	ce policy that requires the i	review of any non-standard	contributions?	31		No
32a	Does the organization hire or us contributions?	e third part	es or related organizations	to solicit, process, or sell i	non-cash	32a		Νο
ь	If "Yes," describe in Part II							
33		t revenues	n column (c) for a type of p	roperty for which column (a	) is checked,			
or E	Privacy Act and Panerwork Reduction	n Act Notice	soo the Instructions for For	<b>n 990</b> Cat No. 512271	Schedule	M /For		2000

Page 2

#### Part II

**Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier Return Reference Explanation

Schedule M (Form 990) 2009

Software ID: **Software Version:** 

**EIN:** 59-0637903

Name: Ringling College of Art and Design

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DLN: 93493105005101

OMB No 1545-0047

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**SCHEDULE 0** 

(Form 990)

Department of the Treasury Internal Revenue Service

**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.

Name of the organization Ringling College of Art and Design Employer identification number

59-0637903

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		the audit committee of the board of trustees reviews and approves the form 990 prior to providing electronic access to the board of trustees via their secure website

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		the college annually provides a conflict of interest policy and form to disclose all conflicts of interest to all trustees and key employees these responses are reviewed to determine if there are any potential issues or items for disclosure in the event of a potential conflict, the trustee in question will recuse themselves from any discussion or vote

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		The President is evaluated annually by the Executive Committee of the Board of Trustees. The Compensation Committee, a sub-committee of the Executive Committee, is responsible for the annual evaluation, compensation, personnel actions and other employment issues related to the appointment of the President. The Committee conducts an annual performance appraisal, collects and evaluates comparative salary data from Association of Independent Colleges of Art and Design (AICAD), 990 data, and provides a recommendation for the President's annual compensation to the Executive Committee. The process requires that the President completes a Self-Assessment and that the Board of Trustees members complete performance Assessment Forms. The Compensation Committee reviews the assessments, and prepares a summary assessment and recommendation for the Executive Committee. The Executive Committee reviews the deliberations with the Board of Trustees. The President evaluates and determines the compensation of each Senior Officer using AICAD data and the results of the annual performance review. The Vice President for Finance and Administration, the Vice President for Academic Affairs, the Vice President for Human and Organizational Development, the Vice President for Advancement, and the Vice President for Student Life are Senior Officers. The President reviews with the Compensation Committee the data and the annual performance of each of the Senior Officers. It is the policy of the School to evaluate the effectiveness of all staff through the annual performance evaluation process. Each senior officer completes a self-assessment for the President's review. Documentation includes notes taken at the Compensation Committee meetings of data review and deliberations. Annual assessment documents are maintained for the President.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		the organization's governing documents and conflict of interest policy are available to the public upon request

ldentifier	Return Reference	Explanation
form 990, part xı, lıne 2c	audit committee	the audit committee of the board of trustees assumes responsibility for the selection of the independent accountants and oversight of the audit process

Software ID: Software Version:

**EIN:** 59-0637903

Name: Ringling College of Art and Design

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors										
<b>(A)</b> Name and Title	(B) Average hours per		(C tion ( hat a	che	)			<b>(D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
ısabel norton chaır	1 00	Х		x				0	0	0
charles smith	1 00	Х		Х				0	0	0
vice chair wendy surkis	1 00	Х		X				0	0	0
secretary alfred goldstein								0	0	0
treasurer	1 00	Х		Х				0	0	
robert a kımbrough asst secretary	1 00	Х		Х				0	0	0
william t kirtley asst secretary	1 00	Х		x				0	0	0
dr valliere auzenne trustee	1 00	Х						0	0	0
robert o barkley jr trustee	1 00	Х						0	0	0
dr richard basch trustee	1 00	Х						0	0	0
pauline becker trustee	1 00	Х						0	0	0
dianne belk trustee	1 00	Х						0	0	0
louis cabot trustee	1 00	X						0	0	0
carol camiener trustee	1 00	Х						0	0	0
kevın daves trustee	1 00	X						0	0	0
lında dıckınson trustee	1 00	Х						0	0	0
arthur ferguson trustee	1 00	Х						0	0	0
wendy gingerich trustee	1 00	Х						0	0	0
jack harrison trustee	1 00	Х						0	0	0
william isaac trustee	1 00	Х						0	0	0
dr edward jennings trustee	1 00	Х						0	0	0
carolyn johnson trustee	1 00	Х						0	0	0
robert johnson trustee	1 00	Х						0	0	0
elaine keating trustee	1 00	Х						0	0	0
cheryl loeffler trustee	1 00	Х						0	0	0
lawrence a macıarıello trustee	1 00	Х						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

	Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) Average hours		(( tion ( hat a	che		I		(D) Reportable compensation	<b>(E)</b> Reportable compensation	<b>(F)</b> Estimated amount of other		
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations		
rıchard matson trustee	1 00	х						o	0	0		
brandon oldenburg trustee	1 00	Х						0	0	0		
susan palmer trustee	1 00	Х						0	0	0		
ronald rice trustee	1 00	Х						0	0	0		
dıane roskamp trustee	1 00	Х						0	0	0		
steven stein trustee	1 00	Х						0	0	0		
lois stulberg trustee	1 00	Х						0		0		
robert stuffings trustee	1 00	Х						0	0	0		
peter weill trustee	1 00	Х						0	0	0		
bonita a wright trustee	1 00	Х						0	0	0		
grace riker ex-officio member	1 00	Х						0	0	0		
larry r thompson president	40 00			х				357,076	0	84,813		
tracy a wagner vp for finance & admin	40 00			х				173,915	0	22,253		
melody m weller vp for academic affairs	40 00				х			179,025	0	8,394		
christine c degeorge vp for human & org develop	40 00				х			171,136	0	27,267		
lance burchett vp for advancement	40 00					Х		179,448	0	31,661		
mahmoud pegah director of institutional	40 00					Х		178,006	0	21,659		
tammy walsh vp for student lıfe/dean o	40 00					Х		145,195	0	15,254		
james h dean dean of admissions/exec di	40 00					Х		132,705	0	15,406		
krıs t pegah dır of admınıstratıve comp	40 00					х		129,509	0	14,626		

## Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
contracted food service	1,707,659	1,643,540		64,119
other contracted servic	911,603	865,342	46,261	0
WRITE DOWN CAPITALIZED	505,961	505,961		
writeoff of loan fees	502,956		502,956	
student life programmin	393,278	388,778	4,500	