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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)

2009

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

Open to Public Inspection

AF	or the	2009 calendar year, or tax year beginning JUL 1, 2009 and ending	JUN 30, 2010					
В	Check if	Please C Name of organization	D Employer identific	cation number				
_	⊓Addres	use HS label or mure Dailing COHOOT OF ADM						
$\vdash$	change Name	type	23-1	23-1607174				
	change Initial return	See Number and street (or P.O. box if mail is not delivered to street address) Room/su						
	Termin	Constinue	, ·	433-0032				
	Amend		G Gross receipts \$	1,516,052.				
	Application .	ALLENTOWN, PA 18105	H(a) Is this a group re					
	pendin	F Name and address of principal officer SHANNON SLATTERY FOGATI		Yes X No				
		510 LINDEN STREET, ALLENTOWN, PA 18101	H(b) Are all affiliates inc					
		empt status: X 501(c) ( 3 ) ◀ (insert no ) 4947(a)(1) or 527		list. (see instructions)				
		e: BAUMSCHOOL ORG  organization: X Corporation Trust Association Other Ly.	H(c) Group exemption					
		organization: X Corporation	ear of formation: 1926 N	State of legal domicile: PA				
		Briefly describe the organization's mission or most significant activities THE PURPO	OSE OF THE OR	GANTZATTON				
Governance		IS TO TEACH ART TO STUDENTS AND CULTURAL ENR		E COMMUNITY				
rna	1 .	Check this box   if the organization discontinued its operations or disposed of m						
ove	3	Number of voting members of the governing body (Part VI, line 1a)	3	24				
<u>ග</u> නේ	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	24				
Activities &		Total number of employees (Part V, line 2a)	5	54				
Ĕ		Total number of volunteers (estimate if necessary)	6	0				
Ac	1	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	<u> </u>				
_	D_	Net unrelated business taxable income from Form 9900 me3EIVED	7b Prior Year	Current Year				
_	8	Contributions and grants (Part VIII, line 1h)	262,949.	455,182.				
<u>n</u>	1	$\sim$ 1 $\Delta$ N   8 2011   $\sim$ 1	848,521.	728,827.				
Revenue	i	Investment income (Part VIII, column (A), lines 3 4, and 7d)	-1,681.	-22,150.				
ď	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 10)	220,276.	64,170.				
) ) 		Total revenue - add lines 8 through 11 (must equal Part-VIII, column (A), line 12)	1,330,065.	1,226,029.				
<b>)</b>	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	171,982.	132,209.				
	14	Benefits paid to or for members (Part IX, column (A), line 4)						
	15	Salanes, other compensation, employee benefits (Part IX, column (A), lines 5-10)	769,887.	709,320.				
TAI CE	16a	Professional fundraising fees (Part IX, column (A), line 11e)		<del></del>				
EX B	b	Total fundraising expenses (Part IX, column (D), line 25) 70,813.	452,395.	419,039.				
<u>-</u> 9		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	1,394,264.	1,260,568.				
		Revenue less expenses. Subtract line 18 from line 12	-64,199.	-34,539.				
Net Assets of	3		Beginning of Current Year	End of Year				
Sets	20	Total assets (Part X, line 16)	5,105,302.	5,135,600.				
AS	21	Total liabilities (Part X, line 26)	332,489.	348,267.				
휥	22	Net assets or fund balances Subtract line 21 from line 20	4,772,813.	4,787,333.				
P	art II	Signature Block						
		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statement and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.	edge	ge and belief, it is true, correct,				
C:-		May mun Dalton Su works	しょりけん	1				
Sig He		Signature of officer	Date	<del>!</del>				
110		SHANNON SLATTERY FUGATE, DIRECTOR						
		Type or print name and title	-					
Pai	d	Preparer's Date / Date /		er's identifying number structions)				
_	u parer's	signature > ( Jella   12/21/10	employed >					
	Only	Firm's name (or yours if CAMPBELL RAPPOLD & YURASITS LLP	EIN ►					
	•	self-employed), address, and address, and address, and address.	Dk	C10\42E 7400				
	v tha !!	ALLENTOWN, PA 18103-5443  RS discuss this return with the preparer shown above? (see instructions)	[ Prione no. ► (	610)435-7489 Yes No				
_	y της II 001 02-0		instructions	Form <b>990</b> (2009)				
532		EE SCHEDULE O FOR ORGANIZATION MISSION STATE		$\sim 10^{\circ}$				

Form 990 (2009) THE BAUM SCHOOL OF ART
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?	ŀ		
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	_2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			_
	public office? If "Yes," complete Schedule C, Part I	3	<u> </u>	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		Х
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8	х	
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	Х	
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10	х	
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable	11	х	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI			ŀ
•	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	х	
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	l		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	_X	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
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	_x	
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		Х
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Х
		Form	<b>990</b> (	2009)

Form 990 (2009) THE BAUM SCHOOL OF ART
Part IV Checklist of Required Schedules (continued)

		ļ	Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J .	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	1		
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	<u> </u>		
	Schedule K. If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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		х
b	is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		x
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV	-		
	instructions for applicable filing thresholds, conditions, and exceptions):			
а		28a		x
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			
•	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			-
~	contributions? If "Yes," complete Schedule M	30	x	
31	Did the organization liquidate, terminate, or dissolve and cease operations?	30	- 12	
٥.	If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		
32	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
33	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	22		X
34	Was the organization related to any tax-exempt or taxable entity?	33		Δ_
34	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	0.4		X
0E	·	34		
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	0.5		<b>.</b>
00	If "Yes," complete Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
<b>^</b> -	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			٠,,
~~	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?		<b></b>	
	Note. All Form 990 filers are required to complete Schedule O	38	X .	<u> </u>
		Form	<b>990</b> (	2009)

Form 990 (2009) THE BAUM SCHOOL OF ART

Part V Statements Regarding Other IRS Filings and Tax Compliance

		_	Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 54			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		_X_
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a_		X
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			
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		_X_
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			
	Tax Shelter Transaction?	5c	-	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	<u>6a</u>		_X_
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services	7-	X	
_	provided to the payor?	<u>7a</u> 7b	X	
b	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	70	-21	
·	to file Form 8282?	7c		х
d	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		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 <del>f</del>		
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		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the			
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings			
	at any time during the year?	8		
9	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		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter.			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
40	amounts due or received from them.)	46		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<u> </u>
<u>b</u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	Form	990	(2009)
		- i UH H	J J J J	LUUJI

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

Sec	tion A. Governing Body and Management						
			1	_		Yes	No
1a	Enter the number of voting members of the governing body	1a		24			
b	Enter the number of voting members that are independent .	1b		24			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	ip with	any other	İ			
	officer, director, trustee, or key employee?			-	2	X	
3	Did the organization delegate control over management duties customarily performed by or under the	ne dire	ct supervision				
	of officers, directors or trustees, or key employees to a management company or other person?			<u> </u>	3		<u>X</u>
4	Did the organization make any significant changes to its organizational documents since the prior Fo	orm 99	0 was filed?	-	4		<u>X</u>
5	Did the organization become aware during the year of a material diversion of the organization's asse	ts?		-	5		<u>X</u>
6	Does the organization have members or stockholders?			-	6		<u> </u>
7a	Does the organization have members, stockholders, or other persons who may elect one or more me	ember	s of the				
	governing body?				7a		<u>X</u>
b	Are any decisions of the governing body subject to approval by members, stockholders, or other pe			-	7b		<u>X</u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken	dunn	g the year				
	by the following:						
а	The governing body?			-	8a_	<u>X</u>	<del></del>
b	Each committee with authority to act on behalf of the governing body?		•	<u> </u>	8b_	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	ached	at the				77
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O				9		<u> </u>
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal F	levenu	e Code)				
	Describes a second and the second absorbers because a settle day of			Г	40-	Yes	No X
	Does the organization have local chapters, branches, or affiliates?			-	10a		
b	If "Yes," does the organization have written policies and procedures governing the activities of such	cnapi	ers, amiliates,		40L		
	and branches to ensure their operations are consistent with those of the organization?	CI 44	a farm?	H	10b	Х	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before the property of the property	ining u	ie ionn?	H	11		
11A					40-	X	
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13  Are officers, directors or trustees, and key employees required to disclose annually interests that co	uld an	ro rico	-	12a	Λ	
D	to conflicts?	ulu yi	e rise	}	12b	X	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	"Vos "	describe	-	120	- 41	
·	in Schedule O how this is done	, 00,	Gedenae		12c		х
13	Does the organization have a written whistleblower policy?				13	Х	
14	Does the organization have a written document retention and destruction policy?				14	X	
15	Did the process for determining compensation of the following persons include a review and approve	al by i	ndependent	Ī			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	_					
а	The organization's CEO, Executive Director, or top management official				15a	x	
b	Other officers or key employees of the organization		• • •	Ī	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)	-		ſ			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment	with a				
	taxable entity during the year?				16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eva-	aluate	its participation	n			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the org	ganızat	ion's				
	exempt status with respect to such arrangements?				16b		
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed ▶PA		<u>.</u>				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (501	(c)(3)s only) ava	aılable f	or		
	public inspection. Indicate how you make these available. Check all that apply.						
	Own website Another's website X Upon request						
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents,	conflic	t of interest po	licy, and	d fina	ncıal	
	statements available to the public.						
20	State the name, physical address, and telephone number of the person who possesses the books a	and red	cords of the org	ganızatı	on. 🕨	<u> </u>	
	MICHELLE SCHMALL - (610) 433-0032						
	510 LINDEN ST., ALLENTOWN, PA 18101					000	200000
					Form	<b>330</b> (	2009)

932006 02-04-10

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

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

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

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

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

Check this box if the organization did not co	empensate an	y cu	rren	t om	icer,	aire	Cto	r, or trustee.				
(A)	(B)	(C)					(D)	(É)	(F)			
Name and Title	Average	Position					Reportable	Reportable	Estimated			
	hours	(ct	(check all t		neck all that apply			app	ly)	compensation	compensation	amount of
	per	횮						from	from related	other		
	week	die				pa.		the organization	organizations (W-2/1099-MISC)	compensation		
		tee o	ustee			ensat		(W-2/1099-MISC)	(44-2/1099-141130)	from the organization		
		ğ	nal tr		loyee	d d		(** 2/1055 (*1100)		and related		
		ndividual trustee or director	nsbtubonal trustee	Officer	Key employee	Highest compensated employee	Former			organizations		
		틸	sul	8	Ke	풀룹	Ē			Ü		
DAVID BAUSCH												
BOARD MEMBER	2.00	X						0.	0.	0.		
DONALD BERNHARD												
BOARD MEMBER	2.00	X						0.	0.	0.		
KAREN BISHOFF												
BOARD MEMBER	2.00	X						0.	0.	0.		
MICHAEL EGAN, ESQUIRE												
BOARD MEMBER	2.00	X				<u> </u>		0.	0.	0.		
SHELBI GOURNIAK												
BOARD MEMBER	2.00	X						0.	0.	0.		
PHYLLIS GRUBE												
BOARD MEMBER	2.00	X	<u> </u>				<u> </u>	0.	0.	0.		
GLORIA HAMM					ŀ							
BOARD MEMBER	2.00	X						0.	0.	0.		
HOLLY HARTER												
BOARD MEMBER	2.00	X				ļ	<u> </u>	0.	0.	0.		
RAYMOND HOLLAND, EMERITU												
BOARD MEMBER	0.00	X	_			<u> </u>	<u> </u>	0.	0.	0.		
JOHN HUDDERS, EMERITUS										_		
BOARD MEMBER	0.00	X				<u> </u>		0.	0.	0.		
KIRK KOZERO						Ì						
BOARD MEMBER	2.00	X		<u> </u>	L_	<b> </b>	<u> </u>	0.	0.	0.		
ROBERT LOVETT												
BOARD MEMBER	2.00	X		_			-	0.	0.	0.		
JAMES MUSSELMAN, EMERITUS							1			_		
BOARD MEMBER	0.00	X	_	<u> </u>	<u> </u>	<del> </del>	-	0.	0.	0.		
RICHARD SILBERG												
BOARD MEMBER	2.00	X	ļ	<u> </u>	ļ	├	-	0.	0.	0.		
DONALD SNYDER												
BOARD MEMBER	2.00	X	<u> </u>	<del> </del>	-	┼-	$\vdash$	0.	0.	0.		
ERIC STEEN	2 00	,,										
BOARD MEMBER	2.00	X	₩	$\vdash$	-	$\vdash$	+	0.	0.	0.		
RICARDO VIERA	2 00				1							
BOARD MEMBER	2.00	1 X	L	L	L	1	<u></u>	0.	0.	0.		
932007 02-04-10										Form <b>990</b> (2009)		

932007 02-04-10

form **990** (2009)

23-1	607	17/	D	age 8				
ees (continued)	007	<u> 1 / 4</u>	F	age O				
(E) Reportable compensation from related organization (W-2/1099-MI	on d ns	com fr org an	(F) stimate nount other pensarom the anizat direlatanizati	of ation e ion ed				
		0,9.						
	0.			0.				
	0.			0.				
	0.			0.				
	0.			0.				
	0.			0.				
	0.		0.					
	0.		0.					
	0.		0.					
	0.			0.				
	0.		<u> </u>	0.				
),000 in reportab								
			Yes	0 No				
mployee on		2		x				
the organization		3						
ices rendered to	1	4		<u> </u>				
<u> </u>		5	<u></u>	X				
\$100,000 of compensation from								
services	С	(Compe		n				
<del></del> -								
	•							

Part VII Section A. Officers, Directors, Tru	stees, Key Er	nplo	oyee	s, a	nd	High	est	Compensated Employ	ees (continued)			
(A)	(B)				C)			(D)	(E)		(F)	
Name and title	Average Position							Reportable	Reportable	-	Estimate	
	hours per week	H	check all that			T	Ť	compensation from the	from related organizations	c	amount other ompensa	
		ndıvıdual trustee or director	nstitutional trustee		loyee	Highest compensated employee		organization (W-2/1099-MISC)	(W-2/1099-MISC)		from th organizat and relat	tion
		Individua	Institutio	Officer	Key employee	Highest c	Former				organizati	
TAMANTHA YANDERS												
BOARD MEMBER	2.00	X	ļ				_	0.	0	•		0.
MARLENE FOWLER					l							
PRESIDENT	2.00			X	ļ	<u> </u>	ļ	0.	0			0.
J. LAWRENCE GRIM												
1ST VICE PRESIDENT	2.00			X				0.	0	•		0.
HOWARD STEVENS, ESQUIRE												
2ND VICE PRESIDENT	2.00	ļ		X				0.	0			0.
JANET GROSS						İ						
3RD VICE PRESIDENT	2.00	<u> </u>		X		<u> </u>		0.	0			<u>0.</u>
GREGORY KIRK		l	ļ				1					
TREASURER	2.00		<u> </u>	X				0.	0			0.
DENISE MCCALL			İ									
SECRETARY	2.00	<u> </u>		X	<u> </u>			0.	0	<u>. _</u>		0.
SHANNON SLATTERY FUGATE			ł				İ	ĺ				
CURRENT EXECUTIVE DIRECT	50.00	L	ļ	X		ļ	<u> </u>	0.	0	•		0.
MICHELLE SCHMALL												
CURRENT FINANCIAL ADMINI	25.00	L	<u> </u>	X	L	ļ	<u> </u>	0.	0	•		<u>0.</u>
1b Total		L_	L	L	J		l	0.	0	+		0.
Total number of individuals (including but n	ot limited to th	nose	liste	ed a	bov	e) w	ho r	<u>.                                      </u>		<del></del>		
compensation from the organization						•		, , , , , , , , , , , , , , , , , , , ,	, ,			0
											Yes	No
3 Did the organization list any former officer, . line 1a? If "Yes," complete Schedule J for s			, ke	y en	nplo	yee,	or l	highest compensated en	nployee on	3	3	x
4 For any individual listed on line 1a, is the su	•								the organization			۱
<ul><li>and related organizations greater than \$150</li><li>Did any person listed on line 1a receive or a</li></ul>									ces rendered to	14	<del> </del>	X
the organization? If "Yes," complete Schedu	•				· u	, u	- Olu	tod digamzation for don't	000 10/100/00 10	5	,	x
Section B. Independent Contractors												
Complete this table for your five highest co the organization.     NONE	mpensated in	dep	ende	ent c	ont	ract	ors '	that received more than	\$100,000 of compen	satio	n from	
(A) Name and business	address							(B) Description of s	ervices	Com	(C) pensatio	 n
	<del></del>				-							
	•											
2 Total number of independent contractors (i	ncludina but s	not le	mito	nd to	the	100 1	etor	d above) who received	ore than			
2 Total number of independent contractors (i	iolading but I	iŲt II		u tu		nse II	316(	a above, who received it	IVI & UIAII			

932008 02-04-10

Form **990** (2009)

	1 990 () rt VII			OOL OF AR'	<u>r</u>		23-1607	174 Page 9
					<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts st	1 a	Federated campaigns	1a					
Contributions, gifts, grants and other similar amounts	b	Membership dues	1b					
s, g	С	Fundraising events	1c	107,459.				
ar g	d	Related organizations	1d					
ž, Tij	е	Government grants (contribut	tions) 1e	15,757.				
r iši	- f	All other contributions, gifts, gran	nts, and					
ë		similar amounts not included abo	ove 1f	331,966.				
호	g	Noncash contributions included in lines	s 1a-1f \$	138,680.				
ပ္ကန	h	Total. Add lines 1a-1f		<b>•</b>	455,182.			
				Business Code				
8		TUITION		611600	712,379.	712,379.		
ēΞ	b	COMMUNITY ARTS	PROGRAM	711130	16,448.	16,448.		
S e	c	***				<u>.                                    </u>		
San Sev	d				***	7.00		
Program Service Revenue	е		<del></del>			· -		
<u>-</u>	f		enue .		500 005			
		Total. Add lines 2a-2f			728,827.			
	3	Investment income (including	g dividends, inter	est, and	F 026			F 006
		other similar amounts)			5,926.		<del></del> -	5,926.
	4	Income from investment of ta	ax-exempt bond p	proceeds	**	-		
	5	Royalties	(2) Doorl	(3 D				
		Gross Rents	(i) Real 3,200.	(ii) Personal 53,295.				
	6 a b		3,200.	33,233.				
	C		3,200.	53,295.				
		Net rental income or (loss)	5,200	55,255.	56,495.			56,495.
		Gross amount from sales of	(i) Securities	(II) Other	30,433.			<u> </u>
l		assets other than inventory	109,773.					
	b	Less: cost or other basis						
	_	and sales expenses	137,849.					
	С	Gain or (loss)	-28,076.					
				<u> </u>	-28,076.	-28,076.		
6		Gross income from fundraisir	ng events (not					-
Other Revenue		including \$ 107,4	459. of					
ě		contributions reported on line	e 1c). See					
ار ا		Part IV, line 18	а	140,329.				
Ě	b	Less. direct expenses	b	140,329.				
~		Net income or (loss) from fun	-		0.			
	9 a	Gross income from gaming a	ctivities. See					
		Part IV, line 19	а					
		Less: direct expenses	. b	L				
		Net income or (loss) from gan	-					<del></del>
	10 a	Gross sales of inventory, less		10 110				
		and allowances	а					
		Less: cost of goods sold	b	11,845.	6 265			C 265
	С	Net income or (loss) from sale		Puginasa Cada	6,265.			6,265.
	11 -	Miscellaneous Revenu MISCELLANEOUS	u <del>c</del>	Business Code 900099	1,410.	1,410.		
	ii a b	TITOCHTHUME COD		700033	T,41U.	1,410.		
	C	-						
	d	All other revenue			.,.	· -		
			******		1,410.			
	12	Total revenue. See instructions.			1,226,029.	702,161.	0.	68,686.
93200 02-04				F !!	_, ,			Form <b>990</b> (2009)

Part IX | Statement of Functional Expenses

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

	All other organizations must complet include amounts reported on lines 6b, , 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	rants and other assistance to governments and ganizations in the U.S. See Part IV, line 21				
_	rants and other assistance to individuals in ne U.S. See Part IV, line 22	132,209.	132,209.		
0	rganizations, and individuals outside the US ee Part IV, lines 15 and 16				
	enefits paid to or for members				
<b>5</b> C	compensation of current officers, directors, ustees, and key employees	17,982.	5,922.	9,691.	2,369.
<b>6</b> C	ompensation not included above, to disqualified ersons (as defined under section 4958(f)(1)) and ersons described in section 4958(c)(3)(B)	17,302.	3,322.	3,031.	2,303.
	other salaries and wages	592,482.	461,030.	78,109.	53,343.
	ension plan contributions (include section 401(k)				,
	nd section 403(b) employer contributions)	7,638.	6,151.	1,240.	247.
	Other employee benefits	46,594.	35,065.	8,113.	3,416.
	ayroll taxes	44,624.	35,253.	5,355.	4,016.
11 F	ees for services (non-employees)				
a N	fanagement		.,,		
b L	egal				
c A	accounting	7,747.		7,747.	
d L	obbying				
e P	rofessional fundraising services. See Part IV, line 17				
f li	nvestment management fees				
g (	Other				
12 A	Advertising and promotion	69,957.	68,557.		1,400.
13	Office expenses	17,427.		17,427.	
14	nformation technology				
15 F	Royalties .				
16	Decupancy	68,540.	61,686.	6,854.	
17 T	ravel	-			·
18 F	Payments of travel or entertainment expenses				
f	or any federal, state, or local public officials				
19 (	Conferences, conventions, and meetings	3,440.		688.	<u>2,752</u> .
	nterest	14,126.	9,888.	4,238.	
	Payments to affiliates	100 686	71 000	20 207	
	Depreciation, depletion, and amortization	109,676.	71,289.	38,387.	
<b>24</b> (	nsurance Other expenses. Itemize expenses not covered bove. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
	CLASS SUPPLIES	28,842.	28,842.		
_	SERVICE CONTRACTS	20,698.	10,349.	10,349.	
c I	MAINTENANCE SUPPLIES	13,824.	12,442.	1,382.	
_	PRINTING	12,825.	11,542.	1,283.	
е ]	POSTAGE	10,956.	7,121.	3,835.	
f /	All other expenses	40,981.	33,795.	3,916.	3,270
25	Total functional expenses. Add lines 1 through 24f	1,260,568.	991,141.	198,614.	70,813
26 .	loint costs. Check here 🕨 🔲 ıf following				
	SOP 98-2. Complete this line only if the organization				
1	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation	I			

Par	tΧ	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	36,354.	1	28,974.
	2	Savings and temporary cash investments	2,650.	2	8,455.
	3	Pledges and grants receivable, net	85,000.	3	53,540.
	4	Accounts receivable, net	26,657.	4	30,344.
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees Complete Part II			
		of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete			
		Part II of Schedule L	<u>,                                      </u>	6	
ţ	7	Notes and loans receivable, net		7	
Assets	8	Inventones for sale or use	17,859.	8	15,250.
Ä	9	Prepaid expenses and deferred charges	9,114.	9	1,393.
	10a	Land, buildings, and equipment: cost or other			
		basis Complete Part VI of Schedule D 10a 5,222,270.			
	b	Less: accumulated depreciation 10b 1,660,496.	3,652,516.	10c	3,561,774.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11	281,740.	12	305,447.
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets	16,969.	14	15,300.
	15	Other assets. See Part IV, line 11	976,443.	15	1,115,123.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	5,105,302.	16	5,135,600.
	17	Accounts payable and accrued expenses	18,383.	17	25,764.
	18	Grants payable	F F37	18	
	19	Deferred revenue	5,537.	19	_
	20	Tax-exempt bond liabilities		20	
ies	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II			
Lia		of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	236,030.	23	215,767.
	24	Unsecured notes and loans payable to unrelated third parties	230,0301	24	215,7076
	25	Other liabilities. Complete Part X of Schedule D	72,539.	25	106,736.
	26	Total liabilities. Add lines 17 through 25	332,489.	26	348,267.
		Organizations that follow SFAS 117, check here   X and complete			
ø		lines 27 through 29, and lines 33 and 34.			
ű	27	Unrestricted net assets	4,684,274.	27	4,733,399.
ala	28	Temporanly restricted net assets	48,539.	28	13,934.
9	29	Permanently restricted net assets	40,000.	29	40,000.
Ξ		Organizations that do not follow SFAS 117, check here  and			
<u></u>		complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	
<b>1</b> SS	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds		32	
Z	33	Total net assets or fund balances	4,772,813.	33	4,787,333.
	34	Total liabilities and net assets/fund balances	5,105,302.	34	5,135,600.

Form **990** (2009)

Pa	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		-	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			1
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,			ĺ
	review, or compilation of its financial statements and selection of an independent accountant?	2c	X	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	1		ĺ
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			1
	X Separate basis Consolidated basis Both consolidated and separate basis			1
За	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_		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		
		Form	990 (	2009)

#### **SCHEDULE A**

Department of the Treasury

(Form 990 or 990-EZ)

# **Public Charity Status and Public Support**

OMB No 1545-0047

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

Open to Public Inspection

Internal Revenue Service Name of the organization ➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

Name of t	the organization	on						E	mployer i	identification number
		THE BAU	JM SCHOOL OF_	ART					23	3-1607174
Part I	Reason f	or Public Cha	rity Status (All organiz	ations mu	st complet	e this part	) See inst	ructions.		
The organ	ization is not a	private foundation	because it is: (For lines 1	through 1	11, check o	only one b	ox)	-		
1 🛄	A church, cor	vention of churche	es, or association of churc	ches desci	nbed in <b>se</b>	ction 170	(b)(1)(A)(i)			
2 X	A school desc	inbed in section 1	70(b)(1)(A)(ii). (Attach Sc	hedule E)						
з 🔲	A hospital or a	a cooperative hosp	ortal service organization of	described i	n section	170(b)(1)(	(A)(iii).			
4 🔲	A medical res	earch organization	operated in conjunction	with a hos	pıtal descr	ibed in <b>se</b>	ction 170	(b)(1)(A)(ii	ii). Enter t	he hospital's name,
	city, and state	<del>)</del> :								
5 🔲	An organization	on operated for the	benefit of a college or ur	niversity ov	vned or op	erated by	a governr	mental uni	nt describe	ed in
	section 170(	<b>b)(1)(A)(iv).</b> (Comp	lete Part II.)							
6 🔲	A federal, stat	te, or local governr	ment or governmental uni	t described	d in sectio	n 170(b)(1	I)(A)(v).			
7 🗀	An organization	on that normally re	ceives a substantial part	of its supp	ort from a	governme	ntal unit o	r from the	general p	oublic described in
	section 170(l	o)(1)(A)(vi). (Compl	ete Part II)							
8 🗌	A community	trust described in	section 170(b)(1)(A)(vi).	(Complete	Part II.)					
9 🗔	An organization	on that normally re	ceives: (1) more than 33 1	1/3% of its	support fi	rom contri	butions, m	nembershi	ıp fees, ar	nd gross receipts from
	activities relat	ed to its exempt fu	unctions - subject to certa	un excepti	ons, and (2	2) no more	than 33 1	/3% of its	support	from gross investment
	income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975									
	See section !	509(a)(2). (Comple	te Part III.)							
10 🖳	An organization organized and operated exclusively to test for public safety. See section 509(a)(4).									
11 🔲	An organizati	on organized and o	perated exclusively for the	ne benefit (	of, to perfo	orm the fur	nctions of,	or to carr	y out the	purposes of one or
	more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that									
	describes the type of supporting organization and complete lines 11e through 11h.									
	a Type I b Type II c Type III · Functionally integrated d Type III · Other									
e 📖			at the organization is not							
	foundation m	anagers and other	than one or more publicly	y supporte	d organiza	itions des	cribed in s	ection 509	9(a)(1) or	section 509(a)(2)
f	If the organiza	ation received a wi	ntten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III		
		ganization, check								Ш
9			organization accepted ar							
	7.7		directly controls, either al	lone or tog	ether with	persons o	lescribed i	ın (ıi) and (	(iii) below,	1 1 1
	-		supported organization?					••		11g(i)
		•	on described in (i) above?		_					11g(ii)
	• •	=	a person described in (i)							11g(iii)
h	Provide the fo	ollowing informatio	n about the supported or	ganization	(s).					
			(iii) Type of	L				(4) (4	c tho	
	of supported	(ii) EIN	organization		organization sted in your			Torganizati	on in col. I	(vii) Amount of
org	anization		(described on lines 1-9	governing	document?	(i) of you	r support?	(i) organiz U.S	zea in the   S.?	support
			above or IRC section (see instructions))	Yes	No	Yes	No	Yes	No	
			(ood mondono)/	103	110	103	110	103	"	
		<u> </u>		†					<del> </del>	
				1						
				1	1	1	1		1	

932021 02-08-10

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for

	edule A (Form 990 or 990-EZ) 2009 irt II Support Schedule for	_			)(b)(1)(A)(iv) an	d 170(b)(1)(A)(v	Page 2
	(Complete only if you checke	d the box on line 5	, 7, or 8 of Part I.)			··-··-	
Sec	ction A. Public Support	·				·	
Cale	endar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
_	include any "unusual grants ")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to or expended on its behalf						
_					1		
3	The value of services or facilities						
	furnished by a governmental unit to		,				
	the organization without charge						
4	Total. Add lines 1 through 3			1			
5	The portion of total contributions						
	by each person (other than a			<u> </u>			
	governmental unit or publicly supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
	• • • • • • • • • • • • • • • • • • • •					<u> </u>	
	Public support. Subtract line 5 from line 4 ction B. Total Support	L		1	_L	<u> </u>	
	endar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	(a) 2003	(b) 2000	(6) 2001	(u) 2008	(e) 200 <del>3</del>	(I) IOIAI
8	Gross income from interest,			· · · · · · · · · · · · · · · · · · ·			
0	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated business						
9	activities, whether or not the						
	business is regularly carned on						
10	Other income Do not include gain						
10	or loss from the sale of capital						
	assets (Explain in Part IV.)						
44	Total support. Add lines 7 through 10						
	Gross receipts from related activities	etc. (see instructi	ons)	1	1	12	L-1-1011
	First five years. If the Form 990 is fo	•	,	rd fourth or fifth	tax vear as a section		*·· <del>·</del>
.0	organization, check this box and sto	ŭ	5 mot, 0000ma, tin	ia, roarar, or mar	iai your ao a ooon	J., 00 ((0)(0)	▶□
Se	ction C. Computation of Pub	lic Support Pe	rcentage				<u>,</u>
14	Public support percentage for 2009 (	line 6, column (f) d	ıvıded by line 11,	column (f))		14	%
15	Public support percentage from 2008	3 Schedule A, Part	II, line 14			15	%
16a	a 33 1/3% support test - 2009.If the o	organization did no	t check the box o	n line 13, and line	14 is 33 1/3% or r	nore, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	orted organization	n .			. ▶□
t	33 1/3% support test - 2008.If the c	organization did no	t check a box on l	ine 13 or 16a, and	d line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qua	lifies as a publicly	supported organiz	ation	• •		▶□
17a	a 10% -facts-and-circumstances tes	t - 2009. If the org	anization did not d	check a box on lin	e 13, 16a, or 16b,	and line 14 is 10%	or more,
	and if the organization meets the "fac	cts-and-circumstan	ces" test, check t	his box and stop	here. Explain in Pa	art IV how the organ	nization
	meets the "facts-and-circumstances"	test. The organiza	ation qualifies as a	publicly supporte	ed organization		ightharpoons
ŧ	o 10% -facts-and-circumstances tes	t - 2008. If the org	anization did not d	check a box on lin	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets t	he "facts-and-cırcı	ımstances" test, c	heck this box and	d <b>stop here.</b> Explai	n in Part IV how the	<del>)</del>
	organization meets the "facts-and-cir	cumstances" test.	The organization	qualifies as a pub	licly supported org	anization	. ▶□
<u>18</u>	Private foundation. If the organization		=				s <b>&gt;</b>
					Sch	edule A (Form 990	or 990-F7\ 2009

932022 02-08-10

Part III   Support Schedule for O Section A. Public Support	ganizations	Described in	Section 509(a	(Complete only	r if you checked the b	ox on line 9 of Part I
Calendar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and	(a) 2003	(6) 2000	(6) 2007	(0) 2006	(e) 2009	(f) rotal
membership fees received (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions,				<del> </del>	<del></del>	
merchandise sold or services per-						
formed, or facilities furnished in						
any activity that is related to the						
organization's tax-exempt purpose	<del></del> -			<del>                                     </del>		
3 Gross receipts from activities that						
are not an unrelated trade or bus- iness under section 513						
					-	
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons		1/4				
<b>b</b> Amounts included on lines 2 and 3 received						
from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						
Section B. Total Support				- <u>-</u>		
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	•	-				
10a Gross income from interest,						
dividends, payments received on						
secunties loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income		•				
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b				<del> </del>		
11 Net income from unrelated business					<u> </u>	
activities not included in line 10b,						
whether or not the business is						
regularly carried on  12 Other income Do not include gain						
or loss from the sale of capital						
assets (Explain in Part IV)			· -	-	-	
13 Total support (Add lines 9, 10c, 11, and 12)				<u> </u>		
14 First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth t	ax year as a section	on 501(c)(3) organiz	zation,
check this box and stop here	- Cunnant Da		<u> </u>		<u> </u>	<b>_</b>
Section C. Computation of Public					<del>T - T</del>	
15 Public support percentage for 2009 (lii		•	column (f))	•	15	
Public support percentage from 2008			<del></del>		16	9⁄
Section D. Computation of Inves					1 1	
17 Investment income percentage for 200		•	ne 13, column (f))		17	9
18 Investment income percentage from 2	· ·	•			18	9
19a 33 1/3% support tests - 2009. If the	organization did n	ot check the box	on line 14, and line	e 15 is more than	33 1/3%, and line 1	17 is not
more than 33 1/3%, check this box an	dstop here. The	organization quali	fies as a publicly s	supported organiz	ation .	. ▶□
b 33 1/3% support tests - 2008. If the	organization did n	ot check a box or	line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%,	and
line 18 is not more than 33 1/3%, chec	k this box and st	<b>op here.</b> The orga	nization qualifies a	as a publicly supp	orted organization	. ▶□
20 Private foundation. If the organization	did not check a	box on line 14, 19	a, or 19b, check ti	his box and see in	structions	
				Sci	hedule A (Form 99	0 or 990-EZ) 200
				30.	,	

#### Schedule D

Department of the Treasury

Internal Revenue Servic

(Form 990)

Supplemental Financial Statements

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

➤ Attach to Form 990. ➤ See separate instructions.

2009
Open to Public Inspection

Name of the organization

THE BAUM SCHOOL OF ART

Employer identification number 23-1607174

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate contributions to (during year) Aggregate grants from (during year) 3 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a 2b Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 3 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) Yes and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: 15,500. (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X

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

the following amounts required to be reported under SFAS 116 relating to these items:

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide

Schedule D (Form 990) 2009

123,180.

123,180.

a Revenues included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

Schedule D (Form 990) 2009

932053 02-01-10

Total. (Column (b) must equal Form 990, Part X, col (B) line 25.)

106,736.

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

_	t XI Reconciliation of Change in Net Assets from Form 990 to	Audited Fine	noial State	<u> 23</u> mant	160/1/4 Page 4
		Audited Fina	1	ment	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		1,226,029.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		1,260,568.
3	Excess or (deficit) for the year Subtract line 2 from line 1		3		-34,539.
4	Net unrealized gains (losses) on investments		4		49,059.
5	Donated services and use of facilities		5		<del></del>
6	Investment expenses		6		
7	Prior period adjustments		7		
8	Other (Describe in Part XIV)		8		
9	Total adjustments (net) Add lines 4 through 8		9		49,059.
10 Par	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and t XII Reconciliation of Revenue per Audited Financial Statement		<u>  10  </u> enue per R	eturn	14,520.
1	Total revenue, gains, and other support per audited financial statements		•	1	1,105,665.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				2/200/0001
	Net unrealized gains on investments	2a		}	
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c		ľ	
d	Other (Describe in Part XIV)	<del></del>	11,845.		
e	Add lines 2a through 2d	[ Zu ]	11/013.	2e	11,845.
3	Subtract line 2e from line 1			3	1,093,820.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		• ••	-	1,033,020.
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
a b	Other (Describe in Part XIV.)		32,209.	ľ	
	Add lines 4a and 4b	<u> </u>	32,203.	4c	132,209.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		•	5	1,226,029.
	t XIII Reconciliation of Expenses per Audited Financial Statemen	ents With Exc	enses per		m
1	Total expenses and losses per audited financial statements		рог	1	1,140,204.
	Amounts included on line 1 but not on Form 990, Part IX, line 25:	•	•		1,140,204.
2		1 00			
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b   2c			
C	Other losses	2d	11,845.		
d	Other (Describe in Part XIV.)		11,040.	0-	11,845.
e	Subtract line 2e from line 1			2e	1,128,359.
3				3	1,140,333.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1.1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a 1	32,209.		
b	Other (Describe in Part XIV)	4b 1	34,203.		122 200
	Add lines 4a and 4b			4c	132,209.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  rt XIV Supplemental Information	<del> </del>		5	1,260,568.
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III	I. lines 1a and 4. I	Part IV. lines 1	b and 2	2b: Part V. line 4: Part
	e 2; Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comp				
	RT III, LINE 4: THE COLLECTIONS ARE USED IN	•	-		
<u>CL</u> I	JB" (CPC) PROGRAM. IT WAS STARTED IN 1933	BY WALTE	R E. BA	UM.	THE CPC
PR(	OVIDES PAINTINGS FOR BANKS, PROFESSIONAL OF	FFICES AS	WELL A	S I	NDUSTRIAL
<u>AN</u>	D EDUCATION AND GOVERNMENT CLIENTS. THERE	ARE CURR	ENTLY 5	86	PAINTINGS
<u>IN</u>	CIRCULATION. THE CPC PROGRAM ENRICHES THE	E COMMUNI	TY THRO	UGH	THE
EX	HIBITION OF THE PAINTINGS.				

PART IV, LINE 2B: CITY ARTS IS A JOINT VENTURE BY THE ALLENTOWN ART

Schedule D (Form 990) 2009

#### **SCHEDULE E**

(Form 990 or 990-EZ)

Name of the organization

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 13,

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

or Form 990-EZ, Part VI, line 48.

▶ Attach to Form 990 or Form 990-EZ.

**Schools** 

Employer identification number

	THE BAUM SCHOOL OF ART	23-1	<u>607</u>	<u> 174</u>	
				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	Х	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochure	s,			
	catalogues, and other written communications with the public dealing with student admissions, programs, and sch	olarships?	2	X	
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 ma	kes			
	the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain.				
	If you need more space, use Schedule O (Form 990)	•	3	X	
	IT IS STATED IN ALL PUBLICATIONS THAT ALL STUDENTS ARE				
	INVITED TO ATTEND.				
4	Does the organization maintain the following?				
а	Records indicating the racial composition of the student body, faculty, and administrative staff?		4a	Х	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory	•	4b	Х	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with	student			
	admissions, programs, and scholarships?		4c	Х	
d	Copies of all material used by the organization or on its behalf to solicit contributions?		4d	Х	
5	Does the organization discriminate by race in any way with respect to:				
а	Students' rights or privileges?		5a		X
b	Admissions policies?		5b		Х
C	Employment of faculty or administrative staff?		5c		Х
d	Scholarships or other financial assistance?		5d	<u> </u>	X
е	Educational policies?		5e		X
f	Use of facilities?	-	5f		X
g	Athletic programs?		5g	<u> </u>	X
h	Other extracurricular activities?		5h		X
	If you answered "Yes" to any of the above, please explain If you need more space, use Schedule O (Form 990).				
		<del> </del>			
_			_		
6a	• • • • • • • • • • • • • • • • • • • •		6a	X	<del></del>
b	Has the organization's right to such aid ever been revoked or suspended?	•	6b		X
	If you answered "Yes" to either line 6a or line 6b, explain on Schedule O (Form 990).		1		
_	Control of the control of the state of the s		ı		
7	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 990)		7	x	

Schedule E (Form 990 or 990-EZ) 2009

SEE SCHEDULE O FOR LINE 6 STATEMENT

#### **SCHEDULE G**

(Form 990 or 990-EZ)

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

2009

Open To Public

OMB No 1545-0047

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

Inspection

					Employer ide	ntification number
M SCHOOL OF ART					23-1607	174
Complete if the organization answer	ered "Y	es" to	Form 990, Part IV, I	ine 1	7. Form 990-EZ	filers are not
e Solicitat f Solicitat g Special r oral agreement with any individual art VII) or entity in connection with p viduals or entities (fundraisers) pursi	ion of ion of fundra (includ	non-govern govern ising of ling of onal f	overnment grants nment grants events fficers, directors, trus undraising services?	stees	Yes	
(ii) Activity	(iii) fundr have co or con contribi	Did aiser istody trol of itions?	(iv) Gross receipts from activity	to (c	or retained by) fundraiser	(vi) Amount paid to (or retained by) organization
	Yes	No				
		<del>_</del>				
:						
	<u> </u>					
n is registered or licensed to solicit	funds (	or has	been notified it is ex	emp	t from registrati	on or licensing
					-	
		•				
eduction Act Natice see the Instru	ctions	for F	orm 990 or 990 E7	-	Schedule & /Corr	n 990 or 990-EZ) 2009
	ed funds through any of the following Solicitate Graph So	ed funds through any of the following active Solicitation of a Solicitation of a Solicitation of a Solicitation of a Special fundra registered or licensed to solicit funds or solicitation of a	ed funds through any of the following activities e Solicitation of non-g f Solicitation of gover g Special fundraising r oral agreement with any individual (including of art VII) or entity in connection with professional football or entities (fundraisers) pursuant to agree organization  (ii) Activity  (iii) Activity  Yes No  In is registered or licensed to solicit funds or has	complete if the organization answered "Yes" to Form 990, Part IV, I ed funds through any of the following activities. Check all that apply e Solicitation of non-government grants f Solicitation of government grants g Special fundraising events  r oral agreement with any individual (including officers, directors, trustant VII) or entity in connection with professional fundraising services? widuals or entities (fundraisers) pursuant to agreements under which organization  (iii) Activity    (iii) Did hindraiser from activity   (iv) Gross receipts from activity   Yes No   No	Complete if the organization answered "Yes" to Form 990, Part IV, line 1  ed funds through any of the following activities: Check all that apply.  e Solicitation of non-government grants f Solicitation of government grants g Special fundraising events  r oral agreement with any individual (including officers, directors, trustees and VII) or entity in connection with professional fundraising services?  viduals or entities (fundraisers) pursuant to agreements under which the forganization  (ii) Activity    (iii) Did   (iii) Did   (iv) Gross receipts   from activity   (v) (is)	M SCHOOL OF ART  Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ ed funds through any of the following activities. Check all that apply.  e Solicitation of non-government grants. f Solicitation of government grants. g Special fundraising events.  r oral agreement with any individual (including officers, directors, trustees or art VII) or entity in connection with professional fundraising services?  (ii) Activity  (iii) Activity  (iii) Activity  (iii) Activity  (iii) Activity  (iv) Gross receipts from activity from activity from activity from activity from activity.  Yes No.

		on Form 990-EZ, line 6a List events with	•		,	
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
						(add col (a) through
			GALA	ART AUCTION	1	col (c))
θn			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts .	40,870.	139,657.	67,261.	247,788.
	2	Less: Charitable contributions .	31,259.	47,761.	28,439.	107,459.
	3	Gross income (line 1 minus line 2)	9,611.	91,896.	38,822.	140,329.
	4	Cash prizes				
ses	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
Direct	7	Food and beverages	9,611.	6,587.		16,198.
	8	Entertainment				
	9	Other direct expenses		85,309.	38,822.	124,131.
	10	Direct expense summary. Add lines 4 throug	h 9 ın column (d)			( 140,329)
Da		Net income summary. Combine line 3, colum	in (d), and line 10	. 000 Dad IV has 10 and		0.
Pa	irt i	<b>III Gaming.</b> Complete if the organization \$15,000 on Form 990-EZ, line 6a.	answered "Yes" to Form	1 990, Part IV, line 19, or r	eported more than	
_		ψ13,500 011 0111 330 L2, inte da.		(b) Pull tabs/instant	4 ) 0.1	(d) Total gaming (add
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
90						
	1	Gross revenue				
ses	2	Cash prizes	-			
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
			Yes %	Yes%	Yes %	
	6	Volunteer labor	No No	No No	No	
	7	Direct expense summary. Add lines 2 throug	h 5 ın column (d)		•	
		Net gaming income summary Combine line	1 column (d) and line 7		_	
	8	Net gaming income summary Combine line	1, column (d), and line /			Yes No
9	En	nter the state(s) in which the organization opera	ates gaming activities:			
a	ls	the organization licensed to operate gaming a	ctivities in each of these	states?		9a
t	lf'	"No," explain <sup>.</sup>				
	_		<del></del> -		<del></del>	
40-	- \	ere any of the organization's gaming licenses r	avokod suspended or t	orminated during the tax i	roar?	100
		ere any or the organization's gaming licenses r "Yes," explain:	evoked, suspended or t	enninated during the tax y	eai:	10a
•						
11		pes the organization operate gaming activities		•		11
12		the organization a grantor, beneficiary or trust	ee of a trust or a membe	r of a partnership or other	entity formed to	
	ad	Iminister charitable gaming?				12

Schedule G (Form 990 or 990 EZ) 2009 THE BAUM SCHOOL OF ART 23-	<u> 160717</u>	4 Pa	age 3
		Yes	
13 Indicate the percentage of gaming activity operated in:		]	
a The organization's facility	%		
b An outside facility . 13b	%		
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?	15a		
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 of the third party			
Name			
Address ▶			
16 Gaming manager information:			
Name			
Gaming manager compensation ▶ \$			
Description of services provided			
	_		
Director/officer Employee Independent contractor			
17 Mandatory distributions			
a Is the organization required under state law to make chantable distributions from the gaming proceeds to			
retain the state gaming license?	17a	-	
<b>b</b> Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
organization's own exempt activities during the tax year > \$			<u> </u>

Schedule G (Form 990 or 990-EZ) 2009

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service

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

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

▶ Attach to Form 990.

2009

Open to Public Inspection

**Employer identification number** 23-1607174 (h) Purpose of grant or assistance X Yes recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (d) Amount of cash grant (c) IRC section if applicable Enter total number of section 501(c)(3) and government organizations THE BAUM SCHOOL OF ART Part I General Information on Grants and Assistance (p) EIN criteria used to award the grants or assistance? Enter total number of other organizations 1 (a) Name and address of organization or government Name of the organization

Schedule I (Form 990) 2009

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

23-1607174 (Form 990) 2009 THE BAUM SCHOOL OF ART
Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Use Part IV and Schedule I-1 (Form 990) if additional space is needed. Schedule | (Form 990) 2009

Part III Grants and Othe

Page 2

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
SCHOLARSHIPS	1151	132,209,	0	воск	
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	de the information	required in Part I,	line 2, and any other	additional information.	
SCHEDULE I, PART I, LINE 2: ALL GRANTS ARE USED AS SCHOLARSHIPS	ANTS ARE	USED AS S	CHOLARSHIP	S FOR THE	
SCHOOL. SCHOLARSHIPS INCLUDE MERITORIOUS, COMMUNITY, SPECIAL NEEDS, AND	ORIOUS, (	COMMUNITY,	SPECIAL N	EEDS, AND	
COMMUNITY PARTNERSHIP SCHOLARSHIP PROGRAMS.	PROGRAMS	•			

#### **SCHEDULE M** (Form 990)

Department of the Treasury

### **Noncash Contributions**

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

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

THE BAUM SCHOOL OF ART

Employer identification number

	THE BAUM SCH	OOL OF	ART			23-	<u> 1607</u>	<u> 174</u>	
Par	t I Types of Property			·	-				
		(a) Check if applicable	(b) Number of contributions	(c) Revenues report Form 990, Part \		Method of	d) determin enues	iing	
1	Art - Works of art	х	4	138	,680.	APPRAISED	VALU	E	
2	Art - Historical treasures	·							
3	Art - Fractional interests		•						
4	Books and publications								
5	Clothing and household goods								
6	Cars and other vehicles				<u>-</u> :				
7	Boats and planes								
8	Intellectual property								
9	Securities - Publicly traded								
10	Securities - Closely held stock .								
11	Securities - Partnership, LLC, or								
	trust interests								
12	Securities - Miscellaneous								
13	Qualified conservation contribution -			İ					
	Historic structures .								
14	Qualified conservation contribution - Other								
15	Real estate - Residential								
16	Real estate - Commercial								
17	Real estate - Other	1							
18	Collectibles								
19	Food inventory								
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other								
26	Other • ()			· · · · · · · · · · · · · · · · · · ·					
27	Other ()								
28	Other ()								
29	Number of Forms 8283 received by the organic	-	•						
	for which the organization completed Form 82	83, Part IV, [	Donee Acknowled	gment .	29				
								Yes	No
30a	During the year, did the organization receive b	=	• • • •						
	at least three years from the date of the initial	contribution,	and which is not	required to be us	ed for exer	npt purposes for			
	the entire holding period?	••					30a	_	<u> X</u>
b	If "Yes," describe the arrangement in Part II.								
31	Does the organization have a gift acceptance	-	-	-			31		<u> X</u>
32a	Does the organization hire or use third parties	or related or	ganizations to sol	ıcıt, process, or s	eli noncash	1			
	contributions?	•					32a		<u> </u>
b	If "Yes," describe in Part II.								
33	If the organization did not report revenues in c	olumn (c) foi	a type of propert	y for which colum	nn (a) is che	ecked,			
	describe in Part II.								<u> </u>
LHA	For Privacy Act and Paperwork Reduction	Act Notice	, see the Instruct	ions for Form 99	Ю.	Schedule	M (For	n 990)	2009

#### **SCHEDULE O**

(Form 990)

**Supplemental Information to Form 990** Complete to provide information for responses to specific questions on OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Form 990 or to provide any additional information. Attach to Form 990.

Name of the organization  THE BAUM SCHOOL OF ART	Employer identification number 23-1607174
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MIS	SION:
THROUGH SEMINARS AND EXIBITIONS.	
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION M	ISSION:
THROUGH THE STUDY OF VISUAL ARTS. THE SCHOOL VALUES THE D	
	D, SOCIAL
STATUS OR RACE. THE MISSION IS DEEPLY ROOTED IN SERVICE T	O_THE
COMMUNITY.	
FORM 990, PART VI, SECTION A, LINE 2: THE FORMER EXECUTIV	E DIRECTOR, ANN
LALIK, HAS A FAMILY RELATIONSHIP WITH THE CPC DIRECTOR, R	UDY ACKERMAN
(FATHER), AND THE DIRECTOR OF OPERATIONS, ROSE ACKERMAN (	MOTHER). RUDY AND
ROSE ACKERMAN ARE HUSBAND AND WIFE.	
N .	
FORM 990, PART VI, SECTION B, LINE 11: THE 990 WAS PROVID	ED TO THE FINANCE
COMMITTEE FOR REVIEW BEFORE IT WAS FILED.	
FORM 990, PART VI, SECTION B, LINE 15A: EVERY TWO YEARS,	
SALARIES WITH THE NATIONAL GUILD TO DETERMINE SALARIES.	
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION M	AKES ITS
GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FIN	ANCIAL STATEMENTS
AVAILABLE TO THE PUBLIC UPON REQUEST AND ON THE WEBSITE.	
SCHEDULE E, LINE 6 - EXPLANATION OF GOVERNMENT FINANCIAL	

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

932211 02-03-10

Schedule O (Form 990) 2009

#### **SCHEDULE O**

Department of the Treasury

Internal Revenue Service

(Form 990)

**Supplemental Information to Form 990** 

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

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization	THE BAUM	SCHOOL OF ART	Er	nployer identification number 23-1607174
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LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 932211 02-03-10

Schedule O (Form 990) 2009

#### Form **8868**

(Rev April 2009)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return

OMB No 1545-1709

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box  If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form)  Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.  Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed)  A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only  All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns  Electronic Filing (e-file) Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file income tax returns  Electronic Filing (e-file) Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the rice to file income tax returns  Electronic Filing (e-file) Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the rice to file income tax returns  Electronic Filing (e-file) Generally, you can electronically file Form 890-Time 990-Time 8868 if you want a 3-month automatic extension of time to file one of the rice file income tax returns  Electronic Filing (e-file) Generally, you can electronically file Form 890-Time 8868 if you want a 3-month automatic extension of time to file one of the rice file income file for Chantes 8 Nonprofiles  File by the date for means and file Form 990-Time form 8868 if you want a 3-month automatic extension of time to file one of the rice file form 8868 if you want a 3-month automatic extension of time to file one of the rice file form 8868 if you want a 3-month automatic extension of time to file one of the rice file form 8868 if you want a 3-month automatic extension of time to file one of time form 8868 if you want a	
A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete  Part I only  All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns  Electronic Filing (e-file) Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the rioted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the add (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T inst you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit wave is goverlife and click one -file for Chanties & Nonprofits  Type or Name of Exempt Organization  THE BAUM SCHOOL OF ART  Number, street, and room or suite no. If a P O box, see instructions  510 LINDEN ST.  City, town or post office, state, and ZIP code. For a foreign address, see instructions  ALLENTOWN, PA 18105  Check type of return to be filed (file a separate application for each return)  X Form 990  Form 990-T (corporation)  Form 990-E  Form 990-F  Form 990-T (trust other than above)  Form 6069  Form 990-F  Form 8870  LYNN SEARS  The books are in the care of F 510 LINDEN ST ALLENTOWN, PA 18101  Telephone No F (610) 433-0032  FAX No F	X
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns  Electronic Filing (e-file) Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the rinoted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the add (not automatic). 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T Inst you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Chanties & Nonprofits.  Type or print  THE BAUM SCHOOL OF ART    Number, street, and room or suite no. If a PO box, see instructions.	
Electronic Filing (e-file) Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the rinoted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the add (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T Inst you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.  Type or print  THE BAUM SCHOOL OF ART  Number, street, and room or suite no. If a PO box, see instructions.  \$\frac{11}{510} \text{ LINDEN ST.}\$  City, town or post office, state, and Z/P code. For a foreign address, see instructions.  ALLENTOWN, PA. 1810.5  Check type of return to be filed (file a separate application for each return)  \[ \frac{\text{X}}{\text{ Form 990}} \text{ Form 990-T (corporation)} \text{ Form 5227} \\	
noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the add (not automatic) 3-month extension or (2) you file Forms 990-BL. Go69, or 8870, group returns, or a composite or consolidated Form 990-T Inst you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Chanties & Nonprofits.  Type or print  THE BAUM SCHOOL OF ART  Number, street, and room or suite no. If a P O box, see instructions  510 LINDEN ST.  City, town or post office, state, and ZIP code. For a foreign address, see instructions  ALLENTOWN, PA. 1810.5  Check type of return to be filed (file a separate application for each return)  X Form 990  Form 990-BL. Form 990-T (corporation)  Form 990-BL. Form 990-T (see 401(a) or 408(a) trust)  Form 990-Form 990-Form 990-T (trust other than above)  Form 990-Form 6069  Form 990-Form 1041-A  LYNN SEARS  The books are in the care of ► 510 LINDEN ST ALLENTOWN, PA. 1810.1  Telephone No ► (610) 433-0032  FAX No ►	
THE BAUM SCHOOL OF ART  Number, street, and room or suite no. If a P O box, see instructions    Side date for certain See instructions	ditional
THE BAUM SCHOOL OF ART    Number, street, and room or suite no. If a PO box, see instructions	number
Number, street, and room or suite no. If a PO box, see instructions	
City, town or post office, state, and ZIP code For a foreign address, see instructions ALLENTOWN, PA 18105  Check type of return to be filed (file a separate application for each return)  X Form 990	
X   Form 990	
• The books are in the care of ▶ 510 LINDEN ST ALLENTOWN, PA 18101  Telephone No ▶ (610) 433-0032  FAX No ▶	
<ul> <li>If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, ch</li> <li>box ► If it is for part of the group, check this box ► and attach a list with the names and EINs of all members the extension will</li> </ul>	
1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until  FEBRUARY 15, 2011 , to file the exempt organization return for the organization named above The extension is for the organization's return for  Figure 15	
2 If this tax year is for less than 12 months, check reason Initial return Final return Change in accounting	g period
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions  a \$ b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.  3b \$	
c Balance Due. Subtract line 3b from line 3a Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System)  See instructions  3c \$ N/	/A

923831 05-26-09 Form 8868 (Rev. 4-2009)

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.