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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

OMB No 1545-0047

<u>A</u>	For the 20	09 calendar year, or tax year beginning $07/01/09$, and ending $06/30/1$.0			
В	Check if applic		D Emplo	oyer identification number		
	Address chang	use IRS Columbia Art Association]		
	Name change	I		57-	-6007869	
Π	•	type. Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Teleph	none number	
H	Initial return	See P.O. Box 2068]	803	3-799-2810	
\sqcup	Termination	Instruc- City or town, state or country, and ZIP + 4		G Gross reco	expts \$ 4,022,114	
	Amended retu	tions. Columbia SC 29202				
\Box	Application pe	nding F Name and address of pnncipal officer		H(a) Isthis	a group return for	
_		Karen Brosius		affiliate		
		P.O. Box 2068		H(b) Are all include	ed? Yes No	
		Columbia SC 29202		If "No,"	attach a list. (see instructions)	
	Tax-exemp					
_	Website:		4		exemption number	
			Year of formation 1	930	M State of legal domicile SC	
<u> </u>	art	Summary				
	1	fly describe the organization's mission or most significant activities	_			
92	"	peration & Maintenace of Art Museum for general publi	.c			
nar						
Activities & Governance	2 Cha	ick this box ▶ i f the organization discontinued its operations or disposed of more than 2	EO/ - E-t t			
ő	1	nber of voting members of the governing body (Part VI, line 1a)	5% of its net ass	1 1	29	
ජ ග		nber of independent voting members of the governing body (Part VI, line 1b)		3	29	
itie	1	al number of employees (Part V, line 2a)		5	77	
댫	1	al number of volunteers (estimate if necessary)		6	54	
ď		al gross unrelated business revenue from Part VIII, column (C), line 12		7a		
	1	unrelated business taxable income from Form 990-T, line 34		7b	0	
<u> </u>	3	Throates assumed to have a most of the second transfer of the second	Prior Yea		Current Year	
	8 Con	tributions and grants (Part VIII, line 1h)		5,570	3,312,922	
Revenue	9 Prog	gram service revenue (Part VIII, line 2g)	1,27	B,240	277,144	
eve	10 Inve	stment income (Part VIII, column (A), lines 3, 4, and 7d)		4,908	1,393	
Œ	11 Othe	er revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		8,924	231,973	
i	12 Tota	el revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,34	7,642	3,823,432	
}	13 Gra	nts and similar amounts paid (Part IX, column (A), lines 1–3)				
	14 Ben	efits paid to or for members (Part IX, column (A), line 4)				
8		aries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,96	6,855	1,975,415	
penses		essional fundraising fees (Part IX, column (A), line 11e)				
Exp		al fundraising expenses (Part IX, column (D), line 25) ▶ 485,548				
ш		er expenses (Part IX, column (A), lines 11a–11d, 11f–24f)		4,447	1,493,025	
	1	al expenses Add lines 13–17 (must equal Part IX, column (A), line 25 CEIVED		1,302	3,468,440	
<u> </u>	19 Rev	enue less expenses Subtract line 18 from line 12	Beginning of Cur	3,660	354,992 End of Year	
Net Assets or Fund Balances	20 Tota	al assets (Part X, line 16)		2,798	665,030	
Ass	21 Tota	al liabilities (Part X, line 26)		0,292	297,323	
20.00	22 Net	assets or fund balances Subtract line 21 from line 20 OGDEN! LIT		2,506	367,707	
	art II	Signature Block		L		
		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules	and statements, a	ind to the be	st of my knowledge	
		and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all inf	ormation of which i	oreparer has	any knowledge	
Sig	gn [Kney mons			<u> 2 2 1 </u>	
Here Signature of officer						
		KAREN BROSIUS ELECUTIVE DIESCTOR			2/2/11	
		Type or print name and title	 		<u>, </u>	
Pa	id	Preparer's Date	Check self-	ıf _	Preparer's identifying number (see instructions)	
	eparer's	signature / W.M. (Succession of March 1/28) Scott and Company LLP	employ	red 🕨 📙	P00100665	
	e Only	EIN ▶	57-1021392			
if self-employed), Phone Phone						
_		address, and ZIP+4 Columbia, \$C/29202		no 🕨	803-256-6021	
_		scuss this return with the preparer shown above? (see instructions)			Yes No	
For DAA		ct and Paperwork Reduction Act Notice, see the separate instructions.			Form 990 (2009)	

·. form 990 (2009)	Columbia Art Ass	ociation 57-	-6007869	Page 2
	Statement of Program Serv			
	cribe the organization's mission. con & Maintenace of	of Art Museum for gener	al public	
the prior Fo	anization undertake any significant orm 990 or 990-EZ? scribe these new services on Sche	program services during the year which were	not listed on	Yes X No
3 Did the organizes?	anization cease conducting, or ma	ke significant changes in how it conducts, any	program	Yes X No
4 Describe the Section 501	1(c)(3) and 501(c)(4) organizations	O or each of the organization's three largest proguent and section 4947(a)(1) trusts are required to revenue, if any, for each program service report	eport the amount of grants and	
mainten Approxi conserv	ance and security mately \$524,000,	n and exhibitions; educy of the Art Museum for 546,000, and 846,000 we cions, education and puty, respectively.	the general public ere spent on Curato	s. T
4b (Code.) (Expenses \$	including grants of \$) (Revenue \$)
			·	
4c (Code) (Expenses \$	including grants of \$) (Revenue \$)
		·		
	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
•				

4d Other program services. (Describe in Schedule O.)

(Expenses \$

including grants of \$ 2,295,198

) (Revenue \$

4e Total program service expenses ▶

Form **990** (2009)

om	n 990 (2009) Columbia Art Association 57-6007869		P	age
, Pi	art IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		l	
	complete Schedule A	1	X	<u> </u>
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		ĺ	l
	candidates for public office? If "Yes," complete Schedule C, Part I	3	ļ	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			l
	Schedule C, Part II	4	<u> </u>	X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			İ
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	<u> </u>	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have		l	
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	<u></u>	X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8	X	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			l
	complete Schedule D, Part IV	9	_	X
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	<u> </u>	X
1	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	X	, ;
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete		^ ~	
	Schedule D, Part VI			,
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII			
•	Did the organization report an amount for other assets related 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			
12	Schedule D, Parts XI, XII, and XIII	12	X	
124	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No	12		
124	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	1		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	170		
•	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	<u> </u>		
	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		<u> </u>	
	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	<u> </u>		
•	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
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	

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

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

Form **990** (2009)

If "Yes," complete Schedule G, Part III

Form 990 (2009) Columbia Art Association
Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		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	ł		
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K If "No," go to line 25	24a		<u> </u>
	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		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	(A)	25-		X
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
D	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	230		
	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,	20		
	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,	34. 0	,	
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	, y , k , y		
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a			
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,			
	Part IV	28c		<u> </u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30	Х	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			7.7
	Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	22		v
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	33		<u> </u>
,-	III, IV, and V, line 1	34	- 1	X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		x
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	- 55		
	organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	990	(2000)

<u>, , a</u>	otatements regarding other into I imigs and Tax compliance				Yes	No
1-	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of				168	
ıa	U.S. Information Returns Enter -0- if not applicable	1a	38	-		
ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b				
	Did the organization comply with backup withholding rules for reportable payments to vendors and rep		•			
·	gaming (gambling) winnings to prize winners?			1c	X	
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	77			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?		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					\Box
	instructions)					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	d 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		
	At any time during the calendar year, did the organization have an interest in, or a signature or other a	uthorit	у			
	over, a financial account in a foreign country (such as a bank account, securities account, or other fina					
	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 B	3ank				
	and Financial Accounts					
5a	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	tion?		5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Rega	rding				
	Prohibited Tax Shelter Transaction?			5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	е				
	organization solicit any contributions that were not tax deductible?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ns or				
	gifts were not tax deductible?			6b		<u> </u>
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 g	oods				<u> </u>
	and services provided to the payor?			7a_	X	<u> </u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b_	X	├—
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	S				
	required to file Form 8282?			7c		-
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a po	ersona				لـــــا
	benefit contract?			7e		├─
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	act?		7f		├──
9	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7 <u>g</u>		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C	as				1
_	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					1
_	organization, have excess business holdings at any time during the year?			8_	-	$\vdash \vdash$
9	Sponsoring organizations maintaining donor advised funds.			9a		
a	Did the organization make any taxable distributions under section 4966?			9a 9b		\vdash
b	Did the organization make a distribution to a donor, donor advisor, or related person?	•		30		
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12	10a				
a	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10a				
b 11		1901				
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders	11a				
a	Gross income from other sources (Do not net amounts due or paid to other sources against	· · · a				
þ	amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form			12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
	II 199) series the director of the events interest isserted of asserted deling the Jac.]		Form	990	(2009)

Form 990 (2009) Columbia Art Association 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. Section A. Governing Body and Management No 1a Enter the number of voting members of the governing body Enter the number of voting members that are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 2 any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct 3 3 supervision of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 4 4 Did the organization become aware during the year of a material diversion of the organization's assets? 5 5 X 6 Does the organization have members or stockholders? 7a Does the organization have members, stockholders, or other persons who may elect one or more members X 7a of the governing body? X b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X 8a a The governing body? X 8b Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No X 10a 10a Does the organization have local chapters, branches, or affiliates? b If "Yes." does the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with those of the organization? Has the organization provided a copy of this Form 990 to all members of its governing body before filing the 11 X 11 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12a 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 b Are officers, directors or trustees, and key employees required to disclose annually interests that could give X 12b rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." X 12c describe in Schedule O how this is done X Does the organization have a written whistleblower policy? 13 13 X Does the organization have a written document retention and destruction policy? 14 14 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? X 15a The organization's CEO, Executive Director, or top management official X 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement X 16a with a taxable entity during the year? b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) 18 available for public inspection. Indicate how you make these available. Check all that apply Own website Another's website X Upon request 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 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ Karen Brosius P.O. Box 2068

803-799-2810

SC 29202

Columbia

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

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

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

X Check this box if the organization did not compensate any current officer, director, or trustee (E) (A) (B) (C) (D) Reportable Name and Title Average Position (check all that apply) Reportable Estimated compensation amount of hours per compensation Individual to or director institutional trustee (ey employee from from related other organizations compensation organization (W-2/1099-MISC) from the (W-2/1099-MISC) organization trustee and related organizations Dr. Ronald C. Rogers 0 0 X X 0 President R. Scott McClelland 0 0 X X 0 Treasurer Claude Walker 0 X 0 Vice Pres. X Steven M. Anastasion X 0 0 Trustee Kay Bachmann 0 X 0 0 Trustee Luther J. Battiste X 0 0 Trustee Mary Rainey Belser X 0 0 Trustee Melissa W. Blanchard 0 0 Trustee Terry S. Brown X 0 0 0 Trustee U.X. Cullum Dr. 0 X 0 0 Trustee Katherine W. Davis X 0 0 0 Trustee Jack S. Folline 0 0 X 0 Trustee Helen L. Hill 0 0 X 0 Trustee Carlton Hughes Dr. X 0 0 0 Trustee Robert T. Lyles 0 0 X Trustee Sam E. McCuen X 0 0 Trustee Duncan McIntosh 0 0 X Trustee Form 990 (2009)

(A) Name and Title	(B) Average				<u></u>			(D) Reportable	(E) Reportable	(F) Estimated		
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations		
Shirley D. Mills Trustee		x						0	0	0		
Lyn Powers		x						0	0	0		
Dr. Jack Monroe S	mith											
Joel A. Smith III	<u>t</u>	X	_	_	<u> </u>	_		0	0	0		
Trustee	İ	x						0	0	0		
Kathryn Hilliard Trustee	Stuart	x						o	o	o		
Donald R. Tomlin	Jr.							0	0	0		
Brenda T. Wheeler		X	ļ									
Trustee Dr. Suzan D. Boyo		X			-	_		0	0	0		
Commissioner		x						0	0	0		
L. Arlen Cotter Commissioner	1	x						o	О	o		
C. Carroll Heywar	d							0	0	0		
Commissioner Stephen Morrison		X	_			<u> </u>		0	0			
Commissioner Karen Brosius	<u> </u>	X						0	0	0		
Exec Directo	60.00				x	ļ		219,472	0	24,226		
1b Total					<u>. </u>	·		219,472		24,226		
2 Total number of individuals (in reportable compensation from				thos	e lıs	ted a	bove	e) who received more than	\$100,000 in			
										Yes No		
3 Did the organization list any for employee on line 1a? If "Yes,"	complete Schee	dule	J for	suc	h inc	lividu	ıaİ			3 X		
4 For any individual listed on line the organization and related o	e 1a, is the sum rganizations gre	of re ater	port than	able \$15	com 0,00	pens	satio Yes"	n and other compensation s," complete Schedule J fo	trom r such			
individual 5 Did any person listed on line 1	la receive or acc	rue (comp	oens	atıor	n fror	n an	y unrelated organization fo	r	4 X		
services rendered to the organ	nization? If "Yes,									5 X		
Section B. Independent Contract Complete this table for your five compensation from the organical compensation.	ve highest comp	ensa	ted	ındep	pend	lent o	contr	actors that received more	than \$100,000 of			
	(A) business address							Descrip	(B) toon of services	(C) Compensation		
			_									
							-					
							_					
2 Total number of independent	contractors (incli	udıng	but	not	lımıt	ed to	tho	se listed above) who receiv	/ed			
more than \$100,000 in compe	ensation from the	org	anız	ation	<u> </u>					0 Form 990 (2009)		

Pa	irt V	III Statement of Reve	<u>nue</u>					
					(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
			г г			revenue		512, 513, or 514
돮	1a	Federated campaigns	1a					
E 2	b	Membership dues	1b	517,255				
S, E	С	Fundraising events	1c					
	d	Related organizations	1d					
ē.E	е	Government grants (contributions)	1e :	1,392,000				
흕	f	All other contributions, gifts, grants,				,		
듗色		and similar amounts not included above	1f :	L,403,667				
E E	g	Noncash contributions included in lines 1a-	1f \$	166,925				
نة ق	h	Total. Add lines 1a-1f		▶	3,312,922			
97				Busn. Code				
Ven	2a	Tours & Admission			153,962	153,962		
2	b	Miscellaneous Servi	ce Revenue		65,905	65,905		
Vice	С	Tuition & Registrat	ion		51,077	51,077		
Ser	d	Advertising Income			6,200	6,200		
Program Service Revenue Contributions, gifts, grants	е							
ogr	f	All other program service reve	nue					
4	9	Total. Add lines 2a-2f		•	277,144			
	3	Investment income (including	dividends, inte	erest, and				
		other similar amounts)		▶	1,393			1,393
	4	Income from investment of tax	exempt bond	l proceeds ▶				
	5	Royalties		>				
		(ı) Real	(1) Personal				
	6a	Gross Rents 118,	655			ì		
	b	Less rental exps						
	С	Rental inc or (loss) 118,	655		<u>-</u>			
	d Net rental income or (loss) 7a Gross amount from (1) Securities (1)			<u> </u>	118,655			118,655
	/a	sales of assets (i) Securities	3	(II) Other				
		other than inventory						
	Ь	Less cost or other						
		basis & sales exps						
	С	Gain or (loss)						J
	d	Net gain or (loss)		•				
97	8a	•	nts					
'en		(not including \$:	
Re		of contributions reported on line 1c)	ı	150 740				
Other Revenue		See Part IV, line 18	a	150,748 58,532				
ð		Less. direct expenses	b		92,216	92,216		
		Net income or (loss) from fund Gross income from gaming activitie		· •	32,210	32,210		
	Jä	See Part IV, line 19	a a					
	h	Less direct expenses	ь					-
		Net income or (loss) from gam		•			··	
		Gross sales of inventory, less	IIIIg dollvidos				······	
		returns and allowances	a	161,252				1
	ь	Less cost of goods sold	<u> </u>	140,150				
		Net income or (loss) from sale			21,102	21,102		
	Ť	Miscellaneous Revenue		Busn. Code		- ,		
	11a							
	b						· · · · ·	
	C	• • • •						
	ď	All other revenue						
	е	Total. Add lines 11a-11d						
	12	Total Revenue. See instruction	ns	, ▶	3,823,432	390,462	0	120,048

| Part IX | Statement of Functional Expenses

Form 990 (2009)

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

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

	All other organizations must c	<u> </u>	<u> </u>		
	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
•	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
-	the U S. See Part IV, line 22				
3	Grants and other assistance to governments,			\$.	,
-	organizations, and individuals outside the			i digirari	7 3
	U.S. See Part IV, lines 15 and 16			•	<i>'</i>
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
•	trustees, and key employees	190,000	116,904	47,305	25,791
6	Compensation not included above, to disqualified	200/000			
Ü	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salanes and wages	1,364,194	839,368	339,645	185,181
8	Pension plan contributions (include section 401(k)	-,00=,10=	333,333	555,025	
0	and section 403(b) employer contributions)				
	Other employee benefits	298,043	179,213	77,608	41 222
9	· · ·	123,178	74,019	32,133	41,222 17,026
10	Payroli taxes	123,110	77,013	JE, 133	1,,020
11	Fees for services (non-employees)				
a	Management				
b	Legal	16,294		16,294	
C		10,294		10,294	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
9	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties	050 00-	010 005		
16	Occupancy	218,825	218,825	10.004	
17	Travel	25,343	10,320	12,224	2,799
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance .	67,497	18,000	49,497	
	·		Ţ		
24	Other expenses Itemize expenses not		ļ		
	covered above (Expenses grouped together		į		
	and labeled miscellaneous may not exceed		}		
	5% of total expenses shown on line 25 below)				
а	آخلينيون ماخيليمو أيووناها	267,525	267,525		
þ	Promotions	189,766	145,394		44,372
c	Participation Fees	105,129	105,129		
d	Public Programming	94,327	94,327		
e	Membership Promotions	94,287			94,287
f	All other expenses	414,032	226,174	112,988	74,870
25	Total functional expenses. Add lines 1 through 24f	3,468,440	2,295,198	687,694	485,548
	Joint costs. Check here ▶ if following		, = =		
20	SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and		-		
DAA	fundraising solicitation	i			Form 990 (2009)

Part	X Balance Sheet		· · · · · · · · · · · · · · · · · · ·		
			(A) Beginning of year		(B) End of year
1	Cash—non-interest bearing		583,897	1	145,164
2	Savings and temporary cash investments		60,372	2	42,377
3	Pledges and grants receivable, net	121,183	3	110,593	
4	Accounts receivable, net		60,411	4	160,591
5	Receivables from current and former officers, director	s, trustees, key			
	employees, and highest compensated employees. Co	, , , , , , , , , , , , , , , , , , , ,			
- 1	Schedule L			5	
6	Receivables from other disqualified persons (as define	ed under section			(
	4958(f)(1)) and persons described in section 4958(c)(3	3)(B) Complete			
	Part II of Schedule L			6	
Assets 8	Notes and loans receivable, net		7		
8 88	Inventories for sale or use		89,038	8	110,290
و اتح	Prepaid expenses and deferred charges		117,897	9	96,015
_	Land, buildings, and equipment, cost or	1 1			
''	other basis Complete Part VI of Schedule D	10a			
۱.	Less accumulated depreciation	10b		10c	
11	Investments—publicly traded securities	100		11	
12	Investments—other securities See Part IV, line 11		12		
13	Investments—program-related See Part IV, line 11		13		
14	Intangible assets		14		
15	Other assets See Part IV, line 11		15		
16	Total assets. Add lines 1 through 15 (must equal line	34)	1,032,798	16	665,030
17	Accounts payable and accrued expenses		366,656	17	237,696
18	Grants payable		18		
19	Deferred revenue		164,293	19	49,277
20	Tax-exempt bond liabilities		= = 7== 9	20	
	Escrow or custodial account liability Complete Part IV	of Schadula D		21	
Liabilities 21 22 22 22 22 22 22 22 22 22 22 22 22					
≒ "	employees, highest compensated employees, and dis				
<u>ia</u>	persons Complete Part II of Schedule L	quaimeu		22	<u></u>
ے ₂₃		urd naties		23	
24	Unsecured notes and loans payable to unrelated third			24	
25	Other liabilities Complete Part X of Schedule D	parties	29,343	25	10,350
26	Total liabilities. Add lines 17 through 25		560,292	26	297,323
	Organizations that follow SFAS 117, check here	X and	3007232		
Balances 27 28	complete lines 27 through 29, and lines 33 and 34.	anu			
	Unrestricted net assets		-59,981	27	-150,236
E 28	Temporarily restricted net assets	•	532,487	28	517,943
면 29	·	•	332,431	29	02.,010
Fund 29	Organizations that do not follow SFAS 117, check h	nom b []			
<u> </u>		lete 🕨 🔛		İ	
5	and complete lines 30 through 34.			30	
\$ 30		ent fund		31	
31 32 31		•		32	
Net Assets 30 31 32 30	•	, or other fullus	472,506		367,707
33	Total net assets or fund balances		1,032,798		665,030
<u> </u>	Total liabilities and net assets/fund balances		1,032,130	34	000,030

Form **990** (2009)

Separate basis X Consolidated basis Both consolidated and separate basis

the Single Audit Act and OMB Circular A-133?

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in

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

Form **990** (2009)

3a

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No 1545-0047
2009
Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

Columbia Art Association

Employer identification number 57-6007869

P	art i	Reas	on for Public Charity	Status (All organizations	s must o	complet	e this	part.)	See in	struct	tions.		
The	orga	inization is not	a private foundation because	e it is: (For lines 1 through 11, i	check only	y one box	.)						
1		A church, co	nvention of churches, or ass	ociation of churches described	ın sectior	170(b)(1)(A)(i).						
2	П	A school des	cribed in section 170(b)(1)(A)(ii). (Attach Schedule E)									
3	П	A hospital or	a cooperative hospital servi-	ce organization described in se	ction 170	(b)(1)(A)(i	iii).						
4				d in conjunction with a hospital)(1)(A)(i	ii). Ente	r the ho	spital's name	,	
		city, and stat											
5	П			of a college or university owned	or operat	ed by a g	ovemme	ental uni	t descri	bed in			
	Ш		b)(1)(A)(iv). (Complete Part		·								
6	\Box			overnmental unit described in s	ection 17	'0(b)(1)(A)(v).						
7	X			substantial part of its support fro				from the	genera	l public	:		
	لت		section 170(b)(1)(A)(vi). (Co	*	Ū					•			
8	П			70(b)(1)(A)(vi). (Complete Part	:11.)								
9	Н	-		1) more than 33 1/3 % of its sup		contribut	ions. me	mbersh	ip fees.	and gr	oss		
	ب			npt functions—subject to certain									
				nd unrelated business taxable in									
				0, 1975. See section 509(a)(2)				•					
10				exclusively to test for public safe									
11	Н			exclusively for the benefit of, to				to cam	out the	•			
• •	ш			ed organizations described in s							1		
				he type of supporting organizati									
		a Type		c Type III-Function			d	_	e III–Ot	her			
е		By checking	this box, I certify that the org	janization is not controlled direc	tly or indi	rectly by o	ne or m	ore disc	ualified				
	Ш		-	and other than one or more pul							1		
		-	section 509(a)(2)										
f		If the organiz	ation received a written dete	ermination from the IRS that it is	a Type I,	Type II,	ог Туре	III suppo	orting				
			check this box										
g		Since Augus	t 17, 2006, has the organiza	tion accepted any gift or contrib	ution from	any of th	ne						
_		following pe	rsons?										
		(i) A perso	n who directly or indirectly co	ontrols, either alone or together	with perso	ons descr	ibed in (II)				Yes	No
		and (III)	below, the governing body o	f the supported organization?							11g(i)		<u>.</u>
			member of a person describ								11g(ii)		<u> </u>
		(iii) A 35% d	controlled entity of a person of	described in (ı) or (ıı) above?							11g(iii		J
h		Provide the	following information about t	he supported organization(s)									
(i)	Nam	e of supported	(ii) EIN	(iii) Type of organization	(iv) is the	organization		ou notify		s the	(vii) Am		
	οη	ganization		(described on lines 1–9		sted in your		nzation in of your	organizat	on in col zed in the	supp	oort	
				above or IRC section (see instructions))	governing	document?		port?	1	S 7			
					Yes	No	Yes	No	Yes	No			
						1							
		.			-			<u> </u>	 				
					†								
					-					<u> </u>			
Tota	al												

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 2,418,451 3,176,165 3,024,893 3,407,481 3,312,922 15,339,912 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 2,418,451 3,176,165 3,024,893 3,407,481 3,312,922 15,339,912 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) 181,089 Public support. Subtract line 5 from line 4 15,158,823 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (e) 2009 (f) Total (a) 2005 (b) 2006 (c) 2007 (d) 2008 Amounts from line 4 2,418,451 3,176,165 3,024,893 3,407,481 3,312,922 15,339,912 Gross income from interest, dividends. payments received on securities loans, rents, royalties and income from similar 164,374 130,868 120,048 742,580 160,708 166,582 sources Net income from unrelated business activities, whether or not the business is regularly carned on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support. Add lines 7 through 10 16,082,492 12 12 Gross receipts from related activities, etc. (see instructions) 2,908,323 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 ▶ □ organization, check this box and stop here Section C. Computation of Public Support Percentage 94.26% 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 Public support percentage from 2008 Schedule A, Part II, line 14 15 93.91% 15 16a 33 1/3 % support test-2009. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3 % support test—2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test-2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test-2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Page 2

18

Schedule À (Form 990 or 990-EZ) 2009 Columbia Art Association 57-6007869 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities 5 furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons 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 Public support (Subtract line 7c from Section B. Total Support (e) 2009 (f) Total Calendar year (or fiscal year beginning in) ▶ (a) 2005 (b) 2006 (c) 2007 (d) 2008 Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b Net income from unrelated business 11 activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, 13 and 12.) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 15 16 Public support percentage from 2008 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 17 18 Investment income percentage from 2008 Schedule A, Part III, line 17 18 33 1/3 % support tests-2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3 % support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 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

Schedule A (Form 990 or 990-EZ) 2009 Columbia Art Association 57-6007869

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

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Employer identification number Name of the organization 57-6007869 Columbia Art Association Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds Total number at end of year Aggregate contributions to (during year) 3 Aggregate grants from (during year) 4 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? 6 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 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 2a a Total number of conservation easements b Total acreage restricted by conservation easements 2b 2c c Number of conservation easements on a certified historic structure included in (a) 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 taxable year ▶ Number of states where property subject to conservation easement is located ▶ _ _ _ _ _ _ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Yes No violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section Yes No 170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)? 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: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

Part VII Investments—Other Securities. See Form 9		
(a) Description of security or category	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(including name of security)		Cost or eno-or-year market value
Financial derivatives		· · · · · · · · · · · · · · · · · · ·
Closely-held equity interests		
Other	-	
	- 	
_ 		
	_	
		
100011 (001011111 (0) 111001 04001 1 01111 000) 1 011111 001 (0) 11111		
Part VIII Investments—Program Related. See Form	990, Part X, line 13.	
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
		· · · · · · · · · · · · · · · · · · ·
		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	>	mande du Francisco
Part IX Other Assets. See Form 990, Part X, line 15		
(a) Description	·	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15)	25	<u> </u>
Part X Other Liabilities. See Form 990, Part X, line	(b) Amount	
1. (a) Description of liability	(b) Amount	
Federal income taxes Due to Commission	10,350	
Due co commission	10,330	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	▶ 10,350	

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

Sche		<u>7-6007869</u>		Page 4			
Ø Pa	irt:XI Reconciliation of Change in Net Assets from Form 990 to Audited Fina	ncial Statem	ents				
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	3,823,432			
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	3,468,440			
3	Excess or (deficit) for the year Subtract line 2 from line 1		3	354,992			
4	Net unrealized gains (losses) on investments		4				
5	Donated services and use of facilities	[·	5	7,081			
6	Investment expenses	Γ	6				
7	Prior period adjustments		7				
8	Other (Describe in Part XIV)	Γ	8	-466,872			
9	Total adjustments (net) Add lines 4 through 8	Ī	9	-459,791			
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		10	-104,799			
-	It XII Reconciliation of Revenue per Audited Financial Statements With Rev	enue per Reti	urn				
1	Total revenue, gains, and other support per audited financial statements		1	4,051,295			
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.	ľ	3.4				
a	Net unrealized gains on investments						
b	Donated services and use of facilities 2b	196,106	1				
	Recoveries of prior year grants 2c		.				
d	Other (Describe in Part XIV)	198,682					
	Add lines 2a through 2d	130/002	2e	394,788			
3	Subtract line 2e from line 1	·	3	3,656,507			
A	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		- +	3,030,301			
7							
a	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIV.) 4b	166,925					
-			4c	166,925			
	Add lines 4a and 4b Total supplies Add lines 2 and 4a. (This must equal Form 000. Both Line 12.)	F	5	3,823,432			
_ <u>5</u>	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Int XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	noncoc nor P					
		penses per Ki		4,156,094			
1	Total expenses and losses per audited financial statements	<u> </u>	1	4,130,094			
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	189,025					
a	Donated services and use of facilities 2a	169,023					
D	Prior year adjustments 2b						
C .	Other losses 2c	409 620	1				
d	Other (Describe in Part XIV)	498,629		CO7 CEA			
_	Add lines 2a through 2d	-	2e	687,654			
3	Subtract line 2e from line 1	-	3	3,468,440			
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	İ					
	Investment expenses not included on Form 990, Part VIII, line 7b						
	Other (Describe in Part XIV)						
	Add lines 4a and 4b	<u> </u>	4c	2 4 60 440			
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	3,468,440			
	art XIV Supplemental Information						
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Par						
	2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Al	so complete					
	part to provide any additional information.						
_ P	art III, Line la - Terms for Not Reporting Assets P	er_SFAS]	116	- 			
_N	ote 1 of the financial statements (Art Collection)	The Museu	m _]	holds_more_			
_t]	han 7,000 art objects covering all periods of histo	ry_from a	nc:	ient through			
m	odern. The value of art objects purchased by the M	useum or	_ d o	nated to the			
M	Museum is not included within its combined statements of financial position						
_a <u>:</u>	s they are held for public and exhibition, are prot	ected and	g i	reserved,			
_a <u>ı</u>	nd the proceeds from the sale of collection items a	re_used t	to_a	acquire			

Schedule D (Form 990) 2009 Columbia Art Association	57-6007869	Page 5
Part XIV Supplemental Information (continued)		
_Gala_expense_netted_on_statement_of_rever	ıue 58	<u>,532</u> _
Part XII, Line 4b - Revenue Amounts Inclu	ded on Return - Other	
_Donated_Art_Work	\$166	, 9 <u>25</u>
Part XIII, Line 2d - Expense Amounts Incl		
Museum Shop Expenses netted on statement	of revenue \$ _ 140	<u>,150</u> _
_Gala_expense_netted_on_statement_of_rever	ue 58	<u>,532 </u>
_Art_acquisitions	\$299	<u>,947 </u>

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

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

OMB No 1545-0047

Name of the organization Columbia Art Ass	ociation				Employer identi	
Part 1 Fundraising Activities. Comple Form 990-EZ filers are not requ	te if the organiza	tion an	nsw irt.	ered "Yes" to Forr		
1 Indicate whether the organization raised funds thro	ugh any of the followin	g activit	ies	Check all that apply	-	-
a Mail solicitations	e 🗌 Solicitation	n of non-	-gov	ernment grants		
b Internet and email solicitations	f Solicitation	n of gove	ernm	nent grants		
c Phone solicitations	g 🗌 Special fu	ndraising	g ev	ents		
d In-person solicitations						
2a Did the organization have a written or oral agreeme or key employees listed in Form 990, Part VII) or el	ent with any individual intity in connection with	(includin profess	g off	ficers, directors, trustee al fundraising services?	es	Yes No
b If "Yes," list the ten highest paid individuals or entiti to be compensated at least \$5,000 by the organizar		ant to a	gree	ments under which the	fundraiser is	
(i) Name of individual or entity (fundraiser)	(ii) Activity	(III) Did f raiser h custody control contributi	ave y or of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
		+				
		\perp	_			
		1 1				Ì
		+ +	-			
		+-+				
		+-+				
		1				
				. — -		
Total			•			
List all states in which the organization is registered registration or licensing	or licensed to solicit	funds or	has	been notified it is exen	npt from	
					•	
• • • • • • • • • • • • • • • • • • • •	•					
					•	
			•			

57-6007869

Р	art	II Fundraising E more than \$15	Event: 5 000	s. Complete on Form 99	e if the orga	inization answ 6a .List event:	ered "Yes" 1 s with aross	to Fo rece	orm 990, P eipts great	'art IV, lir 'er than \$	ne 18, \$5.000	or re	porte	∌d
		more than with		(a) Event #	£1	(b) Ever	nt #2		(c) Other eve	ents	(d)	Total e	throug	gh
Revenue	1 2	Gross receipts Less Chantable		(event type)	.50,748	(event ty	ре)		(total numb	er)			50,7	748
	3	contributions Gross revenue (line 1 minus line 2)		1	.50,748							15	50,7	748
	4	Cash prizes									· · · · · · · · · · · · · · · · · · ·			
	5	Noncash prizes											 -	
Sesu	6	Rent/facility costs									-			
Direct Expenses	7	Food and beverages	ļ <u>-</u>					ļ						
Die	8	Entertainment												
	9	Other direct expenses	L		58,532		<u>.</u>			-		5	8,5	<u>532</u>
	10 11	Direct expense summary C Net income summary C III Gaming. Com	ombine	e line 3, columi	n (d), and line	10	- Form 000	Por	+ IV line 1	P or rep	orted		8,5 92,2	532 ₎ 216
	art i	than \$15,000	on Fo	orm 990-EZ	iization ans , line 6a.	wereu tes i	. Fulli 990	, rai	tiv, iiie i	is, or tep	ontea	111016		
Revenue		· ·		(a) Bingo		(b) Pull tabs bingo/progress			(c) Other gan	ning		otal garr i) throug		
Rev	1_1_	Gross revenue												
ses	2	Cash prizes												
Expenses	3	Noncash prizes				-								
Direct	4	Rent/facility costs												
	5	Other direct expenses										-		
	6	Volunteer labor		Yes No	%	Yes No	%		Yes No	%				
7 Direct expense summary Add lines 2 through 5 in column (d)								<u>(</u>						
	8	Net gaming income sur	nmary	Combine line 1	I, column d, ar	nd line 7				•				
9	Fr	nter the state(s) in which the	he orga	inization opera	tes gaming ac	tivities					·		Yes	No
a b	Is	the organization licensed "No," Explain.	_	=	_				•			9a		
10a b		ere any of the organization "Yes," Explain.	n's gan	ning licenses n	evoked, suspe	nded or terminate	d during the tax	year	?		••	10a		
	~		_			_								
11		oes the organization opera the organization a grantor	_	-			tnership or oth	er ent	utv		•	11		
12		med to administer charita						GI CILL				12		

Sche	hedule G (Form 990 or 990-EZ) 2009 Columbia Art Assoc	iation	57-6007	869	Р	age 3
					Yes	No
13	Indicate the percentage of gaming activity operated in:			深 着		
а	The organization's facility		13a	<u>%</u>		1 3
b	An outside facility		13b	<u>%</u>		
14	Provide the name and address of the person who prepares the organization's	gamıng/special events books		11 12		
	and records					
				2 3	1	3)
	Name ►			23	is k	
					14.50	
	Address >					
				\$ P	1/2	5.0
15a	, .	zation receives gaming			100 100	لتنا
	revenue?			15a	4 4	2 32 1
b	If "Yes," enter the amount of gaming revenue received by the organization	\$	and the	3.	\$ 3.7°	
	amount of gaming revenue retained by the third party ▶ \$			ļ, Ť		, "
С	If "Yes," enter name and address of the third party			ماي	,	1
	Name ▶					
	That is a			,		1
	Address ▶			,	, , , , , , , , , , , , , , , , , , ,	
						, ,
16	Gaming manager information			,		S.
	•			٠ .	ļ ´ .	
	Name ▶			٠.,		÷
				۶.	:	, ,
	Gaming manager compensation ▶ \$				1	1
	Description of services provided ▶					
	Director/officer Employee Independent con	tractor				
	Director/officer Employee Independent con	li actoi				
17	Mandatory distributions					
а	Is the organization required under state law to make charitable distributions from	om the gaming proceeds to				
	retain the state gaming license?			17a		
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		

Schedule G (Form 990 or 990-EZ) 2009

SCHEDULE J (Form 990)

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

Compensated Employees

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

▶ Attach to Form 990. ▶ See separate instructions.

Open To Public Inspection ...

Department of the Treasury Internal Revenue Service Name of the organization

Columbia Art Association

Questions Regarding Compensation

Employer identification number 57-6007869

OMB No 1545-0047

			Yes	No
				(B)
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form	A 2		
	990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items	14.	(3)	
	First-class or charter travel Housing allowance or residence for personal use	2 m	ξ [*] .	
	Travel for companions Payments for business use of personal residence	250	166	1 4
	Tax indemnification and gross-up payments Health or social club dues or initiation fees		100	
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)	, ,	10	4
			, `	2 7
Ь	If any of the boxes on line 1a is checked, did the organization follow a written policy regarding payment			, ''
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain	1b	1	
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?	2		
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 Written employment contract		Y.	1 1
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			-
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
·	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5–9.			
5	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		X
b	Any related organization?	5b		X
	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		X
b	Any related organization?	6b		X
	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		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was			
-	subject to the initial contract exception described in Regs. section 53 4958-4(a)(3)? If "Yes," describe			
	in Part III	8		х
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
•	Pegulations section 53 4058-6/c)?	ا ا		

Page 2

Columbia Art Association

Schedule J (Form 990) 2009

Part II

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

57-6007869

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

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

	(B) Breakdown	(B) Breakdown of W-2 and/or 1099-MISC compensation	compensation	(C) Retrement and	pg Die	(E) Total of columns	(F) Compensation
(A) Name	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits		reported in prior Form 990 or Form 990-EZ
Karen Brosius	000,061	25,00	4,472	0	24,226	243,698	190,000
1)	0 (1)	0	0		0	0	0
	(C) (E)	•					
	(E)	•					
	(c)						
	(I)						
5	(u)						
1)	(E)						
)	(II) (i)	•					
0	(II)						
))	(u) (t)						
))	(n) (i)						
)	(u) (0)						
)	(n)	·					
1)	(n)						
)	(n)						
)	(n)	•					
						Schedi	Schedule J (Form 990) 2009

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

SCHEDÜLE M (Form 990)

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

2009

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Columbia Art Association

Employer identification number 57-6007869

During the year, did the organization receive by contribution any property reported in Part I, lines 1–28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? b If "Yes," describe the arrangement in Part II. 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 32 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash	t (Dá		ALC P	7220CTACTOIL				<u> </u>	00700			
2 Art—Historical treasures 3 Art—Fractional interests Books and publications 5 Clothing and household goods 6 Cars and other vehicle 7 Boots and planes Intellectual property 9 Securities—Publicity traded 9 Securities—Closely held stock 10 Securities—Closely held stock 11 Securities—Partnership, LLC, or trust interests 12 Securities—Miscellaneous 13 Qualified conservation contribution—Historic structures 14 Qualified conservation contribution—Other 15 Real estate—Residential 16 Real estate—Commercial 17 Real estate—Commercial 18 Real estate—Commercial 19 Food inventory 20 Drugs and medical supplies 21 Taxidemy 22 Historical artifacts 3 Securities—Securities—Securities 3 Securities—Securities—Securities 3 Collectibles 4 Archeological artifacts 5 Collect ▶ (Reception/event) 7 Other ▶ (Reception/event) 7 Other ▶ (Reception/event) 7 Other ▶ (Securities—Sidadds) 7 Whinher of Forms 2823 received by the organization during the tax year for contributions for which the organization completed form 8283, Part IV, Donee Acknowledgement 2 In the structure of the structure of the proposes for the entire holding period? 2 If Yes, in Securities—Secrities and succession have a gift acceptance policy that requires the review of any non-standard contributions for onthibutions for a contributions for the organization have a gift acceptance policy that requires the review of any non-standard contributions for contributions for a contribution have a gift acceptance policy that requires the review of any non-standard contribution have a gift acceptance policy that requires the review of any non-standard contribution for contribution have a gift acceptance policy that requires the review of any non-standard contributions for contributions for selection of the proposes for the entire holding period? 30 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions for contributions for selection of the proposes for the entire holding period? 31 Does the organization have a gift acceptance	<u>⊡</u> r≓a	int i Types of Property	Check if		Revenues reported on			Method of	determinin	9		
3 Art—Fractional interests 4 Books and publications 5 Clothing and household goods 6 Cars and other vehicles 7 Boats and planes 8 Intellectual property 9 Securities—Publicity traded 10 Securities—Publicity traded 10 Securities—Publicity traded 11 Securities—Publicity traded 12 Securities—Partnership, LLC, 13 Orusified conservation 14 Qualified conservation 15 Real estate—After establishment 16 Real estate—Commercial 17 Real estate—Residential 18 Real estate—Commercial 19 Food inventory 10 Drugs and medical supplies 21 Taxodermy 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 25 Scientific specimens 26 Other ▶ (Reception/event) 27 Other ▶ (Reception/event) 28 Other ▶ (Reception/event) 29 Number of Forms 2828 received by the organization during the tax year for contributions for which the organization completed Form 8238, Part IV, Donee Acknowledgement 29 20 Drugs and provided for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? 20 If 1° Yes, describe the arrangement in Part II. 21 Does the organization hire or use third parties or related organization to solicit, process, or sell noncash	1	Art—Works of art	X	6	101,075					-		
3 Art—Fractional interests 4 Books and publications 5 Clothing and household goods 6 Cars and other vehicles 7 Boats and planes 8 Intellectual property 9 Securities—Publicity traded 10 Securities—Publicity traded 10 Securities—Publicity traded 11 Securities—Publicity traded 12 Securities—Partnership, LLC, 13 Orusified conservation 14 Qualified conservation 15 Real estate—After establishment 16 Real estate—Commercial 17 Real estate—Residential 18 Real estate—Commercial 19 Food inventory 10 Drugs and medical supplies 21 Taxodermy 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 25 Scientific specimens 26 Other ▶ (Reception/event) 27 Other ▶ (Reception/event) 28 Other ▶ (Reception/event) 29 Number of Forms 2828 received by the organization during the tax year for contributions for which the organization completed Form 8238, Part IV, Donee Acknowledgement 29 20 Drugs and provided for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? 20 If 1° Yes, describe the arrangement in Part II. 21 Does the organization hire or use third parties or related organization to solicit, process, or sell noncash	2	Art—Historical treasures										
4 Books and publications 5 Cichting and household goods 6 Cars and other vehicles 7 Boats and planes 8 Intellectual property 9 Securities—Publicity raded 10 Securities—Publicity raded 11 Securities—Publicity raded 12 Securities—Publicity raded 13 Qualified conservation contribution—Historic structures 14 Qualified conservation contribution—Historic structures 15 Real estate—Readential 16 Real estate—Commercial 17 Real estate—Commercial 18 Real estate—Commercial 19 Food inventory 20 Drugs and medical supplies 21 Taxidermy 21 Taxidermy 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 25 Other ▶ (Reception / event) 26 Other ▶ (Reception / event) 27 Other ▶ (Membership / Lraw) 28 Other ▶ (Rill Lloaxds / Adda) 29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization organization receive by contribution any property reported in Part I, lines 1–28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? 29 Dues the organization have a gift acceptance policy that requires the review of any non-standard contributions? 30 Dees the organization hire or use third parties or related organizations to solicit, process, or sell noncash												
5 Clothing and household goods 6 Cars and other vehicles 7 Boats and planes 1 Intellectual property 9 Securities—Publicity traded 10 Securities—Publicity traded 11 Securities—Partnership, LLC, or trust interests 12 Securities—Maccellaneous 13 Qualified conservation contribution—Historic structures 14 Qualified conservation 15 Real estate—Residential 16 Real estate—Commercial 17 Real estate—Commercial 18 Real estate—Commercial 19 Food inventory 10 Drugs and medical supplies 21 Taxidermy 20 Drugs and medical supplies 21 Taxidermy 21 Historical artifacts 22 Scientific specimens 23 Archeological artifacts 24 Archeological artifacts 25 Other ▶ (Reception) / (Reception)	4	Books and publications		E CONTRACTOR OF THE PROPERTY O								
6 Cars and other vehicles 7 Boats and planes 1 Intellectual property 9 Securities—Publicy traded 10 Securities—Publicy traded 11 Securities—Partnership, LLC, 12 or trust interests 13 Qualified conservation 15 contribution—Historic 16 structures 17 Qualified conservation 18 contribution—Other 19 Real estate—Residential 19 Real estate—Commercial 19 Real estate—Commercial 10 Collectibles 10 Food inventory 10 Drugs and medical supplies 11 Taxidermy 12 Historical artifacts 13 Scientific specimens 14 Archeological artifacts 15 Cifer (Reception / event)	5	Clothing and household										
8 Intellectual property 9 Securities—Publicly traded 10 Securities—Closely held stock 11 Securities—Puscellaneous 12 Securities—Miscellaneous 13 Qualified conservation contribution—Historic structures 14 Qualified conservation contribution—Other 15 Real estate—Commercial 16 Real estate—Commercial 17 Real estate—Commercial 18 Collectibiles 19 Food inventory 20 Drugs and medical supplies 21 Taxidemry 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 25 Other is (Reception/event) 26 Other is (Prof. Services) 27 Other is (Reception/event) 28 Other is (Prof. Services) 29 Other is (Billboards/Adds) 20 Other is (Billboards/Adds) 30 Drung the year, did the organization receive by contribution any property reported in Part I, lines 1—28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? 1 If Yes, describe the arrangement in Part II. 30 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 30 Does the organization hier or use third parties or related organizations to solicit, process, or sell noncash	6	_										
8 Intellectual property 9 Securities—Publicly traded 10 Securities—Closely held stock 11 Securities—Puscellaneous 12 Securities—Miscellaneous 13 Qualified conservation contribution—Historic structures 14 Qualified conservation contribution—Other 15 Real estate—Commercial 16 Real estate—Commercial 17 Real estate—Commercial 18 Collectibiles 19 Food inventory 20 Drugs and medical supplies 21 Taxidemry 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 25 Other is (Reception/event) 26 Other is (Prof. Services) 27 Other is (Reception/event) 28 Other is (Prof. Services) 29 Other is (Billboards/Adds) 20 Other is (Billboards/Adds) 30 Drung the year, did the organization receive by contribution any property reported in Part I, lines 1—28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? 1 If Yes, describe the arrangement in Part II. 30 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 30 Does the organization hier or use third parties or related organizations to solicit, process, or sell noncash	7	Boats and planes										
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b If "Yes," describe in Part II	b		•	• • •	•							
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked,			enues in c	olumn (c) for a type of p	operty for which column (a) is ch	ecked,				1	1
describe in Part II.		<u>-</u>			·					<u> </u>		<u> </u>

Schedule M (Form 990) 2009 Columbia Art Association 57-6007869

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.

SCHEDULE O

(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.

2009
Open to Public Inspection

Name of the organization

Columbia Art Association

Employer identification number 57-6007869

Form 990, Part VI, Line 6 - Classes of Members or Stockholders

The organization does have board members with independent voting rights.

Form 990, Part VI, Line 7a - Election of Members and Their Rights

The organization does have members who may elect one or more members of the governing body. The board has a nominating committee and any board member can recommend any particular individual to be nominated for the selection process. However, the 5 commissioners must be approved by the City of Columbia to serve 5 year terms.

Form 990, Part VI, Line 7b - Decisions Subject to Approval of Members
Decisions are subject to approval by the members of the governing body.

Form 990, Part VI, Line 11a - Organization's Process to Review Form 990

A draft copy of the return was presented to the board for review during the board meeting. Any questions or concerns regarding the 990 were brought to the attention and addressed by the accountants preparing the 990.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

By-laws are reviewed on a regular basis with the officers, directors, and

trustees. The president and the chair of the commission regularly discuss

conflict of interest with all board members to ensure that everyone is in

compliance.

Form 990, Part VI, Line 15a - Compensation Process for Top Official

Name of the organization

Columbia Art Association

Employer identification number 57-6007869

The Executive committee of the board looks at market averages for people in comparable positions, data provided by the independent auditor as well as the Executive Director's performance against budget and goals.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation
The Columbia Art Association makes its governing documents and financial
statements available to the public upon request.

Form **8868**(Rev April 2009)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

Internal Reven	ue Service		
If you are	filing for an Automatic 3-Month Extension, complete only Part I and check this box		▶ X
=	e filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form	1)	_
=	plete Part II unless you have already been granted an automatic 3-month extension on a previously filed Fo		8
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		▶ 🗌
	orations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an exte come tax returns	ension (of
one of the re	il <mark>ling (e-file).</mark> Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of t turns noted below (6 months for a corporation required to file Form 990-T) However, you cannot file Form 8	868	
-	If (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870	-	
	composite or consolidated Form 990-T Instead, you must submit the fully completed and signed page 2 (Pi		f Form
	ore details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Charities & Nonpro	ofits	
Type or	Name of Exempt Organization	Employ	er identification number
print	Columbia Museum of Art	57_6	007869
File by the due date for	Number, street, and room or suite no If a P O box, see instructions	,, .	1007003
filing your	Hampton & Main Streets		
return See instructions	City, town or post office, state, and ZIP code For a foreign address, see instructions Columbia SC 29201		
Form 9	90-BL Form 990-T (sec 401(a) or 408(a) trust) 90-EZ Form 990-T (trust other than above)		Form 4720 Form 5227 Form 6069 Form 8870
Telephor If the org If this is to	group, check this box If it is for part of the group, check this box and att	this is	▶ □
	names and EINs of all members the extension will cover		
until (st an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time 02/15/11, to file the exempt organization return for the organization named above. The extension is organization's return for calendar year or tax year beginning 07/01/09, and ending 06/30/10		
2 If this t	ax year is for less than 12 months, check reason. Initial return Final return Change in	ассоип	iting period
	pplication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax,		
less ar	y nonrefundable credits. See instructions.	3a	\$
	pplication is for Form 990-PF or 990-T, enter any refundable credits and estimated tax		
	nts made Include any prior year overpayment allowed as a credit	3b	\$
	te Due. Subtract line 3b from line 3a Include your payment with this form, or, if required,		
	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment		
	n) See instructions	3c	1 \$
Caution. If y for payment	ou are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879 instructions	FEU	
	Act and Paperwork Reduction Act Notice, see Instructions.		Form 8868 (Rev 4-2009)