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Form **990-PF**

Department of the Treasury
Internal Revenue Service

Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

2010

For calendar year 2010, or tax year beginning 01-01-2010 , and ending 12-31-2010

G Check all that apply

☐ Initial return

☐ Initial return of a former public charity

☐ Final return

☐ Amended return

☐ Address change

☐ Name change

Name of foundation
MUSICAL INSTRUMENT MUSEUM

Number and street (or P O box number if mail is not delivered to street address)
4725 EAST MAYO BOULEVARD

City or town, state, and ZIP code
PHOENIX, AZ 85050

A Employer identification number
16-1743588

B Telephone number (see page 10 of the instructions)
(480) 478-6000

C If exemption application is pending, check here ☐

D 1. Foreign organizations, check here ☐

2. Foreign organizations meeting the 85% test, check here and attach computation ☐

E If private foundation status was terminated under section 507(b)(1)(A), check here ☐

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐

H Check type of organization ☒ Section 501(c)(3) exempt private foundation
☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, col. (c), line 16)
\$ 124,368,701










J Accounting method ☐ Cash ☒ Accrual
☐ Other (specify) _____
(Part I, column (d) must be on cash basis.)

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	64,559,746			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities.	96,309	96,309	96,309	
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	-32,903			
	b Gross sales price for all assets on line 6a _____ 62,031,024				
	7 Capital gain net income (from Part IV , line 2)		0		
	8 Net short-term capital gain			0	
	9 Income modifications				
	10a Gross sales less returns and allowances _____ 445,357				
Operating and Administrative Expenses	b Less Cost of goods sold	209,689			
	c Gross profit or (loss) (attach schedule)	235,668		235,668	
	11 Other income (attach schedule)	1,621,755	0	1,621,755	
	12 Total. Add lines 1 through 11	66,480,575	96,309	1,953,732	
	13 Compensation of officers, directors, trustees, etc	381,392	0	0	381,392
	14 Other employee salaries and wages	4,459,618	0	0	4,356,458
	15 Pension plans, employee benefits	552,705	0	0	555,699
	16a Legal fees (attach schedule)	36,085	0	0	36,085
	b Accounting fees (attach schedule)	41,628	0	0	41,628
	c Other professional fees (attach schedule)	3,921,137	0	0	3,921,137
	17 Interest				
	18 Taxes (attach schedule) (see page 14 of the instructions)	321,950	0	0	320,807
	19 Depreciation (attach schedule) and depletion	4,421,346	0	0	
	20 Occupancy	1,250,458	0	0	1,231,124
	21 Travel, conferences, and meetings	639,537	0	0	639,537
	22 Printing and publications				
	23 Other expenses (attach schedule)	4,490,261	0	0	4,225,856
	24 Total operating and administrative expenses. Add lines 13 through 23	20,516,117	0	0	15,709,723
	25 Contributions, gifts, grants paid	240			240
	26 Total expenses and disbursements. Add lines 24 and 25	20,516,357	0	0	15,709,963
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	45,964,218			
	b Net investment income (if negative, enter -0-)		96,309		
	c Adjusted net income (if negative, enter -0-)			1,953,732	

Part II

Balance Sheets

Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1Cash—non-interest-bearing	994,673	1,430,911	1,430,911
	2Savings and temporary cash investments			
	3Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4Pledges receivable ▶ <u>1,207,202</u> Less allowance for doubtful accounts ▶ _____	600,984	1,207,202	1,207,202
	5Grants receivable			
	6Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 15 of the instructions)			
	7Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8Inventories for sale or use	1,087	251,151	251,151
	9Prepaid expenses and deferred charges	1,426,562	234,866	234,866
	10aInvestments—U S and state government obligations (attach schedule)			
	bInvestments—corporate stock (attach schedule)	10,299	 20,500	20,500
	cInvestments—corporate bonds (attach schedule).	2,929,904	 2,879,130	2,879,130
	11Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12Investments—mortgage loans			
	13Investments—other (attach schedule)	117,846	 886,334	886,334
	14Land, buildings, and equipment basis ▶ <u>121,626,318</u> Less accumulated depreciation (attach schedule) ▶ <u>4,704,787</u>	107,721,887	 116,921,531	116,921,531
Liabilities	15Other assets (describe ▶ _____)	 295,504	 537,076	 537,076
	16Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	114,098,746	124,368,701	124,368,701
	17Accounts payable and accrued expenses	6,684,241	1,138,756	
	18Grants payable			
	19Deferred revenue	18,009	92,851	
	20Loans from officers, directors, trustees, and other disqualified persons			
	21Mortgages and other notes payable (attach schedule)	30,300,000		
	22Other liabilities (describe ▶ _____)	 0	 76,380	
	23Total liabilities (add lines 17 through 22)	37,002,250	1,307,987	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24Unrestricted	75,908,516	121,790,179	
	25Temporarily restricted	152,000	241,961	
	26Permanently restricted	1,035,980	1,028,574	
	Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 27 through 31.			
	27Capital stock, trust principal, or current funds			
	28Paid-in or capital surplus, or land, bldg , and equipment fund			
	29Retained earnings, accumulated income, endowment, or other funds			
	30Total net assets or fund balances (see page 17 of the instructions)	77,096,496	123,060,714	
	31Total liabilities and net assets/fund balances (see page 17 of the instructions)	114,098,746	124,368,701	

Part III

Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year’s return)	1	77,096,496
2	Enter amount from Part I, line 27a	2	45,964,218
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3	4	123,060,714
5	Decreases not included in line 2 (itemize) ▶ _____	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	123,060,714

Part IV

Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a PUBLICLY TRADED SECURITIES				
b				
c				
d				
e				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
a 62,031,024		62,063,927	-32,903	
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		
a			-32,903	
b				
c				
d				
e				
2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }			2	-32,903
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions) If (loss), enter -0- in Part I, line 8			3	0

Part V

Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No
If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see page 18 of the instructions before making any entries			
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2009	79,295,398	7,751,579	10 229580
2008	31,265,526	22,838,337	1 368993
2007	18,717,557	26,238,729	0 713356
2006	470,997	7,965,256	0 059131
2005			
2 Total of line 1, column (d).			2 12 371060
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			3 3 092765
4 Enter the net value of noncharitable-use assets for 2010 from Part X, line 5.			4 4,565,277
5 Multiply line 4 by line 3.			5 14,119,329
6 Enter 1% of net investment income (1% of Part I, line 27b).			6 963
7 Add lines 5 and 6.			7 14,120,292
8 Enter qualifying distributions from Part XII, line 4.			8 15,709,963
If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions on page 18			

Part VIExcise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1aExempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)				
bDomestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b			1	963
cAll other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)				
2Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			2	0
3Add lines 1 and 2.			3	963
4Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			4	0
5Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			5	963
6Credits/Payments				
a	2010 estimated tax payments and 2009 overpayment credited to 2010	6a	5,000	
b	Exempt foreign organizations—tax withheld at source	6b		
c	Tax paid with application for extension of time to file (Form 8868)	6c		
d	Backup withholding erroneously withheld	6d		
7Total credits and payments Add lines 6a through 6d.			7	5,000
8Enter any penalty for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached			8	
9Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			9	
10Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.			10	4,037
11Enter the amount of line 10 to be Credited to 2011 estimated tax 1,000 Refunded			11	3,037

Part VII-AStatements Regarding Activities

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		Yes	No
		1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.	1b		No
c	Did the foundation file Form 1120-POL for this year?.	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation \$ 0 (2) On foundation managers \$ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.	2		No
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?.	4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year?.	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.	5		No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) MN, AZ, NY			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation .	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page 27)? If "Yes," complete Part XIV	9	Yes	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		No

Part VII-A

Statements Regarding Activities *(continued)*

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions).	11		No
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address WWW.THEMIM.ORG	13	Yes	
14	The books are in care of THE FOUNDATION Telephone no (480) 478-6000 Located at 4725 EAST MAYO BOULEVARD PHOENIX AZ ZIP+4 85050			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year.	15		
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16		No
See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes", enter the name of the foreign country.				

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here. <input type="checkbox"/>	1b		No
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2010?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010? If "Yes," list the years 20____, 20____, 20____, 20____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see page 20 of the instructions).	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (<i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2010.</i>)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?	4b		No

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a

During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc , organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions).

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No

b

If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)?

Organizations relying on a current notice regarding disaster assistance check here.

☒

c

If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945–5(d).

6a

Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes ☒ No

b

Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

☐ Yes ☒ No

If "Yes" to 6b, file Form 8870.

7a

At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

☐ Yes ☒ No

b

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

5b

6b

7b

No

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1

List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions).

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				

2

Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
CHRISTOPHER J BELL	CHIEF	187,500	23,322	0
4725 EAST MAYO BLVD	DEVELOPMENT OF			
PHOENIX,AZ 85050	40 00			
MATTHEW S DAWSON	SENIOR PROJECT	119,615	16,271	0
4725 EAST MAYO BLVD	MANAG			
PHOENIX,AZ 85050	40 00			
PATRICK T MANEY	CONTROLLER	105,000	23,632	0
4725 EAST MAYO BLVD	40 00			
PHOENIX,AZ 85050				
MARK MCCAULEY	DIRECTOR OF	102,500	11,959	0
4725 EAST MAYO BLVD	TECHNOLO			
PHOENIX,AZ 85050	40 00			
AMANDA BIRNSTENGEL	OPERATIONS	105,831	8,171	0
84 S TENTH ST 450	MANAGER			
MINNEAPOLIS,MN 55403	40 00			
Total number of other employees paid over \$50,000.				22

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, enter "NONE".		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
RYAN COMPANIES US INC	CONSTRUCTION	14,483,098
50 S 10TH ST 300		
MINNEAPOLIS,MN 55403		
TARGET COMMERICAL INTERIORS	FURNITURE AND FIXTURES	1,024,696
PO BOX 86		
MINNEAPOLIS,MN 554861696		
APS	UTILITIES	754,235
PO BOX 2906		
PHOENIX,AZ 850622906		
DELTA DIVERSIFIED ENTERPRISES	CONSTRUCTION	590,211
425 W GEMINI DR		
TEMPE,AZ 85283		
NEC UNIFIED SOLUTIONS INC	TECHNOLOGY	509,344
PO BOX 100840		
PASADENA,CA 911890840		
Total number of others receiving over \$50,000 for professional services.		49

Part IX-A

Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 BUILDING AND OPERATING A MUSEUM TO CELEBRATE THE HISTORY AND DIVERSITY OF MUSICAL INSTRUMENTS FROM CULTURES REPRESENTING EVERY COUNTRY OF THE WORLD THE MUSEUM OPENED IN APRIL, 2010	17,311,430
2	
3	
4	

Part IX-B

Summary of Program-Related Investments (see page 24 of the instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See page 24 of the instructions.	
3	
Total. Add lines 1 through 3.	0

Part X

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see page 24 of the instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities.	1a	3,422,007
b	Average of monthly cash balances.	1b	1,212,792
c	Fair market value of all other assets (see page 24 of the instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	4,634,799
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	4,634,799
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see page 25 of the instructions).	4	69,522
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	4,565,277
6	Minimum investment return. Enter 5% of line 5.	6	228,264

Part XI

Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☒ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	
2a	Tax on investment income for 2010 from Part VI, line 5.	2a	
b	Income tax for 2010 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	
6	Deduction from distributable amount (see page 25 of the instructions).	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1.	7	

Part XII

Qualifying Distributions (see page 25 of the instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.	1a	15,709,963
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	15,709,963
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see page 26 of the instructions).	5	963
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	15,709,000
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years			

Part XIII

Undistributed Income (see page 26 of the instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1	Distributable amount for 2010 from Part XI, line 7			
2	Undistributed income, if any, as of the end of 2010			
a	Enter amount for 2009 only.			
b	Total for prior years 20____, 20____, 20____			
3	Excess distributions carryover, if any, to 2010			
a	From 2005.			
b	From 2006.			
c	From 2007.			
d	From 2008.			
e	From 2009.			
f	Total of lines 3a through e.			
4	Qualifying distributions for 2010 from Part XII, line 4 ➤ \$ _____			
a	Applied to 2009, but not more than line 2a			
b	Applied to undistributed income of prior years (Election required—see page 26 of the instructions)			
c	Treated as distributions out of corpus (Election required—see page 26 of the instructions). . .			
d	Applied to 2010 distributable amount.			
e	Remaining amount distributed out of corpus			
5	Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a).)			
6	Enter the net total of each column as indicated below:			
a	Corpus Add lines 3f, 4c, and 4e Subtract line 5			
b	Prior years' undistributed income Subtract line 4b from line 2b.			
c	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.			
d	Subtract line 6c from line 6b Taxable amount—see page 27 of the instructions. . .			
e	Undistributed income for 2009 Subtract line 4a from line 2a Taxable amount—see page 27 of the instructions.			
f	Undistributed income for 2010 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2011.			
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions).			
8	Excess distributions carryover from 2005 not applied on line 5 or line 7 (see page 27 of the instructions).			
9	Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a.			
10	Analysis of line 9			
a	Excess from 2006.			
b	Excess from 2007.			
c	Excess from 2008.			
d	Excess from 2009.			
e	Excess from 2010.			

Part XIV

Private Operating Foundations (see page 27 of the instructions and Part VII-A, question 9)

1a

If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2010, enter the date of the ruling.

2006-03-04

b

Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

☒ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2010	(b) 2009	(c) 2008	(d) 2007	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	228,264	237,454	649,196	884,138	1,999,052
b 85% of line 2a	194,024	201,836	551,817	751,517	1,699,194
c Qualifying distributions from Part XII, line 4 for each year listed	15,709,963	79,297,335	31,270,700	18,761,044	145,039,042
d Amounts included in line 2c not used directly for active conduct of exempt activities	0	0	0	0	0
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	15,709,963	79,297,335	31,270,700	18,761,044	145,039,042
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test—enter					
(1) Value of all assets					0
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . .	152,176	258,386	761,278	874,624	2,046,464
c "Support" alternative test—enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					0
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					0
(3) Largest amount of support from an exempt organization					0
(4) Gross investment income					0

Part XV

Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see page 27 of the instructions.)

1

Information Regarding Foundation Managers:

a

List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

ROBERT J ULRICH

b

List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see page 28 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a

The name, address, and telephone number of the person to whom applications should be addressed

b

The form in which applications should be submitted and information and materials they should include

c

Any submission deadlines

d

Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Part XV **Supplementary Information** (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> VALLEY CENTER OF THE DEAF 5025 E WASHINGTON STREET SUITE 114 PHOENIX, AZ 85034	NONE	PUBLIC CHARITY	ADA SUPPORT	240
Total			3a	240
b <i>Approved for future payment</i>				
Total			3b	0

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See page 28 of the instructions)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1	Program service revenue					
a						
b						
c						
d						
e						
f						
g	Fees and contracts from government agencies					
2	Membership dues and assessments.					
3	Interest on savings and temporary cash investments					
4	Dividends and interest from securities.			14	96,309	
5	Net rental income or (loss) from real estate					
a	Debt-financed property.					
b	Not debt-financed property.					
6	Net rental income or (loss) from personal property					
7	Other investment income.					
8	Gain or (loss) from sales of assets other than inventory			18	-32,903	
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory.					235,668
11	Other revenue a MUSEUM ADMISSION					1,153,528
	b MUSIC THEATER					443,822
	c FOOD SERVICE			03	4,035	
	d OTHER PROGRAM REVENUE					20,370
	e					
12	Subtotal. Add columns (b), (d), and (e).		0		67,441	1,853,388
13	Total. Add line 12, columns (b), (d), and (e).			13		1,920,829

[illegible]

Part XVII

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1

Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a

Transfers from the reporting foundation to a noncharitable exempt organization of

1

Cash.

1a(1)

No

2

Other assets.

1a(2)

No

b

Other transactions

1

Sales of assets to a noncharitable exempt organization.

1b(1)

No

2

Purchases of assets from a noncharitable exempt organization.

1b(2)

No

3

Rental of facilities, equipment, or other assets.

1b(3)

No

4

Reimbursement arrangements.

1b(4)

No

5

Loans or loan guarantees.

1b(5)

No

6

Performance of services or membership or fundraising solicitations.

1b(6)

No

c

Sharing of facilities, equipment, mailing lists, other assets, or paid employees.

1c

No

d

If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

(a) Line No	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

2a

Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

☐

Yes

☒

No

b

If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
--------------------------	--------------------------	---------------------------------

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge.

Signature of officer or trustee

2011-11-09

Date

Title

Paid Preparer's Use Only

Preparer's Signature

Firm's name

Firm's address

Date

LARSON ALLEN LLP

220 SOUTH SIXTH STREET SUITE 300

MINNEAPOLIS, MN 55402

Check if self-employed

Firm's EIN

Phone no

PTIN

(612) 376-4500

Form 990-PF (2010)

<div>Schedule B</div> <div>(Form 990, 990-EZ, or 990-PF)</div> <div>Department of the Treasury Internal Revenue Service</div>	<div>Schedule of Contributors</div> <div>▶ Attach to Form 990, 990-EZ, or 990-PF.</div>	<div>OMB No 1545-0047</div>
		<div>2010</div>

<div>Name of organization</div> <div>MUSICAL INSTRUMENT MUSEUM</div>	<div>Employer identification number</div> <div>16-1743588</div>
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Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	<div><input type="checkbox"/> 501(c)() (enter number) organization</div> <div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation</div> <div><input type="checkbox"/> 527 political organization</div>
Form 990-PF	<div><input checked="" type="checkbox"/> 501(c)(3) exempt private foundation</div> <div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation</div> <div><input type="checkbox"/> 501(c)(3) taxable private foundation</div>

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions

General Rule—

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II

Special Rules

- ☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ, that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990, or 990-EZ, that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990, or 990-EZ, that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc , purposes, but these contributions did not aggregate to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc , purpose Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc , contributions of \$5,000 or more during the year ▶ \$ _____

Caution. An Organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer “No” on Part IV, line 2 of its Form 990, or check the box on lin H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization MUSICAL INSTRUMENT MUSEUM	Employer identification number 16-1743588
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Part I

Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<div>_____</div>	See Additional Data Table <div>_____</div> <div>_____</div> <div>_____</div>	<div>\$ _____</div>	<div>Person <input type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>_____</div>	<div>_____</div> <div>_____</div> <div>_____</div>	<div>\$ _____</div>	<div>Person <input type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>_____</div>	<div>_____</div> <div>_____</div> <div>_____</div>	<div>\$ _____</div>	<div>Person <input type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>_____</div>	<div>_____</div> <div>_____</div> <div>_____</div>	<div>\$ _____</div>	<div>Person <input type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>_____</div>	<div>_____</div> <div>_____</div> <div>_____</div>	<div>\$ _____</div>	<div>Person <input type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>_____</div>	<div>_____</div> <div>_____</div> <div>_____</div>	<div>\$ _____</div>	<div>Person <input type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>_____</div>	<div>_____</div> <div>_____</div> <div>_____</div>	<div>\$ _____</div>	<div>Person <input type="checkbox"/></div> <div>Payroll <input type="checkbox"/></div> <div>Noncash <input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution)</div>

Name of organization MUSICAL INSTRUMENT MUSEUM	Employer identification number 16-1743588
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Part II

Noncash Property (see Instructions)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	See Additional Data Table	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____		\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____		\$ _____	_____

Name of organization MUSICAL INSTRUMENT MUSEUM	Employer identification number 16-1743588
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Part III

Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. (Complete columns (a) through (e) and the following line entry)
For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc , contributions of **\$1,000 or less** for the year (Enter this information once See instructions) ► \$

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
—	<div>(e) Transfer of gift</div>		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	<div></div>	<div></div>	
	<div></div>	<div></div>	
—	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
—	<div>(e) Transfer of gift</div>		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	<div></div>	<div></div>	
	<div></div>	<div></div>	
—	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
—	<div>(e) Transfer of gift</div>		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	<div></div>	<div></div>	
	<div></div>	<div></div>	
—	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
—	<div>(e) Transfer of gift</div>		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	<div></div>	<div></div>	
	<div></div>	<div></div>	

Additional Data

Software ID:

Software Version:

EIN: 16-1743588

Name: MUSICAL INSTRUMENT MUSEUM

Form 990 Schedule B, Part 1 - Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<div>1</div>	<div>3M CORPORATION</div> <div>3M CORPORATE HEADQUARTERS 3M CENTER</div> <div>ST PAUL, MN 55144</div>	<div>\$ 59,001</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div></div><div></div><div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>2</div>	<div>ARCH H RAMBEAU</div> <div>42171 NORTH SAGUARO FOREST DRIVE</div> <div>SCOTTSDALE, AZ 85262</div>	<div>\$ 6,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div></div><div></div><div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>3</div>	<div>ARIZONA COMMISSION ON THE ARTS</div> <div>417 WEST ROOSEVELT STREET</div> <div>PHOENIX, AZ 85003</div>	<div>\$ 5,500</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div></div><div></div><div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>4</div>	<div>ARIZONA COMMUNITY FOUNDATION</div> <div>2201 EAST CAMELBACK ROAD SUITE 202</div> <div>PHOENIX, AZ 85016</div>	<div>\$ 35,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div></div><div></div><div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>5</div>	<div>BANK OF AMERICA</div> <div>201 EAST WASHINGTON STREET</div> <div>PHOENIX, AZ 85004</div>	<div>\$ 50,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div></div><div></div><div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>6</div>	<div>BARBARA J LAMBESIS</div> <div>2333 EAST MISSOURI AVENUE</div> <div>PHOENIX, AZ 85016</div>	<div>\$ 5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div></div><div></div><div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>7</div>	<div>BART BUTZER</div> <div>PO BOX 557</div> <div>WAYZATA, MN 55391</div>	<div>\$ 20,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div></div><div></div><div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>8</div>	<div>BILL COOK</div> <div>4223 EAST HIGHLANDS DRIVE</div> <div>PARADISE VALLEY, AZ 85253</div>	<div>\$ 5,100</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div></div><div></div><div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<div>9</div>	<div>BRENDA BAAR</div> <div>1665 SOUTH LEXINGTON AVENUE</div> <div>MENDOTA HEIGHTS, MN 55118</div>	<div>\$5,500</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>10</div>	<div>CF MARTIN CO INC</div> <div>510 SYCAMORE STREET</div> <div>NAZARETH, PA 18064</div>	<div>\$7,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>11</div>	<div>CARETAKERS BUILDING MAINTENANCE LLC</div> <div>5730 SOUTH 32ND STREET</div> <div>PHOENIX, AZ 85040</div>	<div>\$5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>12</div>	<div>CHARLES DASCHBACH</div> <div>ST JOSEPHS HOSPITAL AND MEDICAL CEN</div> <div>PHOENIX, AZ 85013</div>	<div>\$5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>13</div>	<div>CHUNG CHUN LU</div> <div>ETHNIC ART CULTURE LTD</div> <div>TSUEN WAN, HONG KONG CH</div>	<div>\$5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>14</div>	<div>CITYNORTH</div> <div>5415 EAST HIGH STREET SUITE 410</div> <div>PHOENIX, AZ 85054</div>	<div>\$5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>15</div>	<div>CLIFF W SCHWEITZER</div> <div>7949 EAST SOLANO DRIVE</div> <div>SCOTTSDALE, AZ 85250</div>	<div>\$5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>16</div>	<div>COLE REAL ESTATE INVESTMENTS</div> <div>2555 EAST CAMELBACK ROAD SUITE 400</div> <div>PHOENIX, AZ 85016</div>	<div>\$13,300</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<div>17</div>	<div>COLLETTI-FISS LLC</div> <div>8423 EAST CHARTER OAK DRIVE</div> <div>SCOTTSDALE, AZ 85260</div>	<div>\$5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><input checked="" type="checkbox"/></div> <div><input type="checkbox"/></div> <div><input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>18</div>	<div>DARIN NARAYANA</div> <div>15303 DALLAS PARKWAY</div> <div>ADDISON, TX 75001</div>	<div>\$10,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><input checked="" type="checkbox"/></div> <div><input type="checkbox"/></div> <div><input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>19</div>	<div>DAVID YACCINO</div> <div>71 SOUTH WACKER DRIVE SUITE 500</div> <div>CHICAGO, IL 60606</div>	<div>\$16,480</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><input checked="" type="checkbox"/></div> <div><input type="checkbox"/></div> <div><input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>20</div>	<div>DELTA DIVERSIFIED ENTERPRISES INC</div> <div>425 WEST GEMINI DRIVE</div> <div>TEMPE, AZ 85283</div>	<div>\$5,500</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><input checked="" type="checkbox"/></div> <div><input type="checkbox"/></div> <div><input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>21</div>	<div>DONALD WATLAND</div> <div>23051 NORTH 87TH DRIVE</div> <div>PEORIA, AZ 85383</div>	<div>\$5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><input checked="" type="checkbox"/></div> <div><input type="checkbox"/></div> <div><input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>22</div>	<div>FAR NIENTE</div> <div>PO BOX 327</div> <div>OAKVILLE, CA 94562</div>	<div>\$6,462</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><input type="checkbox"/></div> <div><input type="checkbox"/></div> <div><input checked="" type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>23</div>	<div>FENDER MUSICAL INSTRUMENTS CORPORAT</div> <div>8860 EAST CHAPARRAL ROAD SUITE 100</div> <div>SCOTTSDALE, AZ 85250</div>	<div>\$33,240</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><input type="checkbox"/></div> <div><input type="checkbox"/></div> <div><input checked="" type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>24</div>	<div>GAIL DORN</div> <div>84 SOUTH 10TH STREET SUITE 450</div> <div>MINNEAPOLIS, MN 55403</div>	<div>\$250,460</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><input checked="" type="checkbox"/></div> <div><input type="checkbox"/></div> <div><input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution)</div>

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<div>25</div>	<div>GARY L BRUCE</div> <div>8340 NORTH THORNYDALE ROAD APT 110-</div> <div>TUCSON, AZ 85741</div>	<div>\$ 5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><input checked="" type="checkbox"/></div> <div><input type="checkbox"/></div> <div><input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>26</div>	<div>GARY PETERSON</div> <div>10040 EAST HAPPY VALLEY ROAD APT 37</div> <div>SCOTTSDALE, AZ 85255</div>	<div>\$ 5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><input type="checkbox"/></div> <div><input type="checkbox"/></div> <div><input checked="" type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>27</div>	<div>GAY F WRAY</div> <div>PO BOX 1525</div> <div>PENNINGTON, NJ 085340686</div>	<div>\$ 5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><input checked="" type="checkbox"/></div> <div><input type="checkbox"/></div> <div><input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>28</div>	<div>GENETEC</div> <div>2280 ALFRED-NOBEL BOULEVARD</div> <div>SAINT-LAURENT, QUEBEC H4S 2A4 CA</div>	<div>\$ 59,840</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><input type="checkbox"/></div> <div><input type="checkbox"/></div> <div><input checked="" type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>29</div>	<div>GIBSON FOUNDATION INC</div> <div>309 PLUS PARK BOULEVARD</div> <div>NASHVILLE, TN 37217</div>	<div>\$ 5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><input checked="" type="checkbox"/></div> <div><input type="checkbox"/></div> <div><input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>30</div>	<div>GOLDMAN SACHS PHILANTHROPY FUND</div> <div>PO BOX 15203</div> <div>ALBANY, NY 122125203</div>	<div>\$ 1,700,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><input checked="" type="checkbox"/></div> <div><input type="checkbox"/></div> <div><input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>31</div>	<div>GOLDMAN SACHS CO</div> <div>85 BROAD STREET</div> <div>NEW YORK, NY 10004</div>	<div>\$ 5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><input checked="" type="checkbox"/></div> <div><input type="checkbox"/></div> <div><input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>32</div>	<div>GREGORY DUPPLER</div> <div>12515 48TH AVENUE NORTH</div> <div>PLYMOUTH, MN 55442</div>	<div>\$ 5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><input checked="" type="checkbox"/></div> <div><input type="checkbox"/></div> <div><input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution)</div>

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<div>33</div>	<div>HOWARD R JOY M BERLIN FOUNDATION</div> <div>PO BOX 3731</div> <div>CAREFREE, AZ 85337</div>	<div>\$5,345</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>34</div>	<div>J DOUGLAS CUSICK</div> <div>4601 COLLEGE BLVD SUITE 222</div> <div>LEAWOOD, KS 66211</div>	<div>\$5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>35</div>	<div>J HYATT BROWN</div> <div>213 RIVERSIDE DRIVE</div> <div>ORMOND BEACH, FL 32176</div>	<div>\$5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>36</div>	<div>JAMES A PUPILLO</div> <div>6710 NORTH SCOTTSDALE ROAD APT 250</div> <div>SCOTTSDALE, AZ 85253</div>	<div>\$5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>37</div>	<div>JAMES F LOWMAN</div> <div>8720 EAST SAN VICTOR DRIVE</div> <div>SCOTTSDALE, AZ 852581905</div>	<div>\$5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>38</div>	<div>JAMES J MEENAGHAN</div> <div>6200 NORTH 61ST PLACE</div> <div>PARADISE VALLEY, AZ 85253</div>	<div>\$10,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>39</div>	<div>JAWA</div> <div>15111 NORTH PIMA ROAD SUITE 200</div> <div>SCOTTSDALE, AZ 85260</div>	<div>\$5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>40</div>	<div>JEANNE HERBERGER</div> <div>10881 NORTH SCOTTSDALE ROAD SUITE 2</div> <div>SCOTTSDALE, AZ 85254</div>	<div>\$25,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<div>41</div>	<div>JEFFREY T GERLINGER</div> <div>8050 EAST THERESA DRIVE</div> <div>SCOTTSDALE, AZ 85255</div>	<div>\$10,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>42</div>	<div>JEWISH COMMUNITY FOUNDATIONMILWAUKE</div> <div>1360 NORTH PROSPECT AVENUE</div> <div>MILWAUKEE, WI 532023094</div>	<div>\$5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>43</div>	<div>JOHN JOAN D'ADDARIO FOUNDATION</div> <div>595 SMITH STREET PO BOX 290</div> <div>FARMINGDALE, NY 11735</div>	<div>\$11,600</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>44</div>	<div>JOHN GUILD</div> <div>33052 NORTH 71ST STREET</div> <div>SCOTTSDALE, AZ 85266</div>	<div>\$5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>45</div>	<div>JOSEPH R MASLICK</div> <div>9361 EAST SKYLINE DRIVE</div> <div>SCOTTSDALE, AZ 85262</div>	<div>\$5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>46</div>	<div>JUDITH G WOLF</div> <div>5741 NORTH ECHO CANYON CIRCLE</div> <div>PHOENIX, AZ 85018</div>	<div>\$5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>47</div>	<div>JW MARRIOTT DESERT RIDGE RESORT SPA</div> <div>5350 EAST MARRIOTT DRIVE</div> <div>PHOENIX, AZ 85054</div>	<div>\$50,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>48</div>	<div>KAY ERCIUS</div> <div>11695 EAST BLOOMFIELD DRIVE</div> <div>SCOTTSDALE, AZ 85259</div>	<div>\$5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<div>49</div>	<div>KENNETH KASSES</div> <div>10763 EAST PROSPECT POINT DRIVE</div> <div>SCOTTSDALE, AZ 85262</div>	<div>\$5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>50</div>	<div>KRISTINA RENSHAW</div> <div>2356 EAST CHERYL DRIVE</div> <div>PHOENIX, AZ 85028</div>	<div>\$5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>51</div>	<div>LAWRENCE J SHAPIRO</div> <div>1600 EAST NORTHERN</div> <div>PHOENIX, AZ 85020</div>	<div>\$5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>52</div>	<div>MARY SAUSER</div> <div>39794 NORTH 106TH PLACE</div> <div>SCOTTSDALE, AZ 85262</div>	<div>\$25,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>53</div>	<div>MATTHEW P FEENEY</div> <div>400 EAST VAN BUREN STREET SUITE 190</div> <div>PHOENIX, AZ 850042509</div>	<div>\$25,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>54</div>	<div>MICHAEL W TOMME</div> <div>4725 EAST MAYO BLVD</div> <div>PHOENIX, AZ 85050</div>	<div>\$5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>55</div>	<div>MINNIE AND BERNARD LANE FOUNDATION</div> <div>PO BOX 359</div> <div>ALTAVISTA, VA 24517</div>	<div>\$5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>56</div>	<div>MOE S NOZARI</div> <div>ONE OVERHILL DRIVE</div> <div>SAINT PAUL, MN 551272619</div>	<div>\$10,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<div>57</div>	<div>NATIONAL BANK OF ARIZONA</div> <div>6001 NORTH 24TH STREET</div> <div>PHOENIX, AZ 85016</div>	<div>\$5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>58</div>	<div>PAUL W KELLEY</div> <div>14 WATERS EDGE</div> <div>EAST FALMOUTH, MA 02536</div>	<div>\$5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>59</div>	<div>PAULA CORMAN</div> <div>9694 EAST IRONWOOD DRIVE</div> <div>SCOTTSDALE, AZ 85258</div>	<div>\$5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>60</div>	<div>PHOENIX COYOTES</div> <div>6751 NORTH SUNSET BOULEVARD SUITE 2</div> <div>GLENDALE, AZ 85035</div>	<div>\$5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>61</div>	<div>RANDALL SCHNEEWIND</div> <div>118 PEAVEY CIRCLE</div> <div>CHASKA, MN 55318</div>	<div>\$15,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>62</div>	<div>RANE CORPORATION</div> <div>10802 47TH AVENUE WEST</div> <div>MUKILTEO, WA 98275</div>	<div>\$5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>63</div>	<div>REMO INC</div> <div>28101 INDUSTRY DRIVE</div> <div>VALENCIA, CA 91355</div>	<div>\$5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>64</div>	<div>RICHARD VARDA</div> <div>15268 FISH POINT ROAD</div> <div>PRIOR LAKE, MN 55372</div>	<div>\$5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<div>65</div>	<div>ROBERT B BULLA</div> <div>8325 EAST WHISPERING WIND DRIVE</div> <div>SCOTTSDALE, AZ 85255</div>	<div>\$5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>66</div>	<div>ROBERT GREENBERG</div> <div>1005 MOUNT CURVE AVENUE</div> <div>MINNEAPOLIS, MN 55403</div>	<div>\$10,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>67</div>	<div>ROBERT J ULRICH</div> <div>84 SOUTH 10TH STREET SUITE 450</div> <div>MINNEAPOLIS, MN 55403</div>	<div>\$60,315,230</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>68</div>	<div>ROBERT SEATON</div> <div>10858 EAST SALERO DRIVE</div> <div>SCOTTSDALE, AZ 85262</div>	<div>\$5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>69</div>	<div>RON LINDA JONES FAMILY FOUNDATION</div> <div>20701 NORTH SCOTTSDALE ROAD SUITE 1</div> <div>SCOTTSDALE, AZ 85255</div>	<div>\$25,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>70</div>	<div>RUSSELL S GOLDSTEIN</div> <div>201 EAST WASHINGTON ST 23RD FLOOR</div> <div>PHOENIX, AZ 85004</div>	<div>\$5,230</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>71</div>	<div>SANDERSON FORD</div> <div>6400 NORTH 51ST AVENUE</div> <div>GLENDALE, AZ 85301</div>	<div>\$10,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>72</div>	<div>SCHWAB CHARITABLE FUND</div> <div>211 MAIN STREET</div> <div>SAN FRANCISCO, CA 94105</div>	<div>\$5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<div>73</div>	<div>SCOTTSDALE LEAGUE FOR THE ARTS</div> <div>7309 EAST EVANS</div> <div>SCOTTSDALE, AZ 85260</div>	<div>\$5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><input checked="" type="checkbox"/></div> <div><input type="checkbox"/></div> <div><input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>74</div>	<div>SENNHEISER ELECTRONIC CORPORATION</div> <div>ONE ENTERPRISE DRIVE</div> <div>OLD LYME, CT 06371</div>	<div>\$152,759</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><input type="checkbox"/></div> <div><input type="checkbox"/></div> <div><input checked="" type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>75</div>	<div>SEYMOUR DUNCAN</div> <div>5427 HOLLISTER AVENUE</div> <div>SANTA BARBARA, CA 93111</div>	<div>\$5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><input checked="" type="checkbox"/></div> <div><input type="checkbox"/></div> <div><input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>76</div>	<div>SKULLCANDY</div> <div>1441 WEST UTE BOULEVARD SUITE 250</div> <div>PARK CITY, UT 84098</div>	<div>\$29,850</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><input type="checkbox"/></div> <div><input type="checkbox"/></div> <div><input checked="" type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>77</div>	<div>STUART D BUCK</div> <div>71 SOUTH WACKER DRIVE SUITE 500</div> <div>CHICAGO, IL 60606</div>	<div>\$12,486</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><input checked="" type="checkbox"/></div> <div><input type="checkbox"/></div> <div><input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>78</div>	<div>SUSAN A WILLETTS</div> <div>71 SOUTH WACKER DRIVE SUITE 500</div> <div>CHICAGO, IL 60606</div>	<div>\$5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><input checked="" type="checkbox"/></div> <div><input type="checkbox"/></div> <div><input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>79</div>	<div>SUSAN PETERSON</div> <div>84 SOUTH 10TH STREET SUITE 450</div> <div>MINNEAPOLIS, MN 55403</div>	<div>\$5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><input checked="" type="checkbox"/></div> <div><input type="checkbox"/></div> <div><input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>80</div>	<div>TARGET CORPORATION</div> <div>50 SOUTH 10TH STREET TP3-750</div> <div>MINNEAPOLIS, MN 55403</div>	<div>\$886,249</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><input checked="" type="checkbox"/></div> <div><input type="checkbox"/></div> <div><input type="checkbox"/></div> <div>(Complete Part II if there is a noncash contribution)</div>

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<div>81</div>	<div>TAYLOR GUITARS</div> <div>1980 GILLESPIE WAY</div> <div>EL CAJON, CA 920201096</div>	<div>\$5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>82</div>	<div>THE ROBERTA STAN MARKS CHARITABLE F</div> <div>3800 EMBASSY PARKWAY SUITE 300</div> <div>AKRON, OH 443338332</div>	<div>\$5,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>83</div>	<div>THE THOMAS R AND DEBORAH A DAVIDSON</div> <div>75-1027 HENRY STREET APRT 11 A</div> <div>KAILUA KONA, HI 96740</div>	<div>\$10,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>84</div>	<div>TIMOTHY BYERS</div> <div>84 SOUTH 10TH STREET SUITE 450</div> <div>MINNEAPOLIS, MN 55403</div>	<div>\$10,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>85</div>	<div>UTA M BEHRENS</div> <div>4019 EAST CAMPBELL AVENUE</div> <div>PHOENIX, AZ 85018</div>	<div>\$10,050</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>86</div>	<div>WATKINS INCORPORATED</div> <div>150 LIBERTY STREET BOX 5570</div> <div>WINONA, MN 559870570</div>	<div>\$100,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>87</div>	<div>WILLIAM SCHERR</div> <div>71 SOUTH WACKER DRIVE SUITE 500</div> <div>CHICAGO, IL 60606</div>	<div>\$10,000</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>
<div>88</div>	<div>YAMAHA CORPORATION OF AMERICA</div> <div>6600 ORANGETHORPE AVENUE</div> <div>BUENA PARK, CA 90620</div>	<div>\$14,617</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div><div><div></div></div><div><div></div></div><div><div></div></div></div> <div>(Complete Part II if there is a noncash contribution)</div>

Form 990 Schedule B, Part II - Noncash Property (see instructions):

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u>1</u>	3M PRODUCTS	\$ <u>59,001</u>	<u>2010-05-20</u>
<u>3</u>	FOUR AED UNITS	\$ <u>5,500</u>	<u>2010-03-22</u>
<u>10</u>	10 WHITE LXM LITTLE MARTIN GUITARS	\$ <u>7,000</u>	<u>2010-05-19</u>
<u>22</u>	WINE FOR JOSHUA BELL EVENT	\$ <u>6,462</u>	<u>2010-11-26</u>
<u>23</u>	ELECTRIC GUITARS, BASS GUITARS, AMPS	\$ <u>33,240</u>	<u>2010-03-19</u>
<u>26</u>	1,667 SHARES OF MEDPRO STOCK	\$ <u>5,000</u>	<u>2010-06-07</u>
<u>28</u>	CCTV SECURITY SOFTWARE	\$ <u>59,840</u>	<u>2010-05-28</u>
<u>74</u>	MICROPHONE PACKAGE, ASSISTANCE WITH EXHIBIT	\$ <u>152,759</u>	<u>2010-03-25</u>
<u>76</u>	3,000 SETS OF "GRID" MODEL HEADPHONES	\$ <u>29,850</u>	<u>2010-03-19</u>
<u>88</u>	DRUM KIT	\$ <u>14,617</u>	<u>2010-04-15</u>

Additional Data

Software ID:
Software Version:
EIN: 16-1743588
Name: MUSICAL INSTRUMENT MUSEUM

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
ROBERT J ULRICH	CHAIRMAN 30 00	0	0	0
84 SOUTH TENTH ST 450 MINNEAPOLIS, MN 55403				
MICHAEL R FRANCIS	VICE PRESIDENT & SECRETARY 2 00	0	0	0
84 SOUTH TENTH ST 450 MINNEAPOLIS, MN 55403				
GAIL DORN	TREASURER 4 00	0	0	0
84 SOUTH TENTH ST 450 MINNEAPOLIS, MN 55403				
ROBERT G MCMAHON	BOARD MEMBER 1 00	0	0	0
84 SOUTH TENTH ST 450 MINNEAPOLIS, MN 55403				
MARC LEO FELIX	BOARD MEMBER 1 00	0	0	0
84 SOUTH TENTH ST 450 MINNEAPOLIS, MN 55403				
GARY TOBEY	BOARD MEMBER 1 00	0	0	0
84 SOUTH TENTH ST 450 MINNEAPOLIS, MN 55403				
BILLIE R DEWALT	PRESIDENT & DIRECTOR 40 00	350,000	31,392	0
84 SOUTH TENTH ST 450 MINNEAPOLIS, MN 55403				

TY 2010 Accounting Fees Schedule

Name: MUSICAL INSTRUMENT MUSEUM

EIN: 16-1743588

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	41,628	0	0	41,628

**TY 2010 Investments Corporate
Bonds Schedule**

Name: MUSICAL INSTRUMENT MUSEUM
EIN: 16-1743588

Name of Bond	End of Year Book Value	End of Year Fair Market Value
DEBT SECURITIES	2,879,130	2,879,130

**TY 2010 Investments Corporate
Stock Schedule**

Name: MUSICAL INSTRUMENT MUSEUM
EIN: 16-1743588

Name of Stock	End of Year Book Value	End of Year Fair Market Value
EQUITY SECURITIES	20,500	20,500

TY 2010 Investments - Other Schedule

Name: MUSICAL INSTRUMENT MUSEUM

EIN: 16-1743588

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
CASH AND CASH EQUIVALENTS	FMV	881,334	881,334
ACCRUED INTEREST	FMV	5,000	5,000

TY 2010 Land, Etc. Schedule**Name:** MUSICAL INSTRUMENT MUSEUM**EIN:** 16-1743588

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
LAND	14,586,850	0	14,586,850	14,586,850
FURNITURE & EQUIPMENT	6,353,958	867,601	5,486,357	5,486,357
LEASEHOLD IMPROVEMENT	149,458	127,589	21,869	21,869
SOFTWARE	391,338	92,310	299,028	299,028
VEHICLES	33,334	14,440	18,894	18,894
CONSTRUCTION IN PROGRESS	515,025	0	515,025	515,025
BUILDING	99,596,355	3,602,847	95,993,508	95,993,508

TY 2010 Legal Fees Schedule

Name: MUSICAL INSTRUMENT MUSEUM

EIN: 16-1743588

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	36,085	0	0	36,085

TY 2010 Other Assets Schedule**Name:** MUSICAL INSTRUMENT MUSEUM**EIN:** 16-1743588

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
ESCROW ACCOUNTS	119,568	0	0
EXCISE TAX ASSET	15,259	3,717	3,717
SECURITY DEPOSIT RECEIVABLE	160,677	143,281	143,281
OTHER ASSETS	0	390,078	390,078

TY 2010 Other Expenses Schedule

Name: MUSICAL INSTRUMENT MUSEUM

EIN: 16-1743588

Description	Revenue and Expenses per Books	Net Invest ment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TELEPHONE	94,828	0	0	94,828
POSTAGE/SHIPPING	519,275	0	0	519,275
PRINTING	293,905	0	0	293,905
ADVERTISING/MARKETING	523,889	0	0	510,387
SPECIAL EVENTS	55,521	0	0	55,521
SUPPLIES	1,532,430	0	0	1,225,480
REPAIRS AND MAINTENANCE	62,365	0	0	62,365
EQUIPMENT RENTAL	43,087	0	0	43,087
INSURANCE	108,450	0	0	254,768
MISCELLANEOUS	152,817	0	0	117,403
MUSICAL INSTRUMENT PURCHASES	1,043,867	0	0	989,010
DUES AND SUBSCRIPTIONS	40,425	0	0	40,425
EDUCATION AND TRAINING	15,854	0	0	15,854
INSTRUMENT LOAN EXPENSE	3,548	0	0	3,548

TY 2010 Other Income Schedule

Name: MUSICAL INSTRUMENT MUSEUM

EIN: 16-1743588

Description	Revenue And Expenses Per Books	Net Invest ment Income	Adjusted Net Income
MUSEUM ADMISSION	1,153,528		1,153,528
MUSIC THEATER	443,822		443,822
FOOD SERVICE	4,035		4,035
OTHER PROGRAM REVENUE	20,370		20,370

TY 2010 Other Liabilities Schedule

Name: MUSICAL INSTRUMENT MUSEUM

EIN: 16-1743588

Description	Beginning of Year - Book Value	End of Year - Book Value
CUSTOMER AND EVENT DEPOSITS	0	36,860
OTHER LIABILITIES	0	39,520

TY 2010 Other Professional Fees Schedule

Name: MUSICAL INSTRUMENT MUSEUM

EIN: 16-1743588

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OTHER PROFESSIONAL SERVICE	3,921,137	0	0	3,921,137

TY 2010 Taxes Schedule**Name:** MUSICAL INSTRUMENT MUSEUM**EIN:** 16-1743588

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAX	1,143	0	0	0
PAYROLL TAX	320,807	0	0	320,807