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DLN: 93493077003254

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)

2012

OMB No 1545-0047

Open to Public Inspection

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

		2012 cal pplicable	endar year, or tax year beginning 07-01-2012 , 2012, and ending 06-30 C Name of organization	-2013	D Emplo	yer iden	tification number
	ress ch		International Academy of Fine Art		41-19	942190	
┌ Nar	ne cha	nge	Doing Business As				
┌ Inıt	ıal retu	m	Number and street (or P O box if mail is not delivered to street address) Room/suit	e	E Telepho	one numb	per
Ter	minated	d	PO Box 1832 Suite			387-0	
Г Am	ended	return	City or town, state or country, and ZIP + 4 New Haven, CT 065081832		(200)		
App	lication	n pending	· · · · · · · · · · · · · · · · · · ·		G Gross r	eceıpts \$	2,634,145
			F Name and address of principal officer SUSAN TINTORI		his a group iates?	return	for ┌ Yes ┌ No
			VIA DELLE CASINE 21R	aiiii	iates		j řesj e No
			FLORENCE 50122				led? Tyes No
Ta:	x-exem	npt status	✓ 501(c)(3)	If"I	No," attach	ıalıst (see instructions)
y W	ebsite	e:► htt	p //www florenceacademyofart com	H(c) Gro	oup exempt	ion num	nber ►
K Forr	n of org	ganızatıon	Corporation Trust Association Other	L Year of	formation 19	991 M 9	State of legal domicile CT
Pa	rt I	Sum	nmary	•		•	
ance	1	To provi	escribe the organization's mission or most significant activities de the highest level of instruction in classical methods of drawing, painti as professional artists in the realist tradition	ng and scu	lpture for s	tudents	wishing to pursue
Governance	2 (Check tl	his box 📭 if the organization discontinued its operations or disposed of	more than	25% of its	net ass	sets
	з г	Number	of voting members of the governing body (Part VI, line 1a) \dots			3	22
Activities &	l		of independent voting members of the governing body (Part VI, line 1b)			4	20
Ę	l		mber of individuals employed in calendar year 2012 (Part V, line 2a) .		5	10	
q.	l		mber of volunteers (estimate if necessary) related business revenue from Part VIII, column (C), line 12			6 7a	0
			elated business taxable income from Form 990-T, line 34			7a 7b	
			•		ior Year		Current Year
	8	Contri	ibutions and grants (Part VIII, line 1h)		142,	671	197,752
Revenue	9	Progra	am service revenue (Part VIII, line 2g)		2,037,		2,354,405
35A6	10		tment income (Part VIII, column (A), lines 3, 4, and 7d)			151	4,189
_	11 12		revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		-21,	309	4,533
	12		· · · · · · · · · · · · · · · · · · ·		2,162,	113	2,560,879
	13		s and similar amounts paid (Part IX, column (A), lines 1–3)		196,		164,326
	14		its paid to or for members (Part IX, column (A), line 4)			0	0
\$	15	5-10)	es, other compensation, employee benefits (Part IX, column (A), lines)		893,	340	993,693
Expenses	16a	Profes	ssional fundraising fees (Part IX, column (A), line 11e)			0	0
ਡੌ	ь	Total fu	ındraısıng expenses (Part IX, column (D), line 25) ▶0				
	17		expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,044,		1,285,816
	18 19		expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		2,134,		2,443,835
C GS	19	reven	nue less expenses Subtract line 18 from line 12	Beginni	ng of Curre Year	026 nt	117,044 End of Year
Net Assets or Fund Balances	20	Total	assets (Part X, line 16)		1,077,	225	1,193,660
8 A B	21		liabilities (Part X, line 26)		599,		617,107
žĒ	22	Netas	ssets or fund balances Subtract line 21 from line 20		478,	220	576,553
Unde my kr	rer ha	alties of dge and as any k	ature of officer	an officer) i			
	_		n tintori executive director				
			e or print name and title				
		, F	Print/Type preparer's name Preparer's signature Da	ا کا	heck if	PTIN	

Firm's address ► 1 SPRING STREET

NEW BRUNSWICK, NJ 08901

May the IRS discuss this return with the preparer shown above? (see instructions)

Use Only

Phone no (732) 828-1614

✓ Yes ☐ No

Part IV Checklist of Required Schedule
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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV^{\square}	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	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	11b		No
c	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	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	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 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 🥵	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	Yes	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
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		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
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		No
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		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	ı	1	
		28a		No
D	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line $2 \cdot \cdot \cdot$.	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	20	Yes	

аI	Statements Regarding Other 1R5 Fillings and Tax Compliance			г
	Check if Schedule O contains a response to any question in this Part V		Yes	No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 0		103	110
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
•	gaming (gambling) winnings to prize winners?	1 c	Yes	
	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			
•	by this return	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		N
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
1	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
)	If "Yes," enter the name of the foreign country 🏴 IT			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
)	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	 E		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	5c 6a		No
1	organization nave annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions?	oa		IN
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		NI.
	services provided to the payor?	/a		N
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		N
	If "Yes," indicate the number of Forms 8282 filed during the year	•		
:	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a			
	Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		1	
	Sponsoring organizations maintaining donor advised funds.	8		
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make any taxable distributions under section 4966 /	9a 9b		
	Section 501(c)(7) organizations. Enter	90		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	 		
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
)	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
ı	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
ı	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes " has it filed a Form 720 to report these payments? If "No" provide an explanation in Schedule O	14h		

Form 990 (2012) Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		Νo
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Νo
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13		Νo
14	Did the organization have a written document retention and destruction policy?	14		Νo
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			n
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 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 with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed ►CT , NY
- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
 - Own website Another's website Upon request Other (explain in Schedule O)
- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►THE ACADEMY VIA DELLE CASINE 21RFLORENCEIT50122 (203) 387-0852

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- 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, if any See instructions for definition of "key employee"
- ♦ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage	Pos	ition	(C)		chec	k	(D) Reportable	(E) Reportable	(F) Estimated
	hours per week (list any hours	more pers	than on is	one bot	box h ar or/tr	c, unle offic ustee	ess er e)	compensation from the organization	compensation from related organizations	amount of other compensation
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
(1) David Spencer Chairperson	3 0	x		х				0	0	0
(2) Daniel Graves	40 0									
President		Х		Х		L		87,633	0	0
(3) Allan Devore Treasurer	3 0	х		х				0	0	0
(4) Christine Emmons	3 0									
Secretary		X		Х				0	0	0
(5) Susan Tintori	40 0	х		х				84,255	0	0
Executive Director (6) George C White	3 0									
Founding Chairperson		X						0	0	0
(7) Annette DeVore	3 0	х						0	0	0
(8) Robert Emmons	3 0	×						0	0	0
Director (9) Ankı Eriksson Graves	2.0						_			_
	3 0	х						0	0	0
Director (10) Jamen Graves	3 0									
Director		X						0	0	0
(11) Gregory Hedberg	3 0	 							_	_
Director		X		L		L		0	0	0
(12) Margaret Hedberg	3 0	х						0	0	0
Director		<u> </u>								
(13) Dr Kenneth Koster	3 0	x						О	0	0
Director (14) Gregory Nersesyan	3 0			_	\vdash					
Director	30	х						0	0	0
(15) Julie Spahr	3 0	X						0	0	0
Director		<u> </u>							0	
(16) Keith Summerour	3 0	x						О	0	0
Director (17) Beth Webb	3 0					_				
	3 0	х						О	0	0
Director										Form 990 (2012)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	Name and Title A verage hours per week (list any hours A verage hours per week (list any hours A verage hours per week (list any hours and a director/trustee) A verage hours per wind the from the from related organization organization (NV 2 (1000))							Reportable compensation from related organizations	(F) Estimated amount of oth compensation from the organization		
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organiz and re organiz	lated
		<u>α</u> ,	្សា សូមម			l sateo					
(18) Betsy White	3 0										
Director		X						0	C)	0
(19) Nelson White	3 0							0	C		
Director		X						0	(<u>'</u>	0
(20) David Thompson	3 0	x						0	C		0
Director								· ·			
(21) Pamela Thompson	3 0	x						0	0		0
Director								Ů			
(22) Lesley Koster	3 0	×						0	C		
Director											
1b Sub-Total						F					
c Total from continuation sheets to Part	VII, Section A					▶□					
d Total (add lines 1b and 1c)						•		171,888	0		0
2 Total number of individuals (including b				ed al	bove	e) who	rec	eived more than			
\$100,000 of reportable compensation	from the organiz	zation	- 0								
										Yes	No
3 Did the organization list any former offi	cer, director or	truste	e, key	y em	nplo	yee, o	r hıç	ghest compensate	d employee		
on line 1a? <i>If "Yes," complete Schedule 3</i>	for such individ	lual .	•		•				3		No
	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such										No
5 Did any person listed on line 1a receive	or accruo com	nancat	ion f	rom	anı.	- unrol	- ator	d organization or :	odividual for		No
services rendered to the organization?									5		No
Section B. Independent Contracto	ors										
Complete this table for your five highes compensation from the organization. Re	t compensated										
	(A) usiness address					•			(B) on of services	(C Comper)
									-		·
 Total number of independent contractors 	(including but)	nat lim	1+ad+	-a +h		lictor	1 2 6	ova) who received	more than	1	

100,000 of compensation from the organization -0

Part V	444	Statement of Revenue					
		Check if Schedule O contains a respo	nse to any question I	IN this Part VIII .	(B)	 (C)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512,513,or 514
(0	1a	Federated campaigns 1a					311
ants	ь	Membership dues 1b					
Gra mo	С	Fundraising events 10					
fts, ir A	d	Related organizations 1d					
, Gi nila	e	Government grants (contributions) 1e					
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, grants, and 1f					
buti the		similar amounts not included above Noncash contributions included in lines					
intri d O	g	1a-1f \$	44,645				
Cont	h	Total. Add lines 1a-1f		197,752			
an		T. 1770.	Business Code				
wen	2a	TUITION AND FEES	611600	2,354,405	2,354,405		
95. 154.	b c						
rwc	d						
Program Serwice Revenue	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		2,354,405			
	3	Investment income (including dividen	ds, interest,	1,598			1,598
	4	and other similar amounts) Income from investment of tax-exempt bond	F	0			1,330
	5	Royalties		0			
		(ı) Real	(II) Personal				
	6a	Gross rents					
	b	Less rental expenses					
	С	Rental income 0 or (loss)	0				
	d	Net rental income or (loss)		0			
	7a	(1) Securities Gross amount	(II) Other				
	/a	from sales of 75,857 assets other than inventory					
	b	Less cost or other basis and 73,266					
	c	sales expenses Gain or (loss) 2,591					
	d	Net gain or (loss)		2,591			
e	8a	Gross income from fundraising events (not including					
Other Revenue		\$ of contributions reported on line 1c) See Part IV, line 18					
er l		a					
ફ	С	Less direct expenses b Net income or (loss) from fundraising		0			
_		Gross income from gaming activities See Part IV, line 19					
		a					
	b c	Less direct expenses b Net income or (loss) from gaming acti		0			
		Gross sales of inventory, less		, and the second			
		returns and allowances .					
	ь	Less cost of goods sold b					
		Net income or (loss) from sales of inv	entory	0			
		Miscellaneous Revenue	Business Code				
	11a	OTHER	900099	4,533	4,533		
	Ь						
	c						
	d	All other revenue					
	e	Total. Add lines 11a-11d	•	4,533			
	12	Total revenue. See Instructions .	· · · · •	2,560,879	2,358,938		1,598

	550 (2012)				Page 10
	Statement of Functional Expenses on 501(c)(3) and 501(c)(4) organizations must complete all columns All	other organizat	ions must somn	loto column (A.)	
ectio					
D	Check if Schedule O contains a response to any question in this Pa		(B)	(c)	 (D)
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	0			
2	Grants and other assistance to individuals in the United States See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	164,326	164,326		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	171,888	87,633	84,255	C
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	633,789	525,400	108,389	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0			
9	Other employee benefits	21,406	17,347	4,059	
10	Payroll taxes	166,610	129,459	37,151	
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	33,991		33,991	
С	Accounting	65,914		65,914	
d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	213,088	196,013	17,075	
12	Advertising and promotion	62,442	130,013	62,442	
.3	Office expenses	9,145		9,145	
.4	Information technology	0		2,210	
.5	Royalties	0			
.6	Occupancy	642,864	626,738	16,126	
.7	Travel	30,173	020,730	30,173	
L8	Payments of travel or entertainment expenses for any federal, state, or local public officials	0		30,173	
L9	Conferences, conventions, and meetings	0			
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	36,656	36,656		
23	Insurance	11,770	11,770		
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	BOARD EXPENSE	12,820		12,820	
b	BANK FEES	34,867		34,867	
С	MISCELLANEOUS	27,976	24,674	3,302	
d	SCHOOL SUPPLIES	55,659	55,659		
е	All other expenses	48,451	46,488	1,963	
25	Total functional expenses. Add lines 1 through 24e	2,443,835	1,922,163	521,672	(
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Par	rt X	Balance Sheet Check if Schedule O contains a response to any question in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	771,227	1	807,775
	2	Savings and temporary cash investments	0	2	0
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	7,589	4	10,331
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			
	6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L	0	5	0
Assets		organizations (see instructions) Complete Fart II of Schedule L	اه	6	0
Š	7	Notes and loans receivable, net	0	7	
⋖	8	Inventories for sale or use	0	8	0
	9	Prepaid expenses and deferred charges	23,345	9	22,718
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 660,586	·	-	22,710
	Ь	Less accumulated depreciation	229,613	10c	326,844
	11	Investments—publicly traded securities	29,105	11	25,992
	12	Investments—other securities See Part IV, line 11	0	12	0
	13	Investments—program-related See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets See Part IV, line 11	16,346	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,077,225	16	1,193,660
	17	Accounts payable and accrued expenses	124,100		101,051
	18	Grants payable	0	18	0
	19	Deferred revenue	351,595	19	377,657
	20	Tax-exempt bond liabilities	0	20	0
_	21	Escrow or custodial account liability Complete Part IV of Schedule D	0	21	0
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
ар		persons Complete Part II of Schedule L	o	22	0
	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule	122 240	25	129 200
	26	D	123,310 599,005		138,399
	26	Total liabilities. Add lines 17 through 25	399,003	26	017,107
<u>Ş</u>		lines 27 through 29, and lines 33 and 34.			
Fund Balance	27	Unrestricted net assets	432,142		535,113
ä	28	Temporarily restricted net assets	46,078	28	41,440
핕	29	Permanently restricted net assets	0	29	0
r Fu		Organizations that do not follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 30 through 34.			
S O.	30	Capital stock or trust principal, or current funds		30	
ě.	31	Paid-in or capital surplus, or land, building or equipment fund		31	
Assets	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net /	33	Total net assets or fund balances	478,220	33	576,553
Ź	34	Total liabilities and net assets/fund balances	1,077,225	34	1,193,660
	1 -		.,5,220		.,.55,555

Pai	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				৮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2,5	560,879
2	Total expenses (must equal Part IX, column (A), line 25)	2		2,4	143,835
3	Revenue less expenses Subtract line 2 from line 1	3		1	.17,044
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			 178,220
5	Net unrealized gains (losses) on investments	5			,
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			-18,711
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		Ē	576,553
Par	t XII Financial Statements and Reporting	•			
	Check if Schedule O contains a response to any question in this Part XII				. \sqsubset
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	ved on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both	rate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	ı			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?)	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equire	3b		

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As Filed Data -

DLN: 93493077003254

Employer identification number

OMB No 1545-0047

SCHEDULE A (Form 990 or 990EZ)

Name of the organization

International Academy of Fine Art

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

									41-1942		
Pai				blic Charity Sta						ınstruction	s
The o	rganı			e foundation becaus			_				
1			-	on of churches, or a				section 170	(b)(1)(A)(i)	•	
2	굣	A scho	ol described	in section 170(b)(1	l)(A)(ii). (At	tach Sched	ule E)				
3		A hosp	ital or a coo	perative hospital se	rvice organiz	zatıon descr	ıbed ın secti	on 170(b)(:	1)(A)(iii).		
4	Г			n organization operat	ted ın conjun	ction with a	hospital des	scribed in s	ection 170(b)(1)(A)(iii).	Enter the
5	_	hospita	al's name, ci	ty, and state erated for the benefi	t of a college	or universi	ty owned or	operated by	/ a governme	ntal unit des	cribed in
3	,			A)(iv). (Complete P		: Of utiliversi	ty owned of	operated by	a governine	iitai uiiit des	cribed iii
6	_			local government or	•	tal unit dece	ribed in sec	tion 170(b)	(1)(4)(4)		
7	<u>'</u>			at normally receives	=					from the ge	neral nublic
8	' 	describ	ed in sectio	on 170(b)(1)(A)(vi). described in sectior	(Complete F	art II)		_	rental unit of	nom the ger	ierai public
9			-	at normally receives			-	-	ıbutıons, mei	mbership fee	s, and gross
receipts from activities related to its exempt functions—subject to certain exceptions								exceptions,	and (2) no n	nore than 33	1/3% of
				oss investment inco							
acquired by the organization after Jui					a 30, 1975 See section 509(a)(2). (Complete Part III)						
10	An organization organized and operated exclusively to test for public safety See section 509(a)(4).										
11	Γ	one or the box	more public that descr	ganized and operated ly supported organiz bes the type of supp b Type II c	ations descr orting organ	ibed in sect ization and	ion 509(a)(1 complete lin) or sectiones 11e thro	n 509(a)(2) ough 11h	See section	509(a)(3). Check
e	Γ	other t		ox, I certify that the on managers and ot							
f		If the c		received a written do	etermination	from the IR	S that it is a	Type I, Ty	pe II, or Typ	e III suppor	ting organization,
g		followir	ng persons?	2006, has the organi irectly or indirectly o					•	u.\	Yes No
				governing body of th	•		_	, persons a		_	g(i)
				er of a person descri		_					g(ii)
			•	lled entity of a perso	• •		above?				g(iii)
h				ng information about						<u></u> :	
(i) Nam suppor organiza		orted organization (de		(iii) Type of organization (described on lines 1-9 above or IRC section (see	anization organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) I: organiza col (i) or in the	ation in rganized	(vii) A mount of monetary support
				instructions))	Yes	No	Yes	No	Yes	No	7
Total											

Sch	edule A (Form 990 or 990-EZ) 2012							Page 2
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation faile	ed to q	
	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	ow, please com	iplete Pa	rt III.)	
	ection A. Public Support endar year (or fiscal year beginning					1		
	in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2	312	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not include any "unusual							
	grants ")							
2	Tax revenues levied for the							
	organization's benefit and either							
	paid to or expended on its behalf							
3	The value of services or facilities							
•	furnished by a governmental unit to							
	the organization without charge							
4	Total. Add lines 1 through 3							
5	The portion of total contributions by each person (other than a							
	governmental unit or publicly							
	supported organization) included on							
	line 1 that exceeds 2% of the							
	amount shown on line 11, column							
6	(f) Public support. Subtract line 5 from							
	line 4							
S	ection B. Total Support							
Cal	endar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 20)12	(f) Total
_	in) ► A mounts from line 4		. ,		. ,	, ,		. ,
7 8	Gross income from interest,							
0	dividends, payments received on							
	securities loans, rents, royalties							
	and income from similar							
9	sources Net income from unrelated							
9	business activities, whether or not							
	the business is regularly carried							
	on							
10	Other income Do not include gain or loss from the sale of capital							
	assets (Explain in Part IV)							
11	Total support (Add lines 7 through							
4.0	10)		<u> </u>					
12	Gross receipts from related activitie					12		
13	First five years. If the Form 990 is this box and stop here							ization, check
	ection C. Computation of Pub				<u> </u>	<u> </u>		
14	Public support percentage for 2012			11, column (f))		14		
15	Public support percentage for 2011			, , , , , , ,		15		
	33 1/3% support test—2012. If the o	· ·	•	on line 13 and l	ine 14 is 33 1/20%		chack ti	nie hov
104	and stop here. The organization qua				me 1 1 13 33 1/3/0	or more,	JIICCK CI	► □
b	33 1/3% support test—2011. If the				and line 15 is 33	3 1/3% or n	nore, ch	eck this
	box and stop here. The organization						. 4 4	▶□
1/a	10%-facts-and-circumstances test- is 10% or more, and if the organizat							•
	in Part IV how the organization mee							
	organization				4	r	,rF3	▶ □
b	10%-facts-and-circumstances test-							
	15 is 10% or more, and if the organ Explain in Part IV how the organizat							lv
	supported organization	ion meets the T	acts-ana-cncum:	stances test III	ic organization qu	uiiiiE5 45 i	a public	·y ▶□
18	Private foundation. If the organizat	on did not check	c a box on line 13	, 16a, 16b, 17a,	or 17b, check thi	s box and	see	·
	instructions							▶ ┌

Schedule A (Form 990 or 990-EZ) 2012 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 or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 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						
3	Gross receipts from activities that						
	are not an unrelated trade or						
	business under section 513			-			
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2,						
<i>7</i> a	and 3 received from disqualified						
	persons						
b	Amounts included on lines 2 and 3						
_	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6)						
_Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	in) ►	(u) 2000	(6) 2003	(6) 2010	(4) 2011	(6) 2012	(1) 10tai
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
Ь	Unrelated business taxable income (less section 511 taxes)						
	from businesses acquired after						
	June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated						
11	business activities not included						
	in line 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of						
	capital assets (Explain in Part						
	IV)						
13	Total support. (Add lines 9, 10c,						
	11, and 12)			Librari Corretto con	6.01	E04(-)(2)	
14	First five years. If the Form 990 is for	or the organization	on's first, second	i, thira, fourth, or	ππη tax year as a	1 501(c)(3) org	anization, ►
	check this box and stop here	a Cunnaut Da					
	ction C. Computation of Public			1.2		T I	
15	Public support percentage for 2012			13, column (T))		15	
16	Public support percentage from 2011	L Schedule A, Pa	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	me Percenta	ge			
17	Investment income percentage for 20				nn (f))	17	
					. , ,	 	
18	Investment income percentage from					18	
19a	33 1/3% support tests—2012. If the o						ıd lıne 17 ıs not ▶□

33 1/3% support tests—2011. 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) 2012

DLN: 93493077003254

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b

Supplemental Financial Statements

Open to Public

ema	Revenue Service	m 990. ► See separate instructions.		Inspection
	me of the organization emational Academy of Fine Art		Emp	loyer identification number
	And the second of the fact		41-1	1942190
Pa	organizations Maintaining Donor Advorganization answered "Yes" to Form 990		unds	or Accounts. Complete if the
		(a) Donor advised funds		(b) Funds and other accounts
	Total number at end of year			
	Aggregate contributions to (during year)			
	Aggregate grants from (during year)			
	Aggregate value at end of year			
	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the or	3	nor advı	sed Yes No
	Did the organization inform all grantees, donors, and dused only for charitable purposes and not for the beneficonferring impermissible private benefit?			
)a	rt II Conservation Easements. Complete if	the organization answered "Yes" t	o Form	n 990 Part IV line 7
	Purpose(s) of conservation easements held by the org Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	or education) Preservation of ar Preservation of a	certified	d historic structure
	easement on the last day of the tax year			Held at the End of the Year
а	Total number of conservation easements		2a	neid at the End of the Year
b	Total acreage restricted by conservation easements		2b	
:	Number of conservation easements on a certified histo	oric structure included in (a)	2c	
_	Number of conservation easements included in (c) acc	, ,		
d	historic structure listed in the National Register	quired after 6/17/00, and not on a	2d	
	Number of conservation easements modified, transfer	red, released, extinguished, or terminate	ed by th	e organization during
	the tax year 🗠			
	Number of states where property subject to conservat	ıon easement ıs located ►		
	Does the organization have a written policy regarding enforcement of the conservation easements it holds?	the periodic monitoring, inspection, han	dling of	violations, and Yes No
	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation easer	ments d	uring the year
	A mount of expenses incurred in monitoring, inspecting	a and enforcing conservation easement	s durina	the year
	► \$	g, and emoreing conservation casement	3 during	g the year
	Does each conservation easement reported on line 2(and section 170(h)(4)(B)(ii)?	d) above satisfy the requirements of sec	ction 17	70(h)(4)(B)(ı)
	In Part XIII, describe how the organization reports colbalance sheet, and include, if applicable, the text of th	e footnote to the organization's financia		
3 li	the organization's accounting for conservation easements TIII Organizations Maintaining Collection	s of Art, Historical Treasures,	or Otl	ner Similar Assets.
	Complete if the organization answered "Y			
а	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asseservice, provide, in Part XIII, the text of the footnote to	ts held for public exhibition, education,	or rese	arch in furtherance of public
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asseservice, provide the following amounts relating to thes	ts held for public exhibition, education,		
	(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, histor following amounts required to be reported under SFAS			
а	Revenues included in Form 990, Part VIII, line 1			▶ \$
				7

b Assets included in Form 990, Part X

Par	Organizations Maintaining Co	<u>llections of Ar</u>	t, His	stori	cai ii	reasur	es, or O	tne	r Similar As	sets (co	ontinued)
3	Using the organization's acquisition, accessicollection items (check all that apply)	on, and other reco	rds, cl	heck	any of	the follo	wing that a	are a	sıgnıfıcant use	of its	
а	Public exhibition		d	Γ	Loan	or exch	ange progr	ams			
b	Scholarly research		e	Г	Othe	r					
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	aın ho	w the	v furth	er the or	aanization	's ex	empt purpose	ın	
	Part XIII	meetions and expi	4111 110		, rarein	er ene or	gamzacion	5 67	empe purpose	'''	
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t									┌ Yes	┌ No
Pai	Part IV, line 9, or reported an an						answere	d "Y	es" to Form 9	990,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?		•				other ass	ets r	not	┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	e follo	wing	able		-				
							_		Ar	nount	
С	Beginning balance							1 c			
d	Additions during the year							1d			
е	Distributions during the year							1e			
f	Ending balance							1 f			
2a	Did the organization include an amount on Fo	orm 990, Part X, Iır	ne 21?	•						┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII										
Pa	rt V Endowment Funds. Complete									/ NE	
1-	Reginning of year balance	(a)Current year	(b)Prior	year	b (c)IW	o years back	(a)	Three years back	(e)Four y	ears back
1a L	Beginning of year balance										
Ь	Contributions							\vdash			
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
e	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance							\vdash			
	·		//	1		(-))	-14				
2	Provide the estimated percentage of the curr	ent year end baian	ice (iir	ie Ig	, colum	ın (a)) ne	eid as				
а	Board designated or quasi-endowment 🕨										
b	Permanent endowment -										
C	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c show	uld equal 100%									
3a	Are there endowment funds not in the posses organization by	_		that	are hel	d and ad	mınıstered	d for		Yes	No
	(i) unrelated organizations							٠	3a	_	
L	(ii) related organizations If "Yes" to 3a(ii), are the related organization							•	3a(<u> </u>
ь 4	Describe in Part XIII the intended uses of th							•	3	<u> </u>	<u> </u>
	t VI Land, Buildings, and Equipme					10.					
	Description of property	ma occ ronn 3.	30,10	(a) Cost		(b) Cost or o		(c) Accumulated	d (d) Bo	ook value
1-	Land			+						-	
	Land		•	\vdash							
	Buildings		•	\vdash					=	72	224.625
	Leasehold improvements		•	-		0		-	741,2		324,020
	Equipment		•	\vdash		0			206,4	12	2,824
	Other	aual Form 990 Part		umn 1	B) //=-	10(c)			L .		226 044
TOTA	i. Auu iiiles ta tiilougii te (C <i>olumn (a) must e</i>	quai ruiii 990, Part	A, COIL	лип (o), IIne	10(C).)		•	<u>⊁</u>		326,844

Part VIII Investments—Other Securities. Se	ee Form 990, Part X, line 12.	
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	F	
Part VIII Investments—Program Related. S		
(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)	F	
Part IX Other Assets. See Form 990, Part X,		1 455 1
(a) Desc	cription	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line		
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part	t X, line 25.	
1 Other Liabilities. See Form 990, Par 1 (a) Description of liability	t X, line 25.	
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes	t X, line 25. (b) Book value 0	.
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes HOUSING DEPOSIT PAYABLE	(b) Book value 0 43,781	
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes	t X, line 25. (b) Book value 0	
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes HOUSING DEPOSIT PAYABLE	(b) Book value 0 43,781	
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes HOUSING DEPOSIT PAYABLE	(b) Book value 0 43,781	
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes HOUSING DEPOSIT PAYABLE	(b) Book value 0 43,781	
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Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes HOUSING DEPOSIT PAYABLE	(b) Book value 0 43,781	
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes HOUSING DEPOSIT PAYABLE	(b) Book value 0 43,781	
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes HOUSING DEPOSIT PAYABLE	(b) Book value 0 43,781	
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes HOUSING DEPOSIT PAYABLE	(b) Book value 0 43,781	
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes HOUSING DEPOSIT PAYABLE	(b) Book value 0 43,781	
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes HOUSING DEPOSIT PAYABLE	(b) Book value 0 43,781	
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes HOUSING DEPOSIT PAYABLE ITALIAN SEVERENCE PAYABLE	t X, line 25. (b) Book value 0 43,781 94,618	
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes HOUSING DEPOSIT PAYABLE	t X, line 25. (b) Book value 0 43,781 94,618	

Part	Reconciliation of Revenue per Audited Financial Statements With Revenue	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	2,542,168
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIII) 2d -18,711		
e	Add lines 2a through 2d	2e	-18,711
3	Subtract line 2e from line 1	3	2,560,879
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)		
С	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	2,560,879
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses	per	Return
1	Total expenses and losses per audited financial statements	1	2,443,835
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	2,443,835
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	2,443,835

Part XIII Supplemental Information

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

Identifier	Return Reference	Explanation
Schedule D Part XIX		The School is exempt from Federal income taxes as it is a charitable School under Section 501(c)(3) of the Internal Revenue Code Additionally, the School has nonprofit status in Italy and Sweden is not subject to any income taxes in those countries. The School has determined that there are no uncertain tax positions as of June 30, 2013 and there were no income tax related penalties or interest for the period reported in these financial statements. There are no open tax years prior to June 30, 2010.
Schedule D Part XI, line 2D		Transalation loss of \$(18,711) was netted against revenue in the GAAP financial statements. This amount has been shown as an other reconciling item to changes in net assets and adjusted in the revenue calculation.

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DLN: 93493077003254

OMB No 1545-0047

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Schools

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

► Attach to Form 990 or Form 990-EZ.

Employer identification number

Name of the organization International Academy of Fine Art 41-1942190 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? 1 Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 2 Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II 3 Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c Yes 4d Yes d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain If you need more space, use Part II Does the organization discriminate by race in any way with respect to a Students' rights or privileges? Νo 5a **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? Νo d Scholarships or other financial assistance? 5d Νo e Educational policies? 5e Νo f Use of facilities? 5f Νo g Athletic programs? 5g Νo 5h Νo h Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a Νo 6a Does the organization receive any financial aid or assistance from a governmental agency? b Has the organization's right to such aid ever been revoked or suspended? Νo If you answered "Yes" to either line 6a or line 6b, explain on Part II 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II

Yes

Part II Supplemental Information. Complete this part to provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also complete this part to provide any other additional information (see instructions)

ldentifier	Return Reference	Explanation
Racially nondiscrimination policy	Schedule E, Part I, 3	There is no solicitation of students done through either broadcast media or new spapers. Solicitation of students is done through the School's wiebsite, which states that "The School admits students of any age, race, color and national or ethnic origin."

Schedule E (Form 990 or 990-EZ) 2012

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DLN: 93493077003254

Statement of

Statement of Activities Outside the United States

2012

OMB No 1545-0047

Open to Public Inspection

No

Employer identification number

Department of the Treasury Internal Revenue Service

SCHEDULE F

(Form 990)

Complete if the organization answered "Yes" to Form 990,
 Part IV, line 14b, 15, or 16.
 Attach to Form 990. ► See separate instructions.

Name of the organization
International Academy of Fine Art

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States.
- Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	offices in the region	employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
Europe (Including Iceland and Greenland)	2	27	Program Services	School	2,443,835
3a Sub-total	2	27			2,443,835
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	2	27			2,443,835

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2				ted above that are r e or counsel has pro					
3	Enter total nur	mber of other or	ganizations or en	tities					

Schedule F (Form 990) 2012

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.										
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)			
Scholarships	Europe (Including Iceland and Greenland)	34		Credit	164,326	SCHOLARSHIP	FMV			
							+			
_										

Part IV Foreign Forms

1	organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Γ	Yes	<u> </u>	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organizationmay be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Γ	Yes	⊽	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	Г	Yes	<u> </u>	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Г	Yes	<u> </u>	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Г	Yes	<u> </u>	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).	Г	Yes	<u> ~</u>	Νo

Schedule F (Form 990) 2012

Part V Supplemental Informatio

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

I dentifier	ReturnReference	Explanation
Schedule F, Part I, Line 2		The procedure for monitoring the use of scholarship funds is direct. The scholarship funds are for work study on school premises or merit based tuition scholarships for students attending the school
		Cabadula F (Farms 000) 2012

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DLN: 93493077003254

Employer identification number

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

Department of the Treasury

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

Noncash Contributions

Internal Revenue Service Name of the organization International Academy of Fine Art

					41-1942190			
Pa	Tt I Types of Property							
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d Method of d noncash contrib	etermı	_	ts
	Art—Works of art							
	Art—Historical treasures .							
	Art—Fractional Interests							
	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .	Х	4	47,258	FMV - sale of 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—Other							
	Collectibles							
	Food inventory							
20	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
	Other ► ()							
	Other ► ()							
	Other ► () Other ► ()							
	Number of Forms 8283 received	by the ergo	nization during the tay yea	r for contributions				
29	for which the organization comple				29			
	j .		, ,	,			Yes	No
30a	During the year, did the organiza	ition receiv	e by contribution any prope	erty reported in Part I, lines	1-28 that it			
	must hold for at least three year	s from the o	date of the initial contributi	on, and which is not require	d to be used			
	for exempt purposes for the enti	re holding p	erıod?			30a		No
b	If "Yes," describe the arrangeme	ent in Part I	I					
31	Does the organization have a gif	t acceptano	e policy that requires the i	review of any non-standard	contributions?	31		Νo
32a	Does the organization hire or us contributions?	e third parti	es or related organizations	to solicit, process, or sell	noncash • • •	32a		No
b	If "Yes," describe in Part II							
33	If the organization did not report describe in Part II	an amount	ın column (c) for a type of	property for which column (a) ıs checked,			

Page 2

Schedule M	(Form 990) (201:
Part II	Supplem

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Identifier Return Reference Explanation

Schedule M (Form 990) (2012)

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DLN: 93493077003254

41-1942190

SCHEDULE 0 (Form 990 or 990-EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. ► Attach to Form 990 or 990-EZ.

OMB No 1545-0047 2012

Open to Public

Inspection

Employer identification number International Academy of Fine Art

ldentifier	Return Reference	Explanation
Form 990, Part IV, Section B, Line 11b		
Form 990, Part IV, Section B, Line 12C		Annual questionnaires will be required from all board members and key management by June 30th of each year
Form 990, Part IV, Section B, Line 15		The Executive Director and the Board of Trustees conduct reviews and utilize comparable da ta in setting salaries for staff during the annual budget process. The budget is then approved by the board
Form 990, Part VI, Section A, Line 2	Board Member Relationships	Married are Allan and Annette Devore, Robert and Christine Emmons, Daniel and Anki Graves, George and Betsy White, Gregory and Margaret Hedberg, Kenneth and Lesley Koster, David an d Pamela Thompson Jamen Graves is the son of President Daniel Graves Nelson White is the brother of Founding Chairperson George White Julie Spahr is the sister of Betsy White
Form 990, Part VI, Section C, Line 19		The organization makes its governing documents, conflict of interest policy and financial statements available to the public upon request
Form 990, Part XI, Line 9		Other changes in net assets - translation losses of (\$18,711) were included as an other ad justment to change in net assets. Translation gains(losses) are recorded annually for the conversion of assets and liabilities for accounts held in Euro to US dollar based on the current exchange rates at the end of each fiscal year.
Part 5, Line 2a		THE SCHOOL OPERATES IN FLORENCE ITALY and in Molndal (Gothenburg), Sweden AND HAS APPROXIM ATELY 20 and 10 full-time EMPLOYEES, respectively THAT WORK AND ARE PAID THERE Employees are legal residents of their respective countries of employment and therefore all payroll filings and taxes paid for these employees are filed in Italy or in Sweden depending on their residency