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Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Do not enter Social Security numbers on this form as it may be made public. Information about Form 990 and its instructions is at www.irs.gov/form990.

A For the 2013 calendar year, or tax year beginning Jul 1, 2013, and ending Jun 30, 2014

B Check if applicable: Address change, Name change, Initial return, Terminated, Amended return, Application pending. C Name of organization: Van Cliburn Foundation, Inc. D Employer Identification Number: 75-1098332. E Telephone number: (817) 738-6536. F Name and address of principal officer: Jacques Marquis 2525 Ridgmar Blvd. Fort Worth TX 76116. G Gross receipts: \$3,684,493. H(a) Is this a group return for subordinates? Yes No. H(b) Are all subordinates included? Yes No. I Tax-exempt status: 501(c)(3), 501(c) () (insert no), 4947(a)(1) or 527. J Website: www.cliburn.org. K Form of organization: Corporation, Trust, Association, Other. L Year of formation: 1970. M State of legal domicile: TX.

Part I Summary

Table with 22 rows and 3 columns: Description, Prior Year, Current Year. Rows include: 1. Mission statement, 2-7. Governance, 8-12. Revenue, 13-19. Expenses, 20-22. Net Assets or Fund Balances.

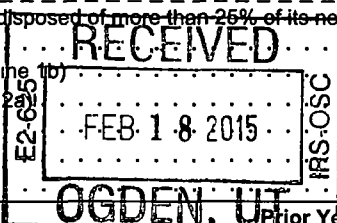
Part II Signature Block

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 officer) is based on all information of which preparer has any knowledge.

Sign Here: Signature of officer Jacques Marquis, President, Date 2/13/15. Paid Preparer Use Only: Preparer's name WALTER D. HATTER, Date 02/13/15, Firm's name HATTER & ASSOCIATES, LLP, Firm's address 1300 S UNIVERSITY DR STE 620 FORT WORTH TX 76107-5766, Firm's EIN 75-2599075, Phone no (817) 335-9258.

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

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Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

1 Briefly describe the organization's mission:

The Van Cliburn advances classical piano music throughout the world. Its international competitions, See Form 990, Page 2, Part III, Line 1 (continued)

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 381,199. including grants of \$ 0.) (Revenue \$ 0.)

The Van Cliburn Foundation fosters the appreciation of classical and other forms of music through the presentation of an international competition every four years and an amateur competition every two years.

4b (Code:) (Expenses \$ 693,689. including grants of \$ 0.) (Revenue \$ 185,355.)

The Van Cliburn Foundation fosters the appreciation of classical, and other forms of music through the presentation of a concert series each year.

4c (Code:) (Expenses \$ 651,497. including grants of \$ 0.) (Revenue \$ 468,900.)

The Van Cliburn Foundation promotes the careers of aspiring musicians through the management of competition winners' careers.

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

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 1,726,385.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I		X
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? If 'Yes,' complete Schedule C, Part II		X
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		X
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 I		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III		X
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		X
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		X
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.		
a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	X	
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		X
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		X
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		X
e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X		X
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	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII		X
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	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
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		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III		X
20 a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H		X
b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organizations or government on Part IX, column (A), line 1? <i>If 'Yes,' complete Schedule I, Parts I and II</i>		X
22 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If 'Yes,' complete Schedule I, Parts I and III</i>		X
23 Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	X	
24 a 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? <i>If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?		
25 a 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? <i>If 'Yes,' complete Schedule L, Part I</i>		X
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? <i>If 'Yes,' complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If so, complete Schedule L, Part II</i>		X
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? <i>If 'Yes,' complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a A current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>		X
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>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If 'Yes,' complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If 'Yes,' complete Schedule N, Part II</i>		X
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 'Yes,' complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1</i>	X	
35 a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
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)? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	X	

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Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

Table with columns for question number, description, and Yes/No checkboxes. Includes sections for backup withholding, employee reporting, foreign accounts, prohibited tax shelter transactions, deductible contributions, and sponsoring organizations.

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

Check if Schedule O contains a response or note to any line in this Part VI. [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 155; 1b Enter the number of voting members included in line 1a... 155; 2 Did any officer, director, trustee, or key employee have a family relationship...; 3 Did the organization delegate control over management duties...; 4 Did the organization make any significant changes to its governing documents...; 5 Did the organization become aware during the year of a significant diversion of the organization's assets...; 6 Did the organization have members or stockholders...; 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...; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body...; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body...; b Each committee with authority to act on behalf of the governing body...; 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...

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates...; 10b 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?...; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?...; 11b 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...; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?...; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done...; 13 Did the organization have a written whistleblower policy...; 14 Did the organization have a written document retention and destruction policy...; 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? a The organization's CEO, Executive Director, or top management official...; b Other officers of key employees of the organization...; 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...; 16b 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 taken steps to safeguard the organization's exempt status with respect to such arrangements?...

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization:

Alissa Ford 2525 Ridgmar Blvd., Ste 307 Fort Worth TX 76116 (817) 738-6536

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

Check if Schedule O contains a response or note to any line in this Part VII

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

1 a 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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former** directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Carla Kemp Thompson Chairman of the Board	10.00	X		X				0.	0.	0.
(2) Alann B Sampson Former President	1.00	X					X	0.	0.	0.
(3) Kimberly Williamson Darden Secretary	2.00	X		X				0.	0.	0.
(4) Jeff King Treasurer	2.00	X		X				0.	0.	0.
(5) Harriet Anton Director	1.00	X						0.	0.	0.
(6) Mary Frances Antweil Director	1.00	X						0.	0.	0.
(7) Ellen Appel Director	1.00	X						0.	0.	0.
(8) Michael G Appleman Director	1.00	X						0.	0.	0.
(9) Susanne F Avondet Director	1.00	X						0.	0.	0.
(10) George Anne Bahan Director	1.00	X						0.	0.	0.
(11) Kaydee Bailey Director	1.00	X						0.	0.	0.
(12) Kenneth Barr Director	1.00	X						0.	0.	0.
(13) Harry E Bartel Director	1.00	X						0.	0.	0.
(14) Scottie Bartel Director	1.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) Anne Bass Director	1.00	X						0.	0.	0.
(16) Mercedes Bass Director	1.00	X						0.	0.	0.
(17) Robert Bass Director	1.00	X						0.	0.	0.
(18) John Beadles Director	1.00	X						0.	0.	0.
(19) William R Biggs Director	1.00	X						0.	0.	0.
(20) Cornelia C Blake Director	1.00	X						0.	0.	0.
(21) Robert Blocker Director	1.00	X						0.	0.	0.
(22) Victor J Boschini Director	1.00	X						0.	0.	0.
(23) Anne Marie Bratton Director	1.00	X						0.	0.	0.
(24) Kim Britton Director	1.00	X						0.	0.	0.
(25) Vernon Bryant Director	1.00	X						0.	0.	0.
1 b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A								363,975.	0.	35,578.
d Total (add lines 1b and 1c)								363,975.	0.	35,578.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **1**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual	X	
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If 'Yes,' complete Schedule J for such person		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514		
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns	1 a					
	b Membership dues	1 b 22,370.					
	c Fundraising events	1 c 499,750.					
	d Related organizations	1 d					
	e Government grants (contributions) . .	1 e					
	f All other contributions, gifts, grants, and similar amounts not included above . .	1 f 917,966.					
	g Noncash contributions included in lines 1a-1f \$						
	h Total. Add lines 1a-1f		1,440,086.				
PROGRAM SERVICE REVENUE	Business Code						
	2 a <u>Ticket Sales</u>	900099	155,979.	155,979.	0.	0.	
	b <u>Management Fees</u>	900099	468,900.	468,900.	0.	0.	
	c <u>Program Advertising</u>	541800	29,251.	0.	29,251.	0.	
	d						
	e						
	f All other program service revenue . . .						
	g Total. Add lines 2a-2f		654,130.				
OTHER REVENUE	3 Investment income (including dividends, interest and other similar amounts)		202,674.	0.	0.	202,674.	
	4 Income from investment of tax-exempt bond proceeds . .						
	5 Royalties		11,132.	0.	0.	11,132.	
	6 a Gross rents	(i) Real	(ii) Personal				
			2,400.				
		b Less: rental expenses		3,418.			
		c Rental income or (loss)		-1,018.			
	d Net rental income or (loss)		-1,018.	0.	-1,018.	0.	
	7 a Gross amount from sales of assets other than inventory.	(i) Securities	(ii) Other				
		1,228,821.					
		b Less cost or other basis and sales expenses		1,151,556.			
		c Gain or (loss)		77,265.			
	d Net gain or (loss)		77,265.	0.	0.	77,265.	
	8 a Gross income from fundraising events (not including . . \$ <u>499,750.</u> of contributions reported on line 1c). See Part IV, line 18.	a		125,500.			
		b Less: direct expenses	b	160,484.			
c Net income or (loss) from fundraising events			-34,984.		0.	-34,984.	
9 a Gross income from gaming activities. See Part IV, line 19.	a						
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	a		19,750.				
	b Less cost of goods sold	b	19,625.				
	c Net income or (loss) from sales of inventory		125.	125.	0.	0.	
Miscellaneous Revenue		Business Code					
11 a							
b							
c							
d All other revenue							
e Total. Add lines 11a-11d							
12 Total revenue. See instructions			2,349,410.	625,004.	28,233.	256,087.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2 Grants and other assistance to individuals in the United States. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees	370,000.	204,000.	110,000.	56,000.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7 Other salaries and wages.	592,746.	338,605.	54,313.	199,828.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	5,965.	3,362.	1,018.	1,585.
9 Other employee benefits	86,261.	48,617.	14,722.	22,922.
10 Payroll taxes	75,603.	42,610.	12,903.	20,090.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees	66,130.	0.	66,130.	0.
g Other (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	323,708.	271,421.	43,872.	8,415.
12 Advertising and promotion	210,067.	204,444.	2,199.	3,424.
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel	84,744.	45,406.	12,279.	27,059.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization	49,333.	27,804.	8,420.	13,109.
23 Insurance				
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.)				
a <u>General & Administrative Expense</u>	281,968.	72,576.	175,174.	34,218.
b <u>Concert Production</u>	93,586.	93,586.	0.	0.
c <u>Artist Fees</u>	595,479.	595,479.	0.	0.
d <u>Equipment Expense</u>	27,757.	15,644.	4,737.	7,376.
e All other expenses	106,256.	10,522.	0.	95,734.
25 Total functional expenses Add lines 1 through 24e.	2,969,603.	1,974,076.	505,767.	489,760.
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year
ASSETS	1 Cash – non-interest-bearing	1,809,367.	1	464,304.
	2 Savings and temporary cash investments	1,013,070.	2	132,189.
	3 Pledges and grants receivable, net	510,280.	3	332,305.
	4 Accounts receivable, net	57,359.	4	50,719.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	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		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	65,779.	8	66,956.
	9 Prepaid expenses and deferred charges	29,622.	9	90,078.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 662,246.		
	b Less: accumulated depreciation	10b 510,334.	186,082.	10c 151,912.
	11 Investments – publicly traded securities	7,257,585.	11	9,685,839.
	12 Investments – other securities. See Part IV, line 11		12	
	13 Investments – program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	449,196.
16 Total assets. Add lines 1 through 15 (must equal line 34)	10,929,144.	16	11,423,498.	
LIABILITIES	17 Accounts payable and accrued expenses	697,651.	17	66,135.
	18 Grants payable		18	
	19 Deferred revenue	58,877.	19	43,243.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	756,528.	26	109,378.
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	9,840,636.	27	11,042,420.
	28 Temporarily restricted net assets	331,980.	28	271,700.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	10,172,616.	33	11,314,120.	
34 Total liabilities and net assets/fund balances	10,929,144.	34	11,423,498.	

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Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI.

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,349,410.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,969,603.
3	Revenue less expenses. Subtract line 2 from line 1	3	-620,193.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	10,172,616.
5	Net unrealized gains (losses) on investments	5	1,223,026.
6	Donated services and use of facilities	6	89,475.
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	449,196.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	11,314,120.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.			
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:			
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2 b	Were the organization's financial statements audited by an independent accountant?	X	
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			
<input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2 c	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	X	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
3 a	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?		X
3 b	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

BAA

Form 990 (2013)

SCHEDULE A
(Form 990 or 990-EZ)

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.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization

Van Cliburn Foundation, Inc.

Employer identification number

75-1098332

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions – subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I
 - b Type II
 - c Type III – Functionally integrated
 - d Type III – Non-functionally integrated
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**.
- f If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
- (ii) A family member of a person described in (i) above?
- (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11 g (i)		
11 g (ii)		
11 g (iii)		

h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in column (i) listed in your governing document?		(v) Did you notify the organization in column (i) of your support?		(vi) Is the organization in column (i) organized in the U S ?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2013

Part III Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Table with 7 columns: Calendar year (or fiscal year beginning in), (a) 2009, (b) 2010, (c) 2011, (d) 2012, (e) 2013, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f); 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: Calendar year (or fiscal year beginning in), (a) 2009, (b) 2010, (c) 2011, (d) 2012, (e) 2013, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 9 Net income from unrelated 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 10; 12 Gross receipts from related activities, etc (see instructions); 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 3 columns: Description, Line Number, Percentage. Rows include: 14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)); 15 Public support percentage from 2012 Schedule A, Part II, line 14; 16a 33-1/3% support test - 2013; 16b 33-1/3% support test - 2012; 17a 10%-facts-and-circumstances test - 2013; 17b 10%-facts-and-circumstances test - 2012; 18 Private foundation.

Part III 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 yr beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include any 'unusual grants'.)	1,596,549.	1,626,541.	3,773,138.	2,635,226.	1,440,086.	11,071,540.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	380,675.	433,708.	190,523.	1,635,274.	644,629.	3,284,809.
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 furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	1,977,224.	2,060,249.	3,963,661.	4,270,500.	2,084,715.	14,356,349.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	477,116.	727,664.	2,437,274.	1,601,352.	1.	5,243,407.
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	80,349.					80,349.
c Add lines 7a and 7b	557,465.	727,664.	2,437,274.	1,601,352.	1.	5,323,756.
8 Public support (Subtract line 7c from line 6.)						9,032,593.

Section B. Total Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6	1,977,224.	2,060,249.	3,963,661.	4,270,500.	2,084,715.	14,356,349.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	190,673.	246,591.	171,117.	162,464.	213,806.	984,651.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	434.					434.
c Add lines 10a and 10b	191,107.	246,591.	171,117.	162,464.	213,806.	985,085.
11 Net income from unrelated 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 lns 9,10c, 11 and 12)	2,168,331.	2,306,840.	4,134,778.	4,432,964.	2,298,521.	15,341,434.
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	58.88 %
16 Public support percentage from 2012 Schedule A, Part III, line 15.	16	57.03 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	6.42 %
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	5.84 %

- 19a 33-1/3% support tests – 2013. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization
- b 33-1/3% support tests – 2012. 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
- 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.

**SCHEDULE D
(Form 990)**

Supplemental Financial Statements

OMB No 1545-0047

2013

▶ Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

Employer identification number

Van Cliburn Foundation, Inc.

75-1098332

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Part II Conservation Easements.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2 a
b Total acreage restricted by conservation easements	2 b
c Number of conservation easements on a certified historic structure included in (a)	2 c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2 d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.

1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____

(ii) Assets included in Form 990, Part X ▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply).

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1 a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If 'Yes,' explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	1 c
d Additions during the year	1 d
e Distributions during the year	1 e
f Ending balance	1 f

2 a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If 'Yes,' explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1 a Beginning of year balance					
b Contributions					
c 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					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment _____ %
 - b Permanent endowment _____ %
 - c Temporarily restricted endowment _____ %
- The percentages in lines 2a, 2b, and 2c should equal 100%.

3 a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) unrelated organizations	3a(i)	
(ii) related organizations	3a(ii)	
b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R?	3b	

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land				
b Buildings				
c Leasehold improvements	25,315.		25,315.	0.
d Equipment	636,931.		485,019.	151,912.
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c)) 151,912.

Part VII Investments – Other Securities.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) -----		
(B) -----		
(C) -----		
(D) -----		
(E) -----		
(F) -----		
(G) -----		
(H) -----		
(I) -----		
Total (Column (b) must equal Form 990, Part X, column (B) line 12) . . . ▶		

Part VIII Investments – Program Related.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total (Column (b) must equal Form 990, Part X, column (B) line 13) . . . ▶		

Part IX Other Assets.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total (Column (b) must equal Form 990, Part X, column (B), line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total (Column (b) must equal Form 990, Part X, column (B) line 25) . . . ▶	

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include description, sub-row identifier, and a final column for totals.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include description, sub-row identifier, and a final column for totals.

Part XIII Supplemental Information.

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

Pt X Line 2 The Van Cliburn Foundation, Inc. and the Van Cliburn Trust are exempt from federal income tax in accordance with Section 501(c)(3) of the Internal Revenue Code, except for tax on any unrelated business income. The Foundation had no material unrelated business income during the year. In addition, the Internal Revenue Service has determined the Foundation is not a "private foundation" within the meaning of Section 501(a) of

Part XIII Supplemental Information (continued)

the Internal Revenue Code.

The Foundation follows the provisions of FASB ASC 740, Income Taxes, which requires financial statement recognition and disclosure for uncertain tax positions taken or expected to be taken in a tax return. Management considers the likelihood of changes by taxing authorities to its filed income tax returns and recognizes liability for or disclosed potential significant changes that are more likely than not to occur upon examination by tax authorities, including changes to the Foundation's tax-exempt status. Management believes the Foundation met the requirements to maintain its tax-exempt status and has not identified any uncertain tax positions that would require recognition or disclosure in the accompanying financial statements. With few exceptions, the Foundation's federal income tax returns for the past three years are subject to examination by tax authorities and may change upon examination.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No 1545-0047

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered 'Yes' on Form 990, Part IV, line 23.
 ▶ Attach to Form 990. ▶ See separate instructions.
 ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

2013

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

Van Cliburn Foundation, Inc.

Employer identification number

75-1098332

Part I Questions Regarding Compensation

	Yes	No
1 a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		
<input type="checkbox"/> First-class or charter travel		
<input type="checkbox"/> Travel for companions		
<input type="checkbox"/> Tax indemnification and gross-up payments		
<input type="checkbox"/> Discretionary spending account		
<input type="checkbox"/> Housing allowance or residence for personal use		
<input type="checkbox"/> Payments for business use of personal residence		
<input type="checkbox"/> Health or social club dues or initiation fees		
<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
1 b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain		
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?		
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.		
<input type="checkbox"/> Compensation committee		
<input type="checkbox"/> Independent compensation consultant		
<input type="checkbox"/> Form 990 of other organizations		
<input type="checkbox"/> Written employment contract		
<input type="checkbox"/> Compensation survey or study		
<input type="checkbox"/> Approval by the board or compensation committee		
4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization:		
4 a Receive a severance payment or change-of-control payment?		X
4 b Participate in, or receive payment from, a supplemental nonqualified retirement plan?		X
4 c Participate in, or receive payment from, an equity-based compensation arrangement?		X
If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		
Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.		
5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
5 a The organization?		X
5 b Any related organization?.		X
If 'Yes' to line 5a or 5b, describe in Part III.		
6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
6 a The organization?		X
6 b Any related organization?.		X
If 'Yes' to line 6a or 6b, describe in Part III.		
7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If 'Yes,' describe in Part III		X
8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If 'Yes,' describe in Part III		X
9 If 'Yes' to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?		

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2013

Part III Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable columns (D) and (E) amounts for that individual.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus and incentive compensation	(iii) Other reportable compensation				
1 Alann B Sampson Former President	(i) 0. (ii) 0.	(ii) 0. (iii) 0.	(iii) 0. (iii) 0.	0. 0.	0. 0.	0. 0.	0. 0.
2 Jacques Marquis President & CEO	(i) 260,000. (ii) 0.	(ii) 25,000. (iii) 0.	(iii) 0. (iii) 0.	0. 0.	26,658. 0.	311,658. 0.	0. 0.
3	(i) --- (ii) ---	(ii) --- (iii) ---	(iii) --- (iii) ---	--- ---	--- ---	--- ---	--- ---
4	(i) --- (ii) ---	(ii) --- (iii) ---	(iii) --- (iii) ---	--- ---	--- ---	--- ---	--- ---
5	(i) --- (ii) ---	(ii) --- (iii) ---	(iii) --- (iii) ---	--- ---	--- ---	--- ---	--- ---
6	(i) --- (ii) ---	(ii) --- (iii) ---	(iii) --- (iii) ---	--- ---	--- ---	--- ---	--- ---
7	(i) --- (ii) ---	(ii) --- (iii) ---	(iii) --- (iii) ---	--- ---	--- ---	--- ---	--- ---
8	(i) --- (ii) ---	(ii) --- (iii) ---	(iii) --- (iii) ---	--- ---	--- ---	--- ---	--- ---
9	(i) --- (ii) ---	(ii) --- (iii) ---	(iii) --- (iii) ---	--- ---	--- ---	--- ---	--- ---
10	(i) --- (ii) ---	(ii) --- (iii) ---	(iii) --- (iii) ---	--- ---	--- ---	--- ---	--- ---
11	(i) --- (ii) ---	(ii) --- (iii) ---	(iii) --- (iii) ---	--- ---	--- ---	--- ---	--- ---
12	(i) --- (ii) ---	(ii) --- (iii) ---	(iii) --- (iii) ---	--- ---	--- ---	--- ---	--- ---
13	(i) --- (ii) ---	(ii) --- (iii) ---	(iii) --- (iii) ---	--- ---	--- ---	--- ---	--- ---
14	(i) --- (ii) ---	(ii) --- (iii) ---	(iii) --- (iii) ---	--- ---	--- ---	--- ---	--- ---
15	(i) --- (ii) ---	(ii) --- (iii) ---	(iii) --- (iii) ---	--- ---	--- ---	--- ---	--- ---
16	(i) --- (ii) ---	(ii) --- (iii) ---	(iii) --- (iii) ---	--- ---	--- ---	--- ---	--- ---

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No 1545-0047

2013

**Open To Public
Inspection**

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

Van Cliburn Foundation, Inc.

Employer identification number

75-1098332

Part 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 determining noncash contribution amounts
1 Art – Works of art				
2 Art – Historical treasures				
3 Art – Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities – Publicly traded				
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				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (.)				
26 Other ▶ (.)				
27 Other ▶ (.)				
28 Other ▶ (.)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

	29	
--	----	--

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

	Yes	No
30a		X
31		X
32a		X
33		

b If 'Yes,' describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

b If 'Yes,' describe in Part II

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

SCHEDULE O
(Form 990 or 990-EZ)

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 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is
at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public
Inspection

Name of the organization

Van Cliburn Foundation, Inc.

Employer identification number

75-1098332

Pt VI, Line 11b The form 990 is reviewed and approved by the Finance
Committee. A public disclosure copy is then provided
to the full Board prior to its filing with the IRS.

The public disclosure copy contains all of the
information on the return with the exception of the
names and addresses of the major contributors listed
on Schedule B.

Pt VI, Line 12c All Board members are required to sign and disclose
any conflicts of interest annually.

Pt VI, Line 15a The Chairman of the Board of Directors and the
Personnel Committee review job performance and
consider compensation of personnel in similar
positions at similar organizations.

Pt VI, Line 19 The governing documents, conflict of interest policy, and
financial statements are available to the public upon
request.

Pt VI, Line 2 Harry Bartel & Mrs. Harry Bartel - Family Relationship
Tim Carter & Nancy Carter - Family Relationship
Robert Turner & Jennifer Corbett - Family Relationship
Weldon Turner & Jennifer Corbett - Family Relationship
Mary Corley & Randy Gideon - Family Relationship
Janann Cowden & Pat Lorimer (Staff) - Family Relationship
Kim Darden & Lucy Darden - Family Relationship
Charles Fischer & Jill Fischer - Family Relationship
Fuller French & Marcia French - Family Relationship

Name of the organization

Employer identification number

Van Cliburn Foundation, Inc.

75-1098332

Tina Gorski & Susanna Gorski - Family Relationship

Tina Gorski & Anna Melissa Philpott - Family Relationship

Tina Gorski & Marsha Kleinheinz - Family Relationship

Susanna Gorski & Marsha Kleinheinz - Family Relationship

Susanna Gorski & Anna Melissa Philpott - Family Relationship

Gerald Grinstein & Carolyn Grinstein - Family Relationship

Randall Hudson & Ann Hudson - Family Relationship

Kit Moncrief & Marsland Moncrief - Family Relationship

Marisa Moncrief & Marsland Moncrief - Family Relationship

Anna Melissa Philpott & Marsha Kleinheinz - Family Relationship

John Roach & Jean Roach - Family Relationship

Jean Kemp & Carla Thompson - Family Relationship

Jude Ryan & Terry Ryan - Family Relationship

Gail Rawl & Kim Darden - Family Relationship

Martha Hyder & Whitney More - Family Relationship

Kathryn King & Teresa King - Family Relationship

Sarah Ray & Shannon Ray - Family Relationship

Bobby Turner & Weldon Turner - Family Relationship

Pt VI, Line 15b The Chairman of the Board of Directors and the

Personnel Committee review job performance and

consider compensation of personnel in similar

positions at similar organizations.

Form 990, Part III, Line 1 opportunities for citizens of all nations to observe,

enjoy, attend and participate in educational and

cultural events of a musical nature.

SCHEDULE R
(Form 990)

Related Organizations and Unrelated Partnerships

- ▶ Complete if the organization answered 'Yes' on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.
- ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Department of the Treasury
Internal Revenue Service



Name of the organization

Van Cliburn Foundation, Inc.

Employer identification number

75-1098332

Part I. Identification of Disregarded Entities Complete if the organization answered 'Yes' on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) -----					
(2) -----					
(3) -----					

Part II. Identification of Related Tax-Exempt Organizations Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Sec 512(b)(13) controlled entity?	
						Yes	No
(1) Van Cliburn Trust Fund 2525 Ridgmar Blvd. Fort Worth, TX 76116 75-2231693	Trust funds of Van Cliburn Foundation TX		501(c)(3)	Public	Van Cliburn Foundation		X
(2) -----							
(3) -----							
(4) -----							

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) -----												
(2) -----												
(3) -----												

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Sec 512(b)(13) controlled entity?	
								Yes	No
(1) -----									
(2) -----									
(3) -----									

Part V Transactions With Related Organizations Complete if the organization answered 'Yes' on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity		X
b	Gift, grant, or capital contribution to related organization(s)		X
c	Gift, grant, or capital contribution from related organization(s)	X	
d	Loans or loan guarantees to or for related organization(s)		X
e	Loans or loan guarantees by related organization(s)		X
f	Dividends from related organization(s)		X
g	Sale of assets to related organization(s)		X
h	Purchase of assets from related organization(s)		X
i	Exchange of assets with related organization(s)		X
j	Lease of facilities, equipment, or other assets to related organization(s)		X
k	Lease of facilities, equipment, or other assets from related organization(s)		X
l	Performance of services or membership or fundraising solicitations for related organization(s)		X
m	Performance of services or membership or fundraising solicitations by related organization(s)		X
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	X	
o	Sharing of paid employees with related organization(s)	X	
p	Reimbursement paid to related organization(s) for expenses		X
q	Reimbursement paid by related organization(s) for expenses		X
r	Other transfer of cash or property to related organization(s)		X
s	Other transfer of cash or property from related organization(s)		X

2	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)	Van Cliburn Trust	c		Cash Value
(2)	Van Cliburn Trust	n		
(3)	Van Cluburn Trust	o		
(4)				
(5)				
(6)				

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered 'Yes' on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 Form (1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1) -----													

(2) -----													

(3) -----													

(4) -----													

(5) -----													

(6) -----													

(7) -----													

(8) -----													

Part VII

Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions).

Department of the Treasury
Internal Revenue Service

Name of the Organization Van Cliburn Foundation, Inc.	Employer identification number 75-1098332
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Part VII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
26 David G Bucher Director	1.00	X					0.	0.	0.	
27 Angie Bulaich Director	1.00	X					0.	0.	0.	
28 Amanda Bush Director	1.00	X					0.	0.	0.	
29 Nancy M Carter Director	1.00	X					0.	0.	0.	
30 Tim Carter Director	1.00	X					0.	0.	0.	
31 Sue Chalk Director	1.00	X					0.	0.	0.	
32 Leland Clemons Director	1.00	X					0.	0.	0.	
33 Gary Cole Director	1.00	X					0.	0.	0.	
34 Denise J Collins Director	1.00	X					0.	0.	0.	
35 Gunhild Corbett Director	1.00	X					0.	0.	0.	
36 Mary Corley Director	1.00	X					0.	0.	0.	
37 Will Allen Courtney Director	1.00	X					0.	0.	0.	
38 Andrea Cowan Director	1.00	X					0.	0.	0.	
39 Mrs. Bobbie Badger Director	1.00	X					0.	0.	0.	
40 Barbara A Cox Director	1.00	X					0.	0.	0.	
41 Rose Ann Cranz Director	1.00	X					0.	0.	0.	
42 Kathie Cummins Director	1.00	X					0.	0.	0.	
43 Juana-Rosa Daniell Director	1.00	X					0.	0.	0.	
44 Lucy Darden Director	1.00	X					0.	0.	0.	
45 Gregory T Davis Director	1.00	X					0.	0.	0.	
46 Mitzi Davis Director	1.00	X					0.	0.	0.	

Department of the Treasury
Internal Revenue Service

Name of the Organization

Van Cliburn Foundation, Inc.

Employer identification number

75-1098332

Part VII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
47 W Craig Diebel Director	1.00	X					0.	0.	0.	
48 Carol W Dunaway Director	1.00	X					0.	0.	0.	
49 Mary Jeanne Dyess Director	1.00	X					0.	0.	0.	
50 Jill A Fischer Director	1.00	X					0.	0.	0.	
51 C Kenny Fischer Director	1.00	X					0.	0.	0.	
52 John E Forestner Director	1.00	X					0.	0.	0.	
53 Fuller French Director	1.00	X					0.	0.	0.	
54 Marcia F French Director	1.00	X					0.	0.	0.	
55 Cornelia C Friedman Director	1.00	X					0.	0.	0.	
56 Sarah Gentry Director	1.00	X					0.	0.	0.	
57 Randall C Gideon Director	1.00	X					0.	0.	0.	
58 Diego O Giordano Director	1.00	X					0.	0.	0.	
59 John R Giordano Director	1.00	X					0.	0.	0.	
60 Richard C Gipson Director	1.00	X					0.	0.	0.	
61 Felice Girouard Director	1.00	X					0.	0.	0.	
62 Laila M Gleason Director	1.00	X					0.	0.	0.	
63 Cami Goff Director	1.00	X					0.	0.	0.	
64 Susanna Gorski Director	1.00	X					0.	0.	0.	
65 Tina Gorski Director	1.00	X					0.	0.	0.	
66 J D Granger Director	1.00	X					0.	0.	0.	
67 Sheila Grant Director	1.00	X					0.	0.	0.	

Department of the Treasury
Internal Revenue Service

Name of the Organization Van Cliburn Foundation, Inc.	Employer identification number 75-1098332
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Part VII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
68 Elaine R Griver Director	1.00	X					0.	0.	0.	
69 Nancy L Hallman Director	1.00	X					0.	0.	0.	
70 Michael J Hawley Director	1.00	X					0.	0.	0.	
71 John L Hotard Director	1.00	X					0.	0.	0.	
72 Ann House Director	1.00	X					0.	0.	0.	
73 Randall Hudson III Director	1.00	X					0.	0.	0.	
74 Ann F Hudson Director	1.00	X					0.	0.	0.	
75 Isabelle B Hulsey Director	1.00	X					0.	0.	0.	
76 Kathryn Hyde Director	1.00	X					0.	0.	0.	
77 Robert L Jameson Director	1.00	X					0.	0.	0.	
78 Jose' Feghali Director	1.00	X					0.	0.	0.	
79 Dana Cate Kelly Director	1.00	X					0.	0.	0.	
80 Dee J Kelly Jr Director	1.00	X					0.	0.	0.	
81 Janice Kelly Director	1.00	X					0.	0.	0.	
82 Raymond B Kelly III Director	1.00	X					0.	0.	0.	
83 Olga Kern Director	1.00	X					0.	0.	0.	
84 Kathryn King Director	1.00	X					0.	0.	0.	
85 Teresa King Director	1.00	X					0.	0.	0.	
86 Marsha H Kleinheinz Director	1.00	X					0.	0.	0.	
87 Amy Korenvaes Director	1.00	X					0.	0.	0.	
88 Alexander Kobrin Director	1.00	X					0.	0.	0.	

Department of the Treasury
Internal Revenue Service

Name of the Organization Van Cliburn Foundation, Inc.	Employer identification number 75-1098332
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Part VII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
89 Kendall Kostohryz Director	1.00	X					0.	0.	0.	
90 William A Landreth Jr Director	1.00	X					0.	0.	0.	
91 Mollie L Lasater Director	1.00	X					0.	0.	0.	
92 Kathryn Laughlin Director	1.00	X					0.	0.	0.	
93 Lauri Lawrence Director	1.00	X					0.	0.	0.	
94 Adelaide Leavens Director	1.00	X					0.	0.	0.	
95 Eddie M Lesok Director	1.00	X					0.	0.	0.	
96 Gaylord G Lummis Director	1.00	X					0.	0.	0.	
97 Norman B Lyons Director	1.00	X					0.	0.	0.	
98 Kyle Mabry Director	1.00	X					0.	0.	0.	
99 Darlene Mann Director	1.00	X					0.	0.	0.	
100 Louella B Martin Director	1.00	X					0.	0.	0.	
101 Priscilla W Martin Director	1.00	X					0.	0.	0.	
102 Sharon A Martin Director	1.00	X					0.	0.	0.	
103 Ted Mayo III Director	1.00	X					0.	0.	0.	
104 David McDavid Director	1.00	X					0.	0.	0.	
105 Kaye B McDermott Director	1.00	X					0.	0.	0.	
106 Betty Claire McKnight Director	1.00	X					0.	0.	0.	
107 Joseph J Minton Jr Director	1.00	X					0.	0.	0.	
108 Scott Mitchell Director	1.00	X					0.	0.	0.	
109 Kit T Moncrief Director	1.00	X					0.	0.	0.	

Department of the Treasury
Internal Revenue Service

Name of the Organization: Van Cliburn Foundation, Inc. Employer Identification number: 75-1098332

Part VII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
110 Radu Lupu Director	1.00	X						0.	0.	0.
111 Marsland Moncrief Director	1.00	X						0.	0.	0.
112 Whitney H More Director	1.00	X						0.	0.	0.
113 Denise C Mullins Director	1.00	X						0.	0.	0.
114 Emmett Murphy Director	1.00	X						0.	0.	0.
115 Anna Melissa Philpott Director	1.00	X						0.	0.	0.
116 Dana D Porter Director	1.00	X						0.	0.	0.
117 Gail W Rawl Director	1.00	X						0.	0.	0.
118 Sarah C Ray Director	1.00	X						0.	0.	0.
119 Shannon Y Ray Director	1.00	X						0.	0.	0.
120 Bill Rickett Director	1.00	X						0.	0.	0.
121 Beth Rivers Director	1.00	X						0.	0.	0.
122 Jean Roach Director	1.00	X						0.	0.	0.
123 Richard Rodzinski Director	1.00	X						0.	0.	0.
124 Rosalyn G Rosenthal Director	1.00	X						0.	0.	0.
125 Ann Ryan Director	1.00	X						0.	0.	0.
126 Jude Ryan Director	1.00	X						0.	0.	0.
127 Terry J Ryan Director	1.00	X						0.	0.	0.
128 Robert J Sell Director	1.00	X						0.	0.	0.
129 Esther S Shores Director	1.00	X						0.	0.	0.
130 Elaine Small Director	1.00	X						0.	0.	0.

Department of the Treasury
Internal Revenue Service

Name of the Organization: **Van Cliburn Foundation, Inc.** Employer Identification number: **75-1098332**

Part VII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
131 B Blaine Smith Director	1.00	X					0.	0.	0.	
132 Flavious Smith Director	1.00	X					0.	0.	0.	
133 Thomas L Smith Director	1.00	X					0.	0.	0.	
134 James D Spaniolo Director	1.00	X					0.	0.	0.	
135 Dawn M Srimavin Director	1.00	X					0.	0.	0.	
136 Rob Stephenson Director	1.00	X					0.	0.	0.	
137 Sara Sterling Director	1.00	X					0.	0.	0.	
138 Kathleen B Stevens Director	1.00	X					0.	0.	0.	
139 Warren Strickland Director	1.00	X					0.	0.	0.	
140 David Stropes Director	1.00	X					0.	0.	0.	
141 Rebecca Stupfel Director	1.00	X					0.	0.	0.	
142 Scott A Sullivan Director	1.00	X					0.	0.	0.	
143 Amar Tanna Director	1.00	X					0.	0.	0.	
144 Anna Belle Thomas Director	1.00	X					0.	0.	0.	
145 Rice M Tilley Jr Director	1.00	X					0.	0.	0.	
146 Maureda Travis Director	1.00	X					0.	0.	0.	
147 William J Thornton Director	1.00	X					0.	0.	0.	
148 William E Tucker Director	1.00	X					0.	0.	0.	
149 Sandra Tuomey Director	1.00	X					0.	0.	0.	
150 Weldon Turner Director	1.00	X					0.	0.	0.	
151 Wesley R Turner Director	1.00	X					0.	0.	0.	

Department of the Treasury
Internal Revenue Service

Name of the Organization: Van Cliburn Foundation, Inc. Employer identification number: 75-1098332

Part VII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
152 Vaughn O Vennerberg II Director	1.00	X						0.	0.	0.
153 Vladimir Viardo Director	1.00	X						0.	0.	0.
154 Donna A Whitworth Director	1.00	X						0.	0.	0.
155 Jeff Wildin Director	1.00	X						0.	0.	0.
156 Martha S Williams Director	1.00	X						0.	0.	0.
157 Suzanne S Williams Director	1.00	X						0.	0.	0.
158 Sandi Wilson Director	1.00	X						0.	0.	0.
159 Heide Wolf Director	1.00	X						0.	0.	0.
160 Ralph Votapek Director	1.00	X						0.	0.	0.
161 Kimbell Wynne Director	1.00	X						0.	0.	0.
162 Elaine Yamagata Director	1.00	X						0.	0.	0.
163 Marisa Gibson Director	1.00	X						0.	0.	0.
164 Caroline Rose Hunt Director	1.00	X						0.	0.	0.
165 Martha Hyder Director	1.00	X						0.	0.	0.
166 Stanislav Loudenitch Director	1.00	X						0.	0.	0.
167 Jon Yasuhiro Nakamatsu Director	1.00	X						0.	0.	0.
168 Christina Ortiz Director	1.00	X						0.	0.	0.
169 Paige Bourdreaux Pate Director	1.00	X						0.	0.	0.
170 Simone Pedroni Director	1.00	X						0.	0.	0.
171 Andre-Michel Schub Director	1.00	X						0.	0.	0.
172 Susan B. Tilley Director	1.00	X						0.	0.	0.

