# **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

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

<u> </u>	OI III	I <del>C</del> 201	Lateriuar year, or tax year beg	minig	07,	/ U 1 , <b>2012</b> ,	and en	lullig	] D. E		J6/30, <b>Z</b>	
<b>B</b> c	heck if ap	pplicable:	C Name of organization						D Emplo	byer ideni	tification nur	nber
	Addre	ess	GRAHAM GUND GALLERY						1	21401	4.0	
	chang	ge	Doing Business As	a mat dalimanad ta atu		)	D / /	14 -		31401		
-	-	change	Number and street (or P.O. box if mail i	s not delivered to str	eet addres	(SS)	Room/su	ite	1	hone num		
X	Initial	l return	EATON CENTER						(740)	427-	-5181	
	-	inated	City or town, state or country, and ZIP +	· 4								
	Amer return	n	GAMBIER, OH 43022							receipts		775,225
	Applie	cation ing	F Name and address of principal of	fficer:NATALIE	MARSI	H				is a group i ates?	return for	Yes X N
			EATON CENTER GAMBIER	, ОН 43022					H(b) Are	all affiliates	included?	Yes N
<u> </u>	Tax-ex	empt st	atus: X 501(c)(3) 501(c) (	) ◀ (insert r	no.)	4947(a)(1) d	or	527	If "N	lo," attach a	a list. (see instru	uctions)
J	Websi	ite: 🕨	WWW.THEGUNDGALLERY.ORG						H(c) Grou	ıp exemptio	n number	-
K	Form	of orgar	nization: X Corporation Trust	Association	Other >	<b>&gt;</b>	L Ye	ear of forma	ation: 201	.2 <b>M</b> St	ate of legal d	omicile: OH
Pa	rt I	Su	mmary									
	1	Briefly	y describe the organization's mission	or most significan	t activities	s:						
Φ		TO I	BE AN INNOVATIVE PRODUC	ER OF CHAL	LENGI	NG NEW K	NOWLE	DGE AE	BOUT TH	E		
Governance		VIS	JAL.									
ern												
ŏ	2	Check	k this box  if the organization	discontinued its	operation	ns or dispose	d of more	e than 25%	% of its net	assets.		
<u>ه</u>	3	Numb	er of voting members of the governin	g body (Part VI, lir	ne 1a)						3	11
ies	4	Numb	per of independent voting members of	the governing bo	ody (Part	VI, line 1b)				4	ı	9
Activities	5	Total	number of individuals employed in ca	lendar year 2012	(Part V, li	ine 2a)				5	5	
Act	6		number of volunteers (estimate if nece								5	14
	7a		gross unrelated business revenue fron		(C), line	12				7:	а	
			nrelated business taxable income from								b	
									Prior Y			rrent Year
Φ	8	Contri	ibutions and grants (Part VIII, line 1h)		ı			$\neg \Box$			0	761,529
ů	9	Progra	am service revenue (Part VIII, line 2g)			COPY	FOR				0	
Revenue	10	Invest	tment income (Part VIII, column (A), lii	nes 3, 4, and 7d)		PUBLIC INS	SPECTIO	ו אפ			0	13,696
œ	11		revenue (Part VIII, column (A), lines s					_			0	
	12		revenue - add lines 8 through 11 (mu								0	775,225
	13		s and similar amounts paid (Part IX, co								0	
	14	Benef	its paid to or for members (Part IX, col	lumn (A), line 4)				• •			0	
ģ	15	Salari	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)								0	304,194
Expenses	16 a	Professional fundraising fees (Part IX, column (A), line 11e)									0	
xbe	b		fundraising expenses (Part IX, column				0					
Ш	17	Other	expenses (Part IX, column (A), lines 1	1a-11d, 11f-24f)							0	295,795
			expenses. Add lines 13-17 (must equa								0	599,989
	19	Rever	nue less expenses. Subtract line 18 fro	om line 12							0	175,236
Ses					<del>-</del>		<u> </u>		nning of Cu	ırrent Yea	ar En	nd of Year
Net Assets or Fund Balances	20	Total	assets (Part X, line 16)						11	2,196		287,432
AS	21	Total	liabilities (Part X, line 26)								0	
Fee	22		ssets or fund balances. Subtract line 2						11	2,196		287,432
	rt II	Sig	gnature Block					•			'	
			of perjury, I declare that I have examined this							of my kno	wledge and b	elief, it is true,
	rect, ar		plete. Declaration of preparer (other than off	ilicer) is based on all	moman	on or which pre	ерагег паз	s ally kilowi	euge.			
S	ign											
Н	ere		Signature of officer						Da	ate		
			Type or print name and title									
_		Print/	Type preparer's name	Preparer's signat	ure		Date		Check	if	PTIN	
Paid		CHR	ISTOPHER B. ANDERSON						self- employ	/ed ▶	P00	226559
	parer			JOTNY LLC			-		EIN	▶ 34	4-06770	
use	Only	Firm's name MALONEY + NOVOTNY LLC  Firm's address 1111 SUPERIOR AVENUE, SUITE 700 CLEVELAND, OH 44114						Phone no. ▶ 216-363-0100				
May	the I		ccuss this return with the preparer sho									res No
$\overline{}$			Reduction Act Notice see the senar									orm <b>990</b> (2012

Form 990 (2012) Page 2

Pa		nent of Program Service A if Schedule O contains a re	accomplishments esponse to any question in this Part III		х
1		the organization's mission			
2			icant program services during the yea		
	If "Yes," describ	be these new services on Se	chedule O.		
3	services?		or make significant changes in h		
4	Describe the contexpenses. Section 2.1	tion 501(c)(3) and 501(c)(	ule O.  vice accomplishments for each of it  4) organizations are required to reported.		Term
4a			including grants of \$		)
			VISUAL ARTS CENTER AT KEN SE PRODUCER OF CHALLENGING		
			THE GALLERY IS A DYNAMIC 3		
			CING KENYON COLLEGE'S LIB		
	CURRICULUM	THROUGH PROVOCATIV	/E EXHIBITIONS AND COLLABO	RATIVE	
			HE GALLERY IS NAMED AFTER		
			LLEGE AND BOSTON-BASED ARC	HITECT AND	
	NOTED ART (	COLLECTOR.			
4b	(Code:	) (Expenses \$	including grants of \$	) (Revenue \$	)
	-				
4c	(Code:	) (Expenses \$	including grants of \$	) (Revenue \$	)
_					
4d		services (Describe in Sche	· · · · · · · · · · · · · · · · · · ·	Φ \	
40		including grasservice expenses ►		)	
70	. otar program	OUI VIOU UNPUIIOCO	JUU, UIJ.		

Form **990** (2012)

Form 990 (2012)
Page 3

-ar	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	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			v
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			Х
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Λ
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,	5		Х
6	Part III	3		Λ
6	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes,"	-		
Ū	complete Schedule D, Part III	8	Х	
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	9		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	10		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.			
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		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	11b		X
С	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		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	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
t	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11f	x	
10-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	111	Λ	
ıza	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		Х
h	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	124		21
D	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section $170(b)(1)(A)(ii)$ ? If "Yes," complete Schedule E	13		Х
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	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		Х
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		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	40		37
	If "Yes," complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Form 990 (2012) Page 4

Part	Checklist of Required Schedules (continued)			
			Yes	No
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		Х
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		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
23				
	organization's current and former officers, directors, trustees, key employees, and highest compensated	22	Х	
04 -	employees? If "Yes," complete Schedule J	23	- 1	
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? If "Yes," answer lines 24b			3.7
	through 24d and complete Schedule K. If "No," go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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? If "Yes," complete Schedule L, Part I	25a		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?			
	If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or 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		Х
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? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete</i>			
	Schedule L. Part IV	28b		Х
С	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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		X
	Did the organization receive more than \$23,000 in non-cash contributions: If res, complete schedule in			
30		30		Х
0.4	conservation contributions? If "Yes," complete Schedule M	30		21
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	31		Х
	Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			7.7
	complete Schedule N, Part II.	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			3.7
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
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	X	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		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)? If "Yes," complete Schedule R, Part V, line 2	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		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		Х
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	38	X	

Form **990** (2012)

Form 990 (2012) Page **5** 

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	.		37
	account)?	4a		X
b	If "Yes," enter the name of the foreign country: ►			
_	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	F -		v
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b 5c		
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?  Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	30		
va	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or	- ou		
D	gifts were not tax deductible?	6b		
7	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 services provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7с		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
_	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			3.7
_	organization, have excess business holdings at any time during the year?	8		X
9	Sponsoring organizations maintaining donor advised funds.	9a		
	Did the organization make any taxable distributions under section 4966?  Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:	35		
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.			
b	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 13b			
	Enter the amount of reserves on hand	4.4-		v
	Did the organization receive any payments for indoor tanning services during the tax year?  If "Yes " has it filled a Form 720 to report these payments? If "No " provide an explanation in School Q.	14a		X
g	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

JSA 2E1040 1.000

GRAHAM GUND GALLERY 46-3140140 Page 6 Form 990 (2012)

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 to any question in this Part VI.......... 5

Sect	ion 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 1b			
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		Х
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		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	X	
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	X	
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	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
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	,	X
secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code		N1-
		4.0	Yes	No X
	Did the organization have local chapters, branches, or affiliates?	10a		Λ
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	401		
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		X
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		Λ
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	40-	Χ	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Λ	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	426	Х	
	rise to conflicts?	12b	21	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	12c	Х	
40	describe in Schedule O how this was done	13	X	
13	Did the organization have a written whistleblower policy?	14	21	X
14 15	Did the organization have a written document retention and destruction policy?	14		
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?			
а	The organization's CEO, Executive Director, or top management official	15a		Х
a b	Other officers or key employees of the organization	15b		Х
Ŋ	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			
·ou	with a taxable entity during the year?	16a		Х
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		
Sect	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶_OH,			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 5	01(c)(	3)s oı	nly)
	available for public inspection. Indicate how you made these available. Check all that apply.	` /\		- /
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict o	finter	est p	olicy,
	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	ne		
	organization: ▶ Shirley F. O'Brien Eaton Center Gambier, OH 43022 740-427-5181			

JSA Form **990** (2012) Form 990 (2012) GRAHAM GUND GALLERY 46-3140140 Page **7** 

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

Check if Schedule O contains a response to any question in this Part VII .............

#### 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 employees."
- 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	orga	niza	tion	COI	mpen	sate	ed any current offic	er, director, or trus	stee.
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)					is both	an	(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
(1) ALBER, CAROLYN	1.00									
TRUSTEE		Х						0	0	C
(2) GOLDBERGER, PAUL	1.00									
TRUSTEE	1 00	X						0	0	
(3) GUND, GRAHAM	1.00									
TRUSTEE	1 00	X						C	0	C
TRUSTEE, TREASURER	1.00	X						0	0	C
(5) HORVITZ, DAVID	1.00	Λ							0	
TRUSTEE, CHAIR		X							0	(
(6) LEVINSON, BONNIE	1.00	21							0	
TRUSTEE		X							0	(
(7) PIZUTTI, RONALD	1.00									
TRUSTEE	+	Х							0	(
(8) RESNICK, LISA BETSON	1.00									
TRUSTEE, SECRETARY		Х						0	0	(
(9) ROSENTHAL, MARK	1.00									
TRUSTEE		Х						C	0	(
(10)MARSH, NATALIE	40.00									
EXECUTIVE DIRECTOR		Х		Х				98,237.	0	1,500.
(11)S. GEORGIA NUGENT	1.00									
EX OFFICIO TRUSTEE/PRESIDENT	40.00	X		Х				0	367,571.	175,065.
(12)										
(13)										
(14)										

Form **990** (2012)

JSA

GRAHAM GUND GALLERY Form 990 (2012)

	990 (2012)													Page 8
Par	Section A. Officers, Directors, Tru	ıstees, Ke	y En	nplo	oye	es,	and F	ligl	hest Compensat	ed Employ	yees (c	ontinue	d)	
	(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	Position (do not check more than box, unless person is bot officer and institutional trustee)  Or director				is both	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reporta compensati relate organiza (W-2/1099	on from d tions	am comp fro orga and	(F) timated ount of other pensatio om the anization I related nization	f on n d
				o o			ited							
1b \$	Sub-total							<b>&gt;</b>	98,237.	367	,571.	1	76,5	65.
c <sup>-</sup>	Total from continuation sheets to Part VII, S	_						$\blacktriangleright$	0		0			0
	Total (add lines 1b and 1c)							<b>&gt;</b>	98,237.		,571.	1	76,5	65.
	Total number of individuals (including but not eportable compensation from the organization			liste O	ed a	bove	e) who	o re	eceived more than	\$100,000	of			
3 1	Did the organization list any former officemployee on line 1a? If "Yes," complete Schedu	er, directo										3	Yes	No X
(	For any individual listed on line 1a, is the sorganization and related organizations groundividual	eater than	\$15	50,0	00?	) If	"Yes	5,"				4	Х	
5 I	Did any person listed on line 1a receive or or services rendered to the organization? If "Yo	accrue co	mpen	sati	on	fron	n any	un				5	21	X
	tion B. Independent Contractors												'	
(	Complete this table for your five highest compensation from the organization. Report over.													
	(A) Name and business add	lress							<b>(B)</b> Description of se	rvices	C	(C) ompens	ation	

JSA 2E1055 3.000

Form **990** (2012)

more than \$100,000 in compensation from the organization  $\,\blacktriangleright\,$ 

2 Total number of independent contractors (including but not limited to those listed above) who received

Form 990 (2012) GRAHAM GUND GALLERY 46-3140140 Page **9** 

Part VIII Statement of Revenue

		Check if Schedule O contains a respo	nse to any quest	ion 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, 513, or 514
evenue and Other Similar Amounts	1a b c d e f	Federated campaigns 1a  Membership dues 1b  Fundraising events 1c  Related organizations 1d  Government grants (contributions) . 1e  All other contributions, gifts, grants, and similar amounts not included above . 1f  Noncash contributions included in lines 1a-1f: \$		761,529.			
Program Service Revenue	b c d e f g	All other program service revenue Total. Add lines 2a-2f		0			
Other Revenue	3 4 5	Investment income (including dividends, interother similar amounts).  Income from investment of tax-exempt bond in Royalties (i) Real	rest, and	13,696. 0			13,696.
	6a b c			0			
	7a b	Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses	(ii) Other				
	d 8a	Gain or (loss)  Net gain or (loss)  Gross income from fundraising events (not including \$  of contributions reported on line 1c).  See Part IV, line 18		0			
	С	Less: direct expenses		0			
	с 10а	Less: direct expenses		0			
	С	Less: cost of goods sold b Net income or (loss) from sales of inventory Miscellaneous Revenue	Business Code	0			
	11a b c d	All other revenue					
		Total. Add lines 11a-11d	▶	775,225.			13,696.

Form 990 (2012) GRAHAM GUND GALLERY 46-3140140 Page **10** 

# 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 to any question in this Part IX									
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> 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	0								
4	Benefits paid to or for members	0								
5	Compensation of current officers, directors,									
	trustees, and key employees	117,426.	117,426.							
6	Compensation not included above, to disqualified									
	persons (as defined under section 4958(f)(1)) and									
	persons described in section 4958(c)(3)(B)	120 117	120 110							
7	Other salaries and wages	138,117.	138,117.							
8	Pension plan accruals and contributions (include section	0 640	0 (40							
	401(k) and 403(b) employer contributions)	8,648. 22,721.	8,648. 22,721.							
9	Other employee benefits	17,282.	17,282.							
10	Payroll taxes	11,202.	11,202.							
11	Fees for services (non-employees):	0								
	Management	0								
	Legal	0								
	Accounting	0								
	Lobbying	0								
	Investment management fees	0								
	Other. (If line 11g amount exceeds 10% of line 25, column									
9	(A) amount, list line 11g expenses on Schedule O.)	0								
12	Advertising and promotion	0								
13	Office expenses	0								
14	Information technology	0								
15	Royalties	0								
16	Occupancy	0								
17	Travel	49,734.	49,734.							
18	Payments of travel or entertainment expenses									
	for any federal, state, or local public officials	0								
19	Conferences, conventions, and meetings	0								
20	Interest	0								
21	Payments to affiliates	0								
22	Depreciation, depletion, and amortization	0								
23	Insurance	U								
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.)									
_	PROGRAM EXP.&MATERIALS	144,272.	144,272.							
-	POSTAGE & SHIPPING	38,147.	38,147.							
	OUTSIDE CONTRACTING	23,572.	30,117.	23,572.						
	FEES & HONORARIA	22,101.	22,101.	,,						
	All other expenses	17,969.	8,401.	9,568.						
25	Total functional expenses. Add lines 1 through 24e	599,989.	566,849.	33,140.						
26	Joint costs. Complete this line only if the		•	<u> </u>						
	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)	0								

Form **990** (2012)

46-3140140

#### Form 990 (2012) Part X **Balance Sheet**

12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. See Part IV, line 11 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 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 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25. 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets 20 Crganizations that do not follow SFAS 117 (ASC 958), check here    10 Carpolations    11	1 6	III	Object (Collection Constrict Constri	V		
1			Спеск и Schedule O contains a response to any question in this Part			
2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 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 receivable in section 4958(I)(1)(I), persons described in section 4958(I)(1)), persons described in section 4958(I)(1)), persons described in section 4958(I)(3)(II), and contributing employers and sponsoring organizations of section 501(I)(I)(3) voluntary employees beneficiary organizations (see instructions). Complete Part II of Schedule L 7 Notes and loans receivable, net 9 Prepaid expenses and deferred charges 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis. Complete Part IV of Schedule D 10b Less: accumulated depreciation 11 Investments - publicly traded securities 12 Investments - publicly traded securities 11 Investments - tother securities. See Part IV, line 11 12 Investments - tother securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 10 Cher assets. See Part IV, line 11 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 112 190 16 287, 43: 17 Accounts payable and accrued expenses 10 17 17 Accounts payable and accrued expenses 10 17 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Leans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part IV of Schedule D 22 Secured mortgages and notes payable to unrelated third parties 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities. (including federal income tax, payables to related third parties, and other liabilities. Add lines 17 through 25 26 Total liabilities. Add lines 17 through 25 27 Total liabilitie						
2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 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 receivable in section 4958(I)(1)(I), persons described in section 4958(I)(1)), persons described in section 4958(I)(1)), persons described in section 4958(I)(3)(II), and contributing employers and sponsoring organizations of section 501(I)(I)(3) voluntary employees beneficiary organizations (see instructions). Complete Part II of Schedule L 7 Notes and loans receivable, net 9 Prepaid expenses and deferred charges 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis. Complete Part IV of Schedule D 10b Less: accumulated depreciation 11 Investments - publicly traded securities 12 Investments - publicly traded securities 11 Investments - tother securities. See Part IV, line 11 12 Investments - tother securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 10 Cher assets. See Part IV, line 11 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 112 190 16 287, 43: 17 Accounts payable and accrued expenses 10 17 17 Accounts payable and accrued expenses 10 17 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Leans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part IV of Schedule D 22 Secured mortgages and notes payable to unrelated third parties 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities. (including federal income tax, payables to related third parties, and other liabilities. Add lines 17 through 25 26 Total liabilities. Add lines 17 through 25 27 Total liabilitie		1	Cash - non-interest-bearing	0	1	0
3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part IV of Schedule L 6 Loans and other receivables from other disqualified persons dis defined under section 4595(R)(11), persons described in section 4595(R)(3)(8), and contributing employers and sponsoring organizations of section 4595(R)(3)(8), and contributing employers and sponsoring organizations of section 4595(R)(3)(8), and contributing employers and sponsoring organizations of section 4595(R)(3)(8), and contributing employers and sponsoring organizations of section 4595(R)(3)(8), and contributing employers and sponsoring organizations of section 4595(R)(3)(8), and contributing employers and sponsoring organizations of section 4595(R)(3)(8), and contributing employers and sponsoring organizations of section 4595(R)(3)(8), and contributing employers and sponsoring organizations of section 4595(R)(3)(8), and contributing employers and sponsoring organizations of section 4595(R)(3)(8), and contributing employers and sponsoring organizations of section 4595(R)(3)(8), and contributing employers and sponsoring organizations of section 4595(R)(3)(8), and contributing employers and sponsoring organizations of section 4595(R)(3)(8), and contributing employees and sponsoring organizations and deferred charges  9 Prepaid expenses and deferred charges  10a Land, buildings, and equipment: cost or other hasis. Complete Part IV, line 11  10a Land, buildings, and equipment: cost or other hasis. Complete Part IV, line 11  11b Investments - publicity traded securities  11c Land, buildings, and equipment: cost or other hasis. Complete Part IV, line 11  11c Total assets. Add lines 1 through 15 (must equal line 34)  11c The Accounts payable and accrued expenses  11d The Accounts payable and accrued expenses  11d The Accounts payable and accrued expenses  11d The Accounts payable and accrued expenses  12d Unsecured not				0		0
5 Loans and other receivables, net  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(I)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 5016(c)(9) voluntary employees beneficiary organizations (see instructions). Complete Part II of Schedule L  7 Notes and loans receivable, net  8 Inventories for sale or use  9 Prepaid expenses and deferred charges  10a Land, buildings, and equipment: cost or other basis. Complete Part V of Schedule D  b Less: accumulated depreciation  11 Investments - publicity traded securities  12 Investments - publicity traded securities  13 Investments - publicity traded securities  14 Intangible assets  15 Other assets. See Part IV, line 11  16 Total assets. Add lines 1 through 15 (must equal line 34)  17 Accounts payable and accrued expenses  18 Grants payable and accrued expenses  19 Deterred revenue  10 Tax-exempt bond liabilities  20 Tax-exempt bond liabilities  21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D  20 Tax-exempt bond liabilities  21 Unsecured notes and loans payable to unrelated third parties  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 D  21 Escrow or custodial account liabilities our unrelated third parties  22 Unsecured notes and loans payable to unrelated third parties  23 Secured mortgages and notes payable to unrelated third parties  24 Unsecured notes and loans payable to unrelated third parties  25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities on trincluded on l			Pledges and grants receivable, net	0		0
trustees, key employees, and highest compensated employees. Complete Part II of Schedule L Leans and other receivables from other disqualified persons (as defined under section 4958()(1)), persons described in section 4958()(3)(8), and contributing employers and sponsoring organizations of section 4958()(3)(8), and contributing employers and sponsoring organizations of section 4958()(3)(8), and contributing employers and sponsoring organizations of section 4958()(3)(8), and contributing employers and sponsoring organizations of section 4958()(3)(8), and contributing employers and sponsoring organizations of section 4958()(3)(8), and contributing employers and sponsoring organizations of section 4958()(3)(8), and contributing employers and sponsoring organizations of section 4958()(3)(8), and contributing employers and sponsoring organizations of section 4958()(3)(8), and contributing employers and sponsoring organizations of section 4958()(1)(8) (1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(			Accounts receivable, net	0		0
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)(f)), persons described in section 4958(c)(3)(B), and contributing employers and sonsoring organizations of section 501(c)(g) voluntary employees beneficiary organizations (see instructions). Complete Part II of Schedule L 7 Notes and loans receivable, net . 8 Inventories for sale or use . 9 Prepaid expenses and deferred charges . 10a Land, buildings, and equipment: cost or other basis. Complete Part IV of Schedule D 1 Less: accumulated depreciation . 11 Investments - publicly traded securities . 12 Investments - publicly traded securities . 12 Investments - publicly traded securities . 13 Investments - program-related. See Part IV, line 11 . 14 Intangible assets . 15 Other assets. See Part IV, line 11 . 16 Total assets. Add lines 1 through 15 (must equal line 34) . 17 Accounts payable and accrued expenses . 18 Grants payable . 19 Deferred revenue . 20 Tax-exempt bond liabilities . 21 Escrow or custodial account liability. Complete Part IV of Schedule D . 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 Complete Part II of Schedule L . 23 Secured mortgages and notes payable to unrelated third parties . 24 Unsecured notes and loans payable to unrelated third parties . 25 Other liabilities (including federal income tax, payables to related third parties . 26 Organizations that follow SFAS 117 (ASC 958), check here ▶ X and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets . 28 Temporarily restricted net assets . 29 Permanently restricted net assets . 39 7, 246. 29 216,781			Loans and other receivables from current and former officers, directors.	-	-	
Complete Part II of Schedule L Loans and other receivables from other disqualitied persons (as defined under section 4988(I)(I)), persons described in section 4988(I)(3)(B), and contributing employers and sponsoring organizations of section 501 (I)(B) voluntary employees beneficiary organizations (see instructions). Complete Part I of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part IV of Schedule D b Less: accumulated depreciation 11 Investments - publicly traded securities 12 Investments - program-related. See Part IV, line 11 12 Investments - program-related. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 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 Unsecured notes and loans payable to unrelated third parties 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 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 26 Total liabilities. Add lines 17 through 25.  27 Unrestricted net assets 28 Temporarily restricted net assets 39 Preparizations that do not follow SFAS 117 (ASC 958), check here ▶  and complete lines 27 through 29 and lines 33 and 34.  28 Temporarily restricted net assets 39 Preparizations that do not follow SFAS 117 (ASC 958), check here ▶  and			, , ,			
1			Complete Dort II of Cob edulo I	0	5	0
and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	Loans and other receivables from other disqualified persons (as defined under section	-		
organizations (see instructions). Complete Part II of Schedule L						
7 Notes and loans receivable, net   0 7   8   Inventories for sale or use   0 8   9   Prepaid expenses and deferred charges   0 9   10a   Land, buildings, and equipment: cost or other basis. Complete Part IV of Schedule D   10b   0   10c			organizations (see instructions). Complete Part II of Schedule I	0	6	0
9 Prepaid expenses and deferred charges 10 a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D b Less: accumulated depreciation. 10b 0 10c 111 Investments - publicity traded securities 112,196. 11 287,43: 12 Investments - publicity traded securities 9 112,196. 11 1 287,43: 13 Investments - program-related. See Part IV, line 11 0 13 14 Intangible assets 0 14 15 Other assets. See Part IV, line 11 0 15 15 Other assets. See Part IV, line 11 0 15 16 16 287,43: 15 Other assets. See Part IV, line 11 0 15 16 287,43: 17 Accounts payable and accrued expenses 0 17 18 Grants payable and accrued expenses 0 17 18 Grants payable and accrued expenses 0 18 19 Deferred revenue 0 19 Deferred revenue 0 19 Escrow or custodial account liability. Complete Part IV of Schedule D 0 21 Escrow or custodial account liability. Complete Part IV of Schedule D 0 21 Unsecured notes and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 0 22 23 Secured mortgages and notes payable to unrelated third parties 0 23 24 Unsecured notes and loans payable to unrelated third parties 0 24 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 0 25 Organizations that follow SFAS 117 (ASC 958), check here    20 Organizations that follow SFAS 117 (ASC 958), check here    21 Emporarily restricted net assets 97, 246. 29 216, 78.  22 Permanently restricted net assets 97, 246. 29 216, 78.	ets	7	Notes and loans receivable, net	0	-	0
9 Prepaid expenses and deferred charges 10 a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D b Less: accumulated depreciation. 10b 0 10c 111 Investments - publicity traded securities 112,196. 11 287,43: 12 Investments - publicity traded securities 9 112,196. 11 1 287,43: 13 Investments - program-related. See Part IV, line 11 0 13 14 Intangible assets 0 14 15 Other assets. See Part IV, line 11 0 15 15 Other assets. See Part IV, line 11 0 15 16 16 287,43: 15 Other assets. See Part IV, line 11 0 15 16 287,43: 17 Accounts payable and accrued expenses 0 17 18 Grants payable and accrued expenses 0 17 18 Grants payable and accrued expenses 0 18 19 Deferred revenue 0 19 Deferred revenue 0 19 Escrow or custodial account liability. Complete Part IV of Schedule D 0 21 Escrow or custodial account liability. Complete Part IV of Schedule D 0 21 Unsecured notes and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 0 22 23 Secured mortgages and notes payable to unrelated third parties 0 23 24 Unsecured notes and loans payable to unrelated third parties 0 24 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 0 25 Organizations that follow SFAS 117 (ASC 958), check here    20 Organizations that follow SFAS 117 (ASC 958), check here    21 Emporarily restricted net assets 97, 246. 29 216, 78.  22 Permanently restricted net assets 97, 246. 29 216, 78.	SS	8	Inventories for sale or use	0	8	0
10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D b Less: accumulated depreciation	•	9	Prepaid expenses and deferred charges	0	9	0
ther basis. Complete Part VI of Schedule D b Less: accumulated depreciation		10 a	· · · · · · · · · · · · · · · · · · ·			
b Less: accumulated depreciation			other basis. Complete Part VI of Schedule D 10a			
11   Investments - publicly traded securities   112,196   11   287,43     12   Investments - other securities. See Part IV, line 11   0   13     13   Investments - program-related. See Part IV, line 11   0   13     14   Intangible assets   0   14     15   Other assets. See Part IV, line 11   0   15     16   Total assets. Add lines 1 through 15 (must equal line 34)   112,196   16   287,43     17   Accounts payable and accrued expenses   0   17     18   Grants payable   0   18     19   Deferred revenue   0   19     20   Tax-exempt bond liabilities   0   20     21   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   0   22     22   Secured mortgages and notes payable to unrelated third parties   0   24     23   Unsecured notes and loans payable to unrelated third parties   0   24     24   Unsecured notes and loans payable to unrelated third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D   0   25     25   Total liabilities. Add lines 17 through 25   0   26     26   Organizations that follow SFAS 117 (ASC 958), check here		b	Less: accumulated depreciation	0	10c	0
13 Investments - program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable and accrued expenses 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 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 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 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 26 Total liabilities. Add lines 17 through 25 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets 20 Organizations that do not follow SFAS 117 (ASC 958), check here  and one follow SFAS 117 (ASC				112,196.	11	287,432.
14 Intangible assets		12				0
15 Other assets. See Part IV, line 11  16 Total assets. Add lines 1 through 15 (must equal line 34)  17 Accounts payable and accrued expenses  17 Accounts payable and accrued expenses  18 Grants payable  19 Deferred revenue  20 Tax-exempt bond liabilities  21 Escrow or custodial account liability. Complete Part IV of Schedule D  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  23 Secured mortgages and notes payable to unrelated third parties  24 Unsecured notes and loans payable to unrelated third parties  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  26 Total liabilities. Add lines 17 through 25.  27 Organizations that follow SFAS 117 (ASC 958), check here   28 Temporarily restricted net assets  14,950, 28 70,64*  29 Permanently restricted net assets  14,950, 28 70,64*  29 Permanently restricted net assets  14,950, 29 216,78*		13	Investments - program-related. See Part IV, line 11			0
15 Other assets. See Part IV, line 11  16 Total assets. Add lines 1 through 15 (must equal line 34)  17 Accounts payable and accrued expenses  18 Grants payable  19 Deferred revenue  20 Tax-exempt bond liabilities  11 Escrow or custodial account liability. Complete Part IV of Schedule D  21 Escrow or custodial account liability. Complete Part IV of Schedule D  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  23 Secured mortgages and notes payable to unrelated third parties  24 Unsecured notes and loans payable to unrelated third parties  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  26 Total liabilities. Add lines 17 through 25.  27 Organizations that follow SFAS 117 (ASC 958), check here   28 Temporarily restricted net assets  10 27  29 Permanently restricted net assets  14,950. 28 70,644  29 Permanently restricted net assets  14,950. 29 216,781		14	Intangible assets			0
17 Accounts payable and accrued expenses		15	Other assets. See Part IV, line 11	0		0
18 Grants payable		16				287,432.
Tax-exempt bond liabilities  Tax-exempt bond liabilities  Tax-exempt bond liabilities  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  Secured mortgages and notes payable to unrelated third parties  Unsecured notes and loans payable to unrelated third parties  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  Total liabilities. Add lines 17 through 25.  Organizations that follow SFAS 117 (ASC 958), check here   Temporarily restricted net assets  Organizations that do not follow SFAS 117 (ASC 958), check here  Permanently restricted net assets  Organizations that do not follow SFAS 117 (ASC 958), check here   Organizations that do not follow SFAS 117 (ASC 958), check here   Organizations that do not follow SFAS 117 (ASC 958), check here   Organizations that do not follow SFAS 117 (ASC 958), check here   Organizations that do not follow SFAS 117 (ASC 958), check here   Organizations that do not follow SFAS 117 (ASC 958), check here   Organizations that do not follow SFAS 117 (ASC 958), check here   Organizations that do not follow SFAS 117 (ASC 958), check here   Organizations that do not follow SFAS 117 (ASC 958), check here   Organizations that do not follow SFAS 117 (ASC 958), check here   Organizations that do not follow SFAS 117 (ASC 958), check here   Organizations that do not follow SFAS 117 (ASC 958), check here   Organizations that do not follow SFAS 117 (ASC 958), check here   Organizations that do not follow SFAS 117 (ASC 958), check here   Organizations that do not follow SFAS 117 (ASC 958), check here   Organizations that do not follow SFAS 117 (ASC 958), check here   Organizations that do not follow SFAS 117 (ASC 958), check here   Organizations that do not follow SFAS 117 (ASC 958), check here   Organizations that do not follow SFAS 117 (ASC 958), che						0
Tax-exempt bond liabilities  Tax-exempt bond liabilities, directors,			Grants payable			0
21 Escrow or custodial account liability. Complete Part IV of Schedule D  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  23 Secured mortgages and notes payable to unrelated third parties  24 Unsecured notes and loans payable to unrelated third parties  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  26 Total liabilities. Add lines 17 through 25  Corganizations that follow SFAS 117 (ASC 958), check here   27 Unrestricted net assets  28 Temporarily restricted net assets  Corganizations that do not follow SFAS 117 (ASC 958), check here   Corganizations that do not follow SFAS 117 (ASC 958), check here   Corganizations that do not follow SFAS 117 (ASC 958), check here   Corganizations that do not follow SFAS 117 (ASC 958), check here   Corganizations that do not follow SFAS 117 (ASC 958), check here   Corganizations that do not follow SFAS 117 (ASC 958), check here   Corganizations that do not follow SFAS 117 (ASC 958), check here   Corganizations that do not follow SFAS 117 (ASC 958), check here   Corganizations that do not follow SFAS 117 (ASC 958), check here   Corganizations that do not follow SFAS 117 (ASC 958), check here   Corganizations that do not follow SFAS 117 (ASC 958), check here   Corganizations that do not follow SFAS 117 (ASC 958), check here   Corganizations that do not follow SFAS 117 (ASC 958), check here   Corganizations that do not follow SFAS 117 (ASC 958), check here   Corganizations that do not follow SFAS 117 (ASC 958), check here   Corganizations that do not follow SFAS 117 (ASC 958), check here   Corganizations that do not follow SFAS 117 (ASC 958), check here   Corganizations that do not follow SFAS 117 (ASC 958), check here   Corganizations that do not follow SFAS 117 (ASC 958), check here   Corganizations that do not follow SFAS		_	Deferred revenue			0
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  23 Secured mortgages and notes payable to unrelated third parties  24 Unsecured notes and loans payable to unrelated third parties  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  26 Total liabilities. Add lines 17 through 25.  27 Organizations that follow SFAS 117 (ASC 958), check here Amburgations of the payables to related third parties, and other liabilities. Add lines 17 through 25.  27 Unrestricted net assets  28 Temporarily restricted net assets  29 Permanently restricted net assets  30 23  24 Other liabilities (including federal income tax, payables to related third parties.  30 24  25 Other liabilities. Add lines 17 through 25.  30 25  31 Other liabilities. Add lines 17 through 25.  31 Other liabilities. Add lines 17 through 25.  32 Other liabilities.  33 Other liabilities.  44 Other liabilities (including federal income tax, payables to related third parties.  45 Other liabilities.  46 Other liabilities.  47 Other liabilities.  48 Other liabilities.  49 Other liabilities.  40 21 Other liabilities.  50 24 Other liabilities.  50 24 Other liabilities.  50 25 Other liabilities.  50 25 Other liabilities.  50 26 Other liabilities.  50 26 Other liabilities.  50 27 Other liabilities.  50 27 Other liabilities.  50 26 Other liabilities.  50 26 Other liabilities.  50 26 Other liabilities.  50 26 Other liabilities.  50 27 Other liabilities.  50 26 Other l			Tax-exempt bond liabilities			0
23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 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 26 Total liabilities. Add lines 17 through 25.  Organizations that follow SFAS 117 (ASC 958), check here  and Complete lines 27 through 29, and lines 33 and 34.  27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SF	ies			U	21	0
23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 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 26 Total liabilities. Add lines 17 through 25.  Organizations that follow SFAS 117 (ASC 958), check here  and Complete lines 27 through 29, and lines 33 and 34.  27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SF	ij	22				
23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 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 26 Total liabilities. Add lines 17 through 25.  Organizations that follow SFAS 117 (ASC 958), check here  and Complete lines 27 through 29, and lines 33 and 34.  27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SFAS 117 (ASC 958), check here  and organizations that do not follow SF	Ei.			0	22	0
Unsecured notes and loans payable to unrelated third parties  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  Total liabilities. Add lines 17 through 25		22				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 D.       0       25         26 Total liabilities. Add lines 17 through 25.       0       26         Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34.         27 Unrestricted net assets       0       27         28 Temporarily restricted net assets       0       27         29 Permanently restricted net assets       97,246.       29       216,788         Organizations that do not follow SFAS 117 (ASC 958), check here       and       and       and						0
parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D  26 Total liabilities. Add lines 17 through 25.  Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34.  27 Unrestricted net assets  28 Temporarily restricted net assets  Permanently restricted net assets  Organizations that do not follow SFAS 117 (ASC 958), check here organizations that do not follow SFAS 117 (ASC 958), check here and organizations that do not follow SFAS 117 (ASC 958), check here and organizations that do not follow SFAS 117 (ASC 958), check here and organizations that do not follow SFAS 117 (ASC 958), check here and organizations that do not follow SFAS 117 (ASC 958), check here and organizations that do not follow SFAS 117 (ASC 958), check here are and organizations that do not follow SFAS 117 (ASC 958), check here are and organizations that do not follow SFAS 117 (ASC 958), check here are and organizations that do not follow SFAS 117 (ASC 958), check here are are already and organizations that do not follow SFAS 117 (ASC 958), check here are are are are are are are are are				0	24	
of Schedule D  26 Total liabilities. Add lines 17 through 25.  Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34.  27 Unrestricted net assets  28 Temporarily restricted net assets  Permanently restricted net assets  Organizations that do not follow SFAS 117 (ASC 958), check here  Organizations that do not follow SFAS 117 (ASC 958), check here  and		23				
26 Total liabilities. Add lines 17 through 25.  Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34.  27 Unrestricted net assets  28 Temporarily restricted net assets  Permanently restricted net assets  Organizations that do not follow SFAS 117 (ASC 958), check here organizations that do not follow SFAS 117 (ASC 958), check				0	25	0
Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34.  Unrestricted net assets  Temporarily restricted net assets  Permanently restricted net assets  Organizations that do not follow SFAS 117 (ASC 958), check here and and		26	Total liabilities. Add lines 17 through 25	0		0
			Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗓 and			
	ces		-			
	lau					0
	å		Temporarily restricted net assets			
	낕	29		97,246.	29	216,788.
30 Capital stock or trust principal, or current funds	şts	30			30	
31 Paid-in or capital surplus, or land, building, or equipment fund	556	31				
complete lines 30 through 34.  30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 30 31 32 32 33 Total net assets or fund balances 31 32 33 287,433	۲		Retained earnings, endowment, accumulated income, or other funds			
	Š		Total net assets or fund balances			287,432.
34 Total liabilities and net assets/fund balances	_	34	Total liabilities and net assets/fund balances	112,196.	34	287,432.

Form **990** (2012)

Page **11** 

Form 990 (2012) Page **12** 

Part	XI Reconciliation of Net Assets					<u></u>		
	Check if Schedule O contains a response to any question in this Part XI							
1	Total revenue (must equal Part VIII, column (A), line 12)	1			75,2	225.		
2	Total expenses (must equal Part IX, column (A), line 25)	2		5	99,9	989.		
3	Revenue less expenses. Subtract line 2 from line 1	3		175,236				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		112,196				
5	Net unrealized gains (losses) on investments	5				0		
6	6 Donated services and use of facilities							
7	Investment expenses	7				0		
8	Prior period adjustments	8				0		
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line							
	33, column (B))	10		2	87,4	<u> 132.</u>		
Part								
	Check if Schedule O contains a response to any question in this Part XII							
	A " " " T				Yes	No		
1	Accounting method used to prepare the Form 990: CashX Accrual Other							
	If the organization changed its method of accounting from a prior year or checked "Other," explain in							
2-	Schedule O.					37		
Za	Were the organization's financial statements compiled or reviewed by an independent accountant?	ا و الم		2a		X		
	If "Yes," check a box below to indicate whether the financial statements for the year were con reviewed on a separate basis, consolidated basis, or both:	ipiied	OI					
_	Separate basis Consolidated basis Both consolidated and separate basis			2b	X			
b	Were the organization's financial statements audited by an independent accountant?			20	Δ.			
	If "Yes," check a box below to indicate whether the financial statements for the year were audi separate basis, consolidated basis, or both:	ied o	n a					
	Separate basis, Consolidated basis, Or Both.  Separate basis							
_		iaht						
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for overs of the audit, review, or compilation of its financial statements and selection of an independent account		,	2c		X		
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.								
32	As a result of a federal award, was the organization required to undergo an audit or audits as se	forth	n in					
Ja	the Single Audit Act and OMB Circular A-133?	. 10111		3a		Х		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und	erao	the					
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au		0	3b				

Form **990** (2012)

#### SCHEDULE A (Form 990 or 990-EZ)

## **Public Charity Status and Public Support**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service 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

**Employer identification number** Name of the organization GRAHAM GUND GALLERY 46-3140140 Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I 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). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the 4 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 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.) An organization that normally receives: (1) more than 331/3% 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 331/3% 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 X An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the 11 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. Type II c Type III-Functionally integrated **d** Type III-Non-functionally integrated e X 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 it is a Type I, Type II, or Type III supporting organization, check this box X Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? No Yes (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? 11g(i) Χ (ii) A family member of a person described in (i) above? 11g(ii) Χ (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Х Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (iv) Is the (v) Did you notify (vi) Is the (vii) Amount of monetary organization in organization (described on lines 1-9 the organization organization in support col. (i) listed in above or IRC section in col. (i) of col. (i) organized your governing (see instructions)) your support? in the U.S.? document? Yes No Yes No Yes No KENYON COLLEGE 31-4379507 02 X Χ X 0 (B)

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

Schedule A (Form 990 or 990-EZ) 2012

(C)

(D)

(E)

Schedule A (Form 990 or 990-EZ) 2012 Page 2

Par	Support Schedule for Or (Complete only if you check Part III. If the organization	ked the box or	n line 5, 7, or 8	3 of Part I or if	the organizat	tion failed to qu	
Sec	tion A. Public Support	ame to quamy		<u> </u>	, p. 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6		
	ndar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	<b>(e)</b> 2012	(f) Total
ou.o.	raar your (er noodr your boginning my				, ,		.,
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 (f).						
6	Public support. Subtract line 5 from line 4.						
	tion B. Total Support	(a) 2009	(b) 2000	(a) 2010	(4) 2011	(a) 2012	(f) Total
_	ndar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	<b>(e)</b> 2012	(f) Total
7 8	Amounts from line 4 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. (	,				12	
13	First five years. If the Form 990 is organization, check this box and stop here						
	tion C. Computation of Public Sup	•		4.4 1 (0)			
14	Public support percentage for 2012 (I					14	<u>%</u> %
15	Public support percentage from 2011 331/3% support test - 2012. If the					15 or mo	
ıva	this box and <b>stop here</b> . The organizat						re, check
h	331/3% support test - 2011. If the			-			or more
	check this box and <b>stop here.</b> The org	_					
17a	10%-facts-and-circumstances test -	•					
	10% or more, and if the organization						
	Part IV how the organization meets					-	-
	organization			•	•		▶ □
b	10%-facts-and-circumstances test -						and line
	15 is 10% or more, and if the org		-				
	Explain in Part IV how the organizat						-
18	supported organization						▶□
	inatrustiana						

Schedule A (Form 990 or 990-EZ) 2012

Part II

Schedule A (Form 990 or 990-EZ) 2012 Page **3** 

#### 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.)

_	<u> </u>	<u> </u>			<u>'</u>		
	tion A. Public Support		42000	( ) 0040	( N 0044	( ) 0040	(O.T.)
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	<b>(e)</b> 2012	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						-
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						<u> </u>
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						<u> </u>
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7 a	Amounts included on lines 1, 2, 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.)						<u>I</u>
Sec	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	<b>(e)</b> 2012	(f) Total
9	Amounts from line 6						
10 a	Gross income from interest, dividends,						
	payments received on securities loans, rents, royalties and income from similar						
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly						
12	Other income. Do not include gain or						
12	loss from the sale of capital assets						
	(Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,	,					
-	and 12.)						
14	First five years. If the Form 990 is for	the organization	n's first, second	third, fourth. or	fifth tax vear	as a section 501	
	organization, check this box and <b>stop here</b> .	ŭ	·		•		` ` ` `
Sec	tion C. Computation of Public Sup						
15	Public support percentage for 2012 (line 8,			mn (f))		15	%
16	Public support percentage from 2011 Sche					16	%
	tion D. Computation of Investmen					- 1	
17	Investment income percentage for 2012 (lir			3, column (f))		17	%
18	Investment income percentage from 2011					18	%
	331/3% support tests - 2012. If the org						
. J a	17 is not more than 331/3%, check thi						. $\square$
h	331/3% support tests - 2011. If the orga	_		•			
J	line 18 is not more than 331/3%, check						
20	<b>Private foundation.</b> If the organization of		•	•	. ,		<del></del>
				,	,		

JSA 2E1221 1.000 Schedule A (Form 990 or 990-EZ) 2012

Schedule A (Form 990 or 990-EZ) 2012 Page 4

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

# Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No. 1545-0047

Employer identification number

Name of the organization		Employer identification number							
GRAHAM GUND GALLERY	$\mathcal{C}$								
		46-3140140							
Organization type (check o	nization type (check one):								
Filers of:	Section:								
Form 990 or 990-EZ	X 501(c)(3 ) (enter number) organization								
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private	e foundation							
	527 political organization								
Form 990-PF	501(c)(3) exempt private foundation								
	4947(a)(1) nonexempt charitable trust treated as a private fo	4947(a)(1) nonexempt charitable trust treated as a private foundation							
	501(c)(3) taxable private foundation								
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5 y one contributor. Complete Parts I and II.	000 or more (in money or							
Special Rules									
under sections 50	(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % sup 19(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, duri \$5,000 or <b>(2)</b> 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) and II.	ng the year, a contribution of							
during the year, to	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received to tall contributions of more than \$1,000 for use <i>exclusively</i> for religious, charposes, or the prevention of cruelty to children or animals. Complete Part	naritable, scientific, literary,							
during the year, c not total to more year for an <i>exclus</i>	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received to ontributions for use <i>exclusively</i> for religious, charitable, etc., purposes, be than \$1,000. If this box is checked, enter here the total contributions that <i>ively</i> religious, charitable, etc., purpose. Do not complete any of the parts ganization because it received nonexclusively religious, charitable, etc., coear	ut these contributions did t were received during the unless the <b>General Rule</b> ontributions of \$5,000 or							
990-EZ, or 990-PF), but it m	at is not covered by the General Rule and/or the Special Rules does not ust answer "No" on Part IV, line 2 of its Form 990; or check the box on 0-PF, to certify that it does not meet the filing requirements of Schedule B	line H of its Form 990-EZ or on							

JSA

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Employer identification number 46-3140140

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1 _		\$29,771.	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
2_		\$5,000.	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
3 _		\$25,000.	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
4 _			Person X		
		\$30,000.	Payroll Noncash  (Complete Part II if there is a noncash contribution.)		
(a) No.	(b) Name, address, and ZIP + 4	\$30,000.  (c)  Total contributions	Noncash (Complete Part II if there is		
	(b) Name, address, and ZIP + 4	(c)	Noncash (Complete Part II if there is a noncash contribution.)  (d)		
No.	(b) Name, address, and ZIP + 4  (b) Name, address, and ZIP + 4	(c) Total contributions	Noncash  (Complete Part II if there is a noncash contribution.)  (d) Type of contribution  Person Payroll Noncash  (Complete Part II if there is		

Employer identification number 46-3140140

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7_		\$37,500.	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8_		\$5,000.	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$10,000.	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
No.		Total contributions	Person X Payroll Noncash (Complete Part II if there is
No	Name, address, and ZIP + 4	\$ 5 , 000 . (c)	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
No	Name, address, and ZIP + 4	\$5,000.  (c) Total contributions	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)  (d) Type of contribution  Person Payroll Noncash  (Complete Part II if there is

Employer identification number 46-3140140

Part I	<b>Contributors</b>	(see instructions).	. Use duplicate co	pies of Part I if a	dditional space is needed.
--------	---------------------	---------------------	--------------------	---------------------	----------------------------

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
_ 13 _		\$519,626.	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
_ 14 _		\$10,000.	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Employer identification number

46-3140140

Part II	Noncash Property	(see instructions	) Use dunlicate	copies of Part II if	additional space is needed.
alli	140116a3111110pcity		1. Osc auplicate	copics of fact if it	additional space is neceded.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	PUBLICLY TRADED SECURITIES		
		\$\$.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		  \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		  \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Employer identification number

46-3140140

	For organizations completing Part III, e contributions of \$1,000 or less for the	e year. (Enter this inf	ormation once. Se	charitable, etc., ee instructions.) ►\$			
(a) No. from Part I	Use duplicate copies of Part III if addition (b) Purpose of gift	(c) Use		(d) Description of how gift is held			
		(e) Transf	er of gift				
	Transferee's name, address, a	nd ZIP + 4	Relatio	nship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
	(e) Transfer of gift						
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
		(e) Transf	er of gift				
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
		(e) Transf					
	Transferee's name, address, at	nd ZIP + 4	Relatio	nship of transferor to transferee			

Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry.

# SCHEDULE D (Form 990)

# **Supplemental Financial Statements**

2012

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ► 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.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Nam	e of the organization			Employer identification number
GRA	AHAM GUND GALLERY			46-3140140
Pa	Organizations Maintaining Donor Advorganization answered "Yes" to Form 9		Similar Funds o	r Accounts. Complete if the
		(a) Donor advi	sed 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	t the assets held in	n donor advised
	funds are the organization's property, subject to the	e organization's exclusi	ve legal control?	Yes No
6	Did the organization inform all grantees, donors, a		•	
	only for charitable purposes and not for the benefit			
Do	conferring impermissible private benefit? rt II Conservation Easements. Complete if	the organization on	word "Voo" to E	Form 000 Port IV line 7
1-a	rt II Conservation Easements. Complete if Purpose(s) of conservation easements held by the			om 990, Part IV, line 7.
•				of an historically inconstant land and
	Preservation of land for public use (e.g., recr	eation or education)		of an historically important land area
	Protection of natural habitat		Preservation	of a certified historic structure
2	Preservation of open space Complete lines 2a through 2d if the organization heasement on the last day of the tax year.	eld a qualified conserv	ation contribution i	n the form of a conservation
	easement on the last day of the tax year.			Held at the End of the Tax Year
_	Total number of concernation accoments			
a b	Total number of conservation easements  Total acreage restricted by conservation easement			
C	Number of conservation easements on a certified			
d	Number of conservation easements included in (c			20
u	historic structure listed in the National Register	•		2d
3	Number of conservation easements modified, tran			
•	tax year	iororroa, roioacoa, oxii	ngalonoa, or tormi	nated by the organization daring the
4	Number of states where property subject to conse	rvation easement is loc	ated ▶	
5	Does the organization have a written policy regard			
	violations, and enforcement of the conservation ea	-		-
6	Staff and volunteer hours devoted to monitoring, in	nspecting, and enforcin	ng conservation ea	sements during the year
7	Amount of expenses incurred in monitoring, inspec	cting, and enforcing co	nservation easeme	ents during the year
	<b>S</b>	, , , , , , , , , , , , , , , , , , ,		3 ,
8	Does each conservation easement reported on lin	e 2(d) above satisfy th	e requirements of s	ection 170(h)(4)(B)
	(i) and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports	conservation easemer	nts in its revenue ar	nd expense statement, and
	balance sheet, and include, if applicable, the text of		rganization's finan	cial statements that describes the
	organization's accounting for conservation easeme			
Pa	Organizations Maintaining Collections Complete if the organization answered	s <b>of Art, Historical Tr</b> "Yes" to Form 990,	reasures, or Othe Part IV, line 8.	er Similar Assets.
1a	If the organization elected, as permitted under S works of art, historical treasures, or other simil public service, provide, in Part XIII, the text of the form	FAS 116 (ASC 958), rar assets held for pul	not to report in its plic exhibition, edu	revenue statement and balance sheet ucation, or research in furtherance of scribes these items
b	If the organization elected, as permitted under			
	works of art, historical treasures, or other simil- public service, provide the following amounts relat	ar assets held for puling to these items:	olic exhibition, ed	ucation, or research in furtherance of
	(i) Revenues included in Form 990, Part VIII, line			
	(ii) Assets included in Form 990, Part X			<b></b> ▶ \$
2	If the organization received or held works of a			<u> </u>
	following amounts required to be reported under S	FAS 116 (ASC 958) re	lating to these item	ns:
a	Revenues included in Form 990, Part VIII, line 1			
_b	Assets included in Form 990, Part X			• • • • • • • • • • • • • • • • • • •

Schedule D (Form 990) 2012

Schedule D (Form 990) 2012 Page **2** 

Par	t III Organizations Maintaining Coll	ections of	f Art, Hi	storical	Treasu	res,	or Ot	her Similar	Asse	ts (con	tinue	∍d)_
3	Using the organization's acquisition, access collection items (check all that apply):	ssion, and c	other reco	ords, check	c any o	f the	follow	ing that are	a signi	ificant us	se of	its
а	X Public exhibition		d	Loan	or excha	ange p	progran	ns				
b	X Scholarly research		е									
С	X Preservation for future generations											
4	Provide a description of the organization's	collections	and exp	lain how t	hev fur	ther	the ord	anization's e	xempt	purpose	in F	Part
	XIII.				,			,				
5	During the year, did the organization solicit	or receive d	lonations	of art, histo	orical tr	easur	es. or d	other similar				
•	assets to be sold to raise funds rather than t								Г	Yes	X	No
Par	t IV Escrow and Custodial Arrange											
	line 9, or reported an amount on				jai ii Lati	.0 0		04 100 10	. 0		u. t	,
	с с, сторенов висемнович		, ,									
1a	Is the organization an agent, trustee, custod	lian or other	r intermed	diary for co	ntributio	ons o	r other	assets not				
	included on Form 990, Part X?			-						Yes		No
b	If "Yes," explain the arrangement in Part XIII	and comple	ete the fo	llowing tab	ole:				• • -	00		
					[			Amo	unt			
С	Beginning balance					1c		70				
	Additions during the year											
	Distributions during the year											
f	Ending balance											
	Did the organization include an amount on l	Form 990 F	Part X line	217	(	•••				Yes		No
-u h	If "Yes," explain the arrangement in Part XIII	Check her	re if the e	xnlanation	has he	en nro	ovided i	in Part XIII			$\Box$	110
Par												—
ı aı	•	irrent year		ior year	(c) Tw			(d) Three years		(e) Four y	ears b	ack
1a	Beginning of year balance	mont your	(5) 1 1	ioi youi	(0) 1111	o yourc	Duoit	(a) Times years	Buok	(0) 1 001 )	0010 0	
	Contributions								-			
	Net investment earnings, gains,											—
·	and losses											
Ч	Grants or scholarships								$\rightarrow$			—
	Other expenditures for facilities								-+			—
C	and programs											
	Administrative expenses								$\longrightarrow$			
	End of year balance								$\longrightarrow$			
g				- /lin - 4 -		/-\\ I						
	Provide the estimated percentage of the cur			e (line 1g,	column	(a)) r	ieid as:	1				
a	Board designated or quasi-endowment		_%									
D	Permanent endowment ▶ %											
С	Temporarily restricted endowment ▶	%	0.00/									
32	The percentages in lines 2a, 2b, and 2c sho	-		otion that	مدم امما	ام م ما	ماممام	internal for the				
Ja	Are there endowment funds not in the poss	ession of tr	ie organiz	ation that	are nei	u anu	aumin	iisterea for the		V		Na.
	organization by:									3a(i)	es	No
	(i) unrelated organizations											
h	(ii) related organizations									3a(ii)		
-	If "Yes" to 3a(ii), are the related organization									3b		
4	Describe in Part XIII the intended uses of the											
Par	t VI Land, Buildings, and Equipment											
	Description of property	(a) Cost or (invest		<b>(b)</b> Cost o	or other ba ther)	sis		umulated eciation	(d)	<b>)</b> Book valu	е	
4 ~	Land	(1117631		- (0			асріс	5.3.011				
_	Land											
b	Buildings			1		+						
_	Leasehold improvements			1		_						
d	Equipment					_						
	Other	1000-15-	n 000 D	4 V1	o (D) "	2 424	a) )					
ı ota	I. Add lines 1a through 1e. (Column (d) mus	ι equal rorn	ıı 990, Pal	ιλ, columi	ı (🖒), IIN	e 10(	U).)	🗩 🗆				

Schedule D (Form 990) 2012

Schedule D (Form 990) 2012 Page **3** 

Part VII	Investments - Other Securities. See F	Form 990, Part X, Iir	ne 12.	
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valua Cost or end-of-year mar	
(1) Financi	al derivatives			
	-held equity interests			
<u>(A)</u>				
<u>(B)</u>				
(C)				
(D)		_		
<u>(E)</u> (F)				
(G)				
(H)				
<u>`</u> (l)				
	nn (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments - Program Related. See	Form 990, Part X, lir	ne 13.	
	(a) Description of investment type	(b) Book value	(c) Method of valua Cost or end-of-year mar	
(1)				
(2)				
(3)				
(4)				
(5) (6)				
(7)				
(8)				
(9)				
(10)				
Total. (Colum	n (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets. See Form 990, Part X,	line 15.		
	(a	) Description		(b) Book value
(1)				
(2)				
(3)				
(4) (5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Col	umn (b) must equal Form 990, Part X, col. (B)	line 15.)		
Part X	Other Liabilities. See Form 990, Part	X, line 25.		
1.	(a) Description of liability	(b) Book value	ue	
	ral income taxes			
(2)				
(3)				
(4)				
(5)				
<u>(6)</u> (7)				
(8)				
(9)				
(10)				
(11)				
	mn (b) must equal Form 990, Part X, col. (B) line 25.	) ▶		
	ASC 740) Footnote. In Part XIII, provide the text		organization's financial statements that i	reports the organization's

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

JSA 2E1270 1.000 GRAHAM GUND GALLERY 46-3140140

Schedu	le D (Form 990) 2012		Page <b>4</b>
Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return	n	
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments 2a		
b	Donated services and use of facilities 2b		
С	Recoveries of prior year grants 2c		
d	Other (Describe in Part XIII.)	1	
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
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	
Part		_	
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities 2a		
b	Prior year adjustments 2b		
С	Other losses 2c		
d	Other (Describe in Part XIII.)  Add lines 3a through 3d		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts 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		
b	Other (Describe in Part XIII.)	1	
С	Add lines 4a and 4h	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	
Part	XIII Supplemental Information		
Comp	lete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part I', line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to pro		
SE	E PAGE 5		

Schedule D (Form 990) 2012

Part XIII Supplemental Information (continued)

FINANCIAL STATEMENTS FOOTNOTE REGARDING ART COLLECTION,

PART III, LINE 1A:

THE FOLLOWING FOOTNOTE IS INCLUDED IN THE CONSOLIDATED FINANCIAL

STATEMENTS:

COLLECTIONS AND WORKS OF ART - COLLECTIONS ARE NOT CAPITALIZED UNDER THE PROVISIONS OF ASC 958-605, REVENUE ROCOGNITION - CONTRIBUTIONS RECEIVED. ALL WORKS OF ART AND COLLECTIONS ARE HELD FOR PUBLIC EXHIBITION, EDUCATION, OR RESEARCH; ARE PROTECTED, KEPT UNENCUMBERED, CARED FOR AND PRESERVED; AND ARE SUBJECT TO POLICIES GOVERNING THEIR USE. PRIOR TO ASC 958-605 ADOPTION, THE COLLEGE (KENYON COLLEGE, A RELATED SECTION 501(C)(3) EDUCATIONAL INSTITUTION AND SOLE MEMBER OF THE GALLERY) DID CAPITALIZE WORKS OF ART AND COLLECTIONS. AT JUNE 30, 2013 AND 2012, THE NET BOOK VALUE OF THESE ITEMS IS \$1,862,696 AND IS REFLECTED IN THE EQUIPMENT SECTION OF THE CONSOLIDATED STATEMENTS OF FINANCIAL POSITION.

DESCRIPTION OF ART COLLECTION,

PART III, LINE 4:

THE GUND GALLERY PRIORITIZES MODERN AND CONTEMPORARY ART FOR ITS

COLLECTION. A COLLECTION FOCUS ON MODERN AND CONTEMPORARY ART PRESENTS AN

OPPORTUNITY FOR THE GUND GALLERY TO ASSIST KENYON COLLEGE IN UNIQUELY

POSITIONING ITSELF AS A TOP-TIER LIBERAL ARTS COLLEGE IN THE UNITED

STATES. THIS FOCUS ALSO CAPITALIZES ON THE STRENGTHS OF THE COLLECTING

EXPERTISE OF ALUMNI, DONORS, AND FRIENDS OF KENYON COLLEGE. FINALLY, THE

COLLECTION FOCUS PRESENTS OPPORTUNITIES FOR CONTEMPORARY ART TO BE

COMMISSIONED OR GIFTED BY ARTISTS WHO MAY BE AFFILIATED WITH THE

PROGRAMMING OF THE GUND GALLERY THROUGH RESIDENCIES, EXHIBITIONS,

Schedule D (Form 990) 2012

Schedule D (Form 990) 2012 GRAHAM GUND GALLERY 46-3140140 Page **5** 

#### Part XIII Supplemental Information (continued)

VISITING ARTIST TALKS, AND OTHER PROGRAMMATIC FORMATS.

FIN 48 (ASC 740) FOOTNOTE,

PART X, LINE 2:

THE FOLLOWING EXCERPT IS FROM KENYON COLLEGE'S CONSOLIDATED FINANCIAL STATEMENTS WHICH INCLUDE THE GRAHAM GUND GALLERY:

THE INTERNAL REVENUE SERVICE HAS DETERMINED THAT THE COLLEGE (AND ITS AFFILIATES) IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(A) OF THE INTERNAL REVENUE CODE AS A PUBLIC CHARITY DESCRIBED IN SECTION 501(C)(3); ACCORDINGLY, NO PROVISION FOR FEDERAL INCOME TAXES HAS BEEN MADE IN THE CONSOLIDATED FINANCIAL STATEMENTS. THERE WERE NO UNRECOGNIZED TAX BENEFITS AS OF JUNE 30, 2013.

THE COLLEGE'S INCOME TAX RETURNS REMAIN SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE, AS WELL AS VARIOUS STATE AND LOCAL TAXING AUTHORITIES, GENERALLY FOR THREE YEARS.

### **SCHEDULE J** (Form 990)

Department of the Treasury

Internal Revenue Service

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

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

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047 Open to Public

Inspection

Employer identification number Name of the organization GRAHAM GUND GALLERY 46-3140140

Part	Questions Regarding Compensation						
			Yes	No			
1a	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.						
	First-class or charter travel Housing allowance or residence for personal use						
	Travel for companions Payments for business use of personal residence						
	Tax indemnification and gross-up payments Health or social club dues or initiation fees						
	Discretionary spending account  Personal services (e.g., maid, chauffeur, chef)						
h	If any of the haves on line to are checked did the organization follow a written policy regarding payment						
D	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to						
	explain	1b					
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers,						
	directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2					
•	To Post on Pink of any of the fellowing the City of the Company of the control of the company of						
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.						
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.		v			
a	Receive a severance payment or change-of-control payment?		v				
b							
С	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	40					
	in tes to any or lines 44-6, list the persons and provide the applicable amounts for each item in rait in.						
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.						
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any						
•	compensation contingent on the revenues of:						
а	The organization?	5a		Х			
b	Any related organization?	5b		X			
	If "Yes" to line 5a or 5b, describe in Part III.						
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any						
	compensation contingent on the net earnings of:						
а	The organization?	6a		Х			
b	Any related organization?	6b		X			
	If "Yes" to line 6a or 6b, describe in Part III.	Personal services (e.g., maid, chauffeur, chef)  If the organization follow a written policy regarding payment expenses described above? If "No," complete Part III to to reimbursing or allowing expenses incurred by all officers, or, regarding the items checked in line 1a?  Iganization used to establish the compensation of the Ithat apply. Do not check any boxes for methods used by a fethe CEO/Executive Director, but explain in Part III.  Written employment contract  Compensation survey or study  Approval by the board or compensation committee to payment?  Indicate the applicable amounts for each item in Part III.  Indicate the applicable amounts for each ite					
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed						
	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		X			
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject						
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe						
	in Part III	8		X			
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in						
	Regulations section 53.4958-6(c)?	9					

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

Schedule J (Form 990) 2012

GRAHAM GUND GALLERY 46-3140140

Schedule J (Form 990) 2012

### Part II 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 column (D) and (E) amounts for that individual.

		<b>(B)</b> Breakdown	of W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	reported as deferred in prior Form 990
S. GEORGIA NUGENT	(i)	0	(	0	0	0	C	0
1 EX OFFICIO TRUSTEE/PRESIDENT	(ii)	356,466.	(	11,105.	133,438.	41,627.	542,636.	0
	(i)							
2	(ii)							
	(i)							
3	(ii)							
	(i)							
_4	(ii)							
	(i)							
5	(ii)							
	(i)							
6	(ii)							
	(i)							
7	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
11	(ii)							
	(i)							
12	(ii)							
	(i)							
13	(ii)							
	(i)							
14	(ii)							
	(i)			<del> </del>				
15	(ii)							
	(i)			<del> </del>				
16	(ii)							1.1.1/5 200\ 2010

Schedule J (Form 990) 2012

GRAHAM GUND GALLERY 46-3140140

Schedule J (Form 990) 2012

#### Part | Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN,

PART I, LINE 4B:

KENYON COLLEGE, A RELATED SECTION 501(C)(3) ORGANIZATION, PROVIDED S.

GEORGIA NUGENT WITH A CONTRIBUTION OF \$100,000 TO A SECTION 457(F) PLAN

AND A CONTRIBUTION OF \$9,688 TO A SECTION 457(B) PLAN.

#### **SCHEDULE O**

(Form 990 or 990-EZ)

# Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service 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.

Name of the organization Employer identification number
GRAHAM GUND GALLERY 46-3140140

MEMBERS OF THE ORGANIZATION,

PART VI, LINE 6:

THE SOLE MEMBER OF THE GRAHAM GUND GALLERY IS KENYON COLLEGE.

MEMBER'S POWER TO ELECT TRUSTEES,

PART VI, LINE 7A:

AS THE SOLE MEMBER, KENYON COLLEGE HAS THE POWER TO APPOINT ALL OF THE BOARD MEMBERS OF THE GRAHAM GUND GALLERY.

APPROVAL OF DECISIONS OF GOVERNING BODY,

PART VI, LINE 7B:

AS THE SOLE MEMBER, KENYON COLLEGE HAS APPROVAL RIGHTS OVER THE DECISIONS OF THE BOARD OF DIRECTORS OF THE GRAHAM GUND GALLERY.

FORM 990 REVIEW,

PART VI, LINE 11B:

FORM 990 IS REVIEWED BY THE CONTROLLER OF KENYON COLLEGE AND CERTAIN BOARD MEMBERS OF THE GRAHAM GUND GALLERY.

MONITORING AND ENFORCEMENT OF CONFLICT POLICY,

PART VI, LINE 12C:

THE ORGANIZATION'S CONFLICT POLICY IS DISTRIBUTED AT THE FALL MEETING OF

THE BOARD OF TRUSTEES. ANNUALLY, OFFICERS AND TRUSTEES ARE ASKED TO

DISCLOSE CONFLICTS, AND THESE DISCLOSURES ARE MONITORED. IF A CONFLICT

ARISES, THE PERSON IS NOT PERMITTED TO VOTE OR PARTICIPATE IN THE DISCUSSION OF THE PROPOSED TRANSACTION. PEOPLE WHO ARE INDEPENDENT OF THE INDIVIDUAL WITH THE CONFLICT MAKE THE DECISION ON THE TRANSACTION.

AVAILABILITY OF DOCUMENTS,

PART VI, LINE 19:

THE ORGANIZATION DOES NOT GENERALLY MAKE ITS FINANCIAL STATEMENTS, GOVERNING DOCUMENTS, OR CONFLICT POLICY AVAILABLE TO THE PUBLIC.

FORM 990 PROVIDED TO GOVERNING BODY,

PART VI, LINE 11A:

THE ORGANIZATION HAS DISTRIBUTED FORM 990 TO THE FULL BOARD OF TRUSTEES WITH THE EXCEPTION OF DONOR INFORMATION ON SCHEDULE B. BECAUSE OF SCHEDULE B'S PRIVATE AND CONFIDENTIAL NATURE, THE BOARD HAS DELEGATED THE AUTHORITY AND RESPONSIBILITY FOR REVIEWING THAT SCHEDULE TO THE CHAIR OF THE BOARD AND THE CHAIR OF THE AUDIT SUBCOMMITEE OF KENYON COLLEGE, THE SOLE MEMBER OF THE GRAHAM GUND GALLERY. AS SUCH, WE ARE REQUIRED TO ANSWER "NO" TO THE QUESTION ON LINE 11A EVEN THOUGH A COPY OF FORM 990 (WITH REDACTED DONOR INFORMATION ON SCHEDULE B) WAS PROVIDED TO THE TRUSTEES.

DOCUMENT RETENTION AND DESTRUCTION POLICY,

PART VI, LINE 14:

THE FINANCE OFFICE OF KENYON COLLEGE, THE SOLE MEMBER OF THE GRAHAM GUND GALLERY, HAS A DOCUMENT RETENTION AND DESTRUCTION POLICY THAT WAS DEVELOPED AND IMPLEMENTED BY MANAGEMENT. THIS POLICY HAS NOT BEEN

Name of the organization

GRAHAM GUND GALLERY

Employer identification number

46-3140140

APPROVED BY THE BOARD OF TRUSTEES OF THE COLLEGE OR THE BOARDS OF THE COLLEGE'S AFFILIATES. CURRENTLY, A CAMPUS-WIDE COMMITTEE IS INVESTIGATING DOCUMENT RETENTION ISSUES AND IS DEVELOPING A POLICY THAT WILL BE IMPLEMENTED BY THE COLLEGE AND ALL AFFILIATES IN THE NEAR FUTURE.

ATTACHMENT 1

#### FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

THE GALLERY'S VISION IS TO BE AN INNOVATIVE PRODUCER OF CHALLENGING
NEW KNOWLEDGE ABOUT THE VISUAL. ITS PROGRAMS, EXHIBITIONS, AND
PROJECTS WILL:

- EMBODY LIBERAL EDUCATION BY EXERCISING CRITICAL AND CREATIVE
  THINKING APPLIED TO INTER-DISCIPLINARY INVESTIGATION OF THE VISUAL;
- RELATE THE HISTORICAL TO THE CONTEMPORARY BY LINKING TODAY'S ISSUES, IDEAS, AND INNOVATIONS WITH EARLIER HISTORICAL MOMENTS;
- CONNECT THE GLOBAL TO KENYON COLLEGE (AND KENYON COLLEGE TO THE GLOBAL) THROUGH VALUING DIVERSITY AND CULTURAL AWARENESS;
- PROMOTE AN INCLUSIVE DEFINITION OF ART THAT ENGAGES A WIDE RANGE OF VISUAL CULTURES AND VISUALITIES;
- CREATE PARTICIPATORY MULTISENSORY EXPERIENCES; AND
- ENGAGE THE HIGHEST QUALITY WORKS OF ART THROUGH ACTIVE COLLECTING INITIATIVES.

#### SCHEDULE R (Form 990)

Part I

# **Related Organizations and Unrelated Partnerships**

OMB No. 1545-0047
2012

Department of the Treasury Internal Revenue Service ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

 Open to Public Inspection

Name of the organization

GRAHAM GUND GALLERY

46-3140140

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

(a) Name, address, and EIN (if applicable) of disregarded entity		Pr	(b) rimary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct co ent	ntrolling
_(1)								
_(2)								
_(3)								
Part II Identification of Related Tax-Exempt Organizations one or more related tax-exempt organizations during the second	(Complete if the tax year.)	he org	ganization answ	rered "Yes" to Fo	orm 990, Part IV,	line 34 because	it had	
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activ	ity	(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) 512(b)(13) rolled ity?
							Yes	No
(1) KENYON COLLEGE 31-4379507 EATON CENTER GAMBIER, OH 43022	COLLEGE		ОН	501(C)(3)	2	N/A		X
_(2)				301(0)(3)		147.11		
_(3)								
_(4)								
_(5)								
_(6)	-							

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

Schedule R (Form 990) 2012

GRAHAM GUND GALLERY 46-3140140

Schedule R (Form 990) 2012

Part	Identification of Relate because it had one or r	ed Organizations nore related orga	Taxable inizations	as a Partnersh s treated as a pa	<b>ip</b> (Complete if the artnership during the	organization a tax year.)	nswered "Yes"	to F	orm	990, Part IV, I	ine 3	34			
	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(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	Disprop	h) portionate ations?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)			General or managing		(k) Percentage ownership
			country)		360110113 3 12-3 14)			Yes	No		Yes	No			
(1)															
(2)															
(3)															
(4)															
(5)															
(6)															
(7)															

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to 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>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percen- tage ownership	(i) Section 512(b)(13) controlled entity?
								Yes No
<u>(1)</u>								
(2)								
(3)								
(4)								
(5)								
<u>(6)</u>								
<u>(7)</u>								

Schedule R (Form 990) 2012

Schadula P (Form 900) 2012

Scriedule K (F	-01111 990) 2012
Part V	Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)

Not	e. 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 lis	sted in Parts II-IV?				
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		Х
b	Gift, grant, or capital contribution to related organization(s)				1b		Х
С	Gift, grant, or capital contribution from related organization(s)				1c	Х	
d	Loans or loan guarantees to or for related organization(s)				1d		Х
е	Loans or loan guarantees by related organization(s)				1e		Х
f	Dividends from related organization(s)				1f		Х
g	Sale of assets to related organization(s)				1g		X
h	Purchase of assets from related organization(s)				1h		Х
i	Exchange of assets with related organization(s)				1i		Х
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		X
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		X
I	Performance of services or membership or fundraising solicitations for related organization(s)				11		Х
m					1m	X	
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	X	
0	Sharing of paid employees with related organization(s)				10	Х	
р	Reimbursement paid to related organization(s) for expenses				1p		X
q	Reimbursement paid by related organization(s) for expenses				1q		X
r	Other transfer of cash or property to related organization(s)				1r		X
<u>s</u>	Other transfer of cash or property from related organization(s)				1s		X
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete		· · · · · · · · · · · · · · · · · · ·	action thre		3.	
	(a) Name of other organization	(b) Transaction	(c) Amount involved	Method	(d) of dete	erminin	ıg
		type (a-s)		amo	unt invo	olved	
(1)							
<u>(2)</u>							
(0)							
<u>(3)</u>							
(4)							
<u>(5)</u>							
(6)							

Page 3

Schedule R (Form 990) 2012

### 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.

	from tax under section 512-514)	organiz Yes					(Form 1065)	(j) General or managing partner?		1
		163	No		Yes	No	(FORM 1065)	Yes	No	

Schedule R (Form 990) 2012 Page **5** 

# Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).