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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No. 1545-0047

2009

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning 07/01/09, and ending 06/30/10

- B** Check if applicable:
- Address change
 - Name change
 - Initial return
 - Termination
 - Amended return
 - Application pending

Please use IRS label or print or type See Specific Instructions

C Name of organization **ART MUSEUM OF GREATER LAFAYETTE, INC.**

Doing Business As

Number and street (or P O box if mail is not delivered to street address) Room/suite
102 SOUTH 10TH ST

City or town, state or country, and ZIP + 4
LAFAYETTE IN 47905

F Name and address of principal officer
ELIZABETH LOCKREY
102 SOUTH 10TH STREET
LAFAYETTE IN 47905

D Employer identification number
35-0828754

E Telephone number
765-742-1128

G Gross receipts \$ **435,718**

H(a) Is this a group return for affiliates? Yes No
H(b) Are all affiliates included? Yes No
If "No," attach a list (see instructions)

I Tax-exempt status 501(c) (3) ◀ (insert no) 4947(a)(1) or 527

J Website: ▶ **WWW.GLMART.ORG**

H(c) Group exemption number ▶

K Type of organization Corporation Trust Association Other ▶

L Year of formation **1952** **M** State of legal domicile **IN**

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities TO PROVIDE A CENTER OF ART IN LAFAYETTE, INDIANA TO PROMOTE, FOSTER, AND ENCOURAGE INTEREST IN ART IN THE COMMUNITY THROUGH ART COLLECTIONS, EXHIBITIONS, LECTURES, INSTRUCTION, AND SOCIAL ACTIVITIES.			
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets			
	3	Number of voting members of the governing body (Part VI, line 1a)	3	19
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	18
	5	Total number of employees (Part V, line 2a)	5	6
	6	Total number of volunteers (estimate if necessary)	6	105
	7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	
7b	Net unrelated business taxable income from Form 990-T, line 34	7b	0	
Revenue			Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)	392,903	244,465
	9	Program service revenue (Part VIII, line 2g)	147,645	40,426
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	11,383	5,243
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-5,820	112,350
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	546,111	402,484	
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		684
	14	Benefits paid to or for members (Part IX, column (A), line 4)		
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	126,168	164,262
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
	17	Other expenses (Part IX, column (A), lines 11b-11d, 11f-24f)	376,344	208,158
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	502,512	373,104
19	Revenue less expenses Subtract line 18 from line 12	43,599	29,380	
Net Assets or Fund Balances			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	994,183	707,050
	21	Total liabilities (Part X, line 26)	113,821	34,071
22	Net assets or fund balances Subtract line 21 from line 20	880,362	672,979	

Part II Signature Block

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

Sign Here
 Signature of officer: *Elizabeth Lockrey* Date: 4/18/11
 Type or print name and title: Elizabeth Lockrey, President

Paid Preparer's Use Only

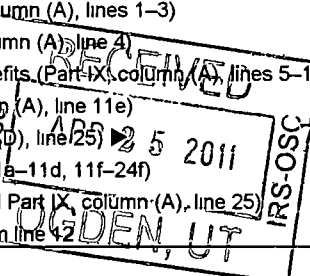
Preparer's signature: *[Signature]* Date: 03/04/11 Check if self-employed: Preparer's identifying number (see instructions): P00238604

Firm's name (or yours if self-employed), address, and ZIP + 4: THUTH THOMPSON LLP
PO BOX 970
LAFAYETTE, IN 47902-0970

EIN ▶ 35-2055043
 Phone no ▶ 765-428-5000

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

SCANNED MAY 17 2011



Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission

TO PROVIDE A CENTER OF ART IN LAFAYETTE, INDIANA TO PROMOTE, FOSTER, AND ENCOURAGE INTEREST IN ART IN THE COMMUNITY THROUGH ART COLLECTIONS, EXHIBITIONS, LECTURES, INSTRUCTION, AND SOCIAL ACTIVITIES.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

 Yes No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

 Yes No

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses

Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 93,413 including grants of \$ 684) (Revenue \$ 40,426)
 ACQUISITION, EXHIBITIONS, PRESERVATION OF WORKS OF ART, AND ART EDUCATION THROUGH VARIOUS CLASSES AND PROGRAMS

4b (Code) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O)

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

4e Total program service expenses ► 93,413

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	X	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	X	
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	X	
	<ul style="list-style-type: none"> • Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI • Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII • Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII • Did the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX • Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X • Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X 		
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII		X
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional		
		Yes	No
12A			X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I		X
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, Part II		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, Part III		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		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		X
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		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		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		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	X	
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	X	
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		X
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		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		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U S Information Returns Enter -0- if not applicable		
1a	10		
1b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable		
1b	0		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2a	6		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
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 account)?		X
4b	If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	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?		
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
7g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
7h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
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 organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?		
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter		
11a	Gross income from members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		

N/A to #7-#12

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.

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body		
1b	Enter the number of voting members that are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
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?		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?		X
6	Does the organization have members or stockholders?	X	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	X	
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
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		X

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

		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	X	
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		X
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done		X
13	Does the organization have a written whistleblower policy?		X
14	Does the organization have a written document retention and destruction policy?		X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ► **IN**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
 Own website Another's website Upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► **KENDALL SMITH II** **102 S 10TH STREET**
LAFAYETTE **IN 47905**

765-742-1128

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if the organization did not compensate any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
KENDALL SMITH II EXECUTIVE DIRECTOR	40.00	X		X			51,923	0	0	
ELIZABETH LOCKREY PRESIDENT	2.00	X		X			0	0	0	
TOM ADLER VICE PRESIDENT	2.00	X		X			0	0	0	
JOHN SHIPLEY TREASURER	2.00	X		X			0	0	0	
ELIZABETH DOVERBERGER SECRETARY	2.00	X		X			0	0	0	
SUSAN CHAVERS DIRECTOR	1.00	X					0	0	0	
THOMAS GALL DIRECTOR	1.00	X					0	0	0	
SUE HOLDER-PRICE DIRECTOR	1.00	X					0	0	0	
DEBRA HOPPE DIRECTOR	1.00	X					0	0	0	
LOWELL HORWEDEL DIRECTOR	1.00	X					0	0	0	
BRUNO MOSER DIRECTOR	1.00	X					0	0	0	
CAROLK PURDY DIRECTOR	1.00	X					0	0	0	
KENDALL PURPURA DIRECTOR	1.00	X					0	0	0	
MARIANNE ROSE DIRECTOR	1.00	X					0	0	0	
SCOTT SCHAFFER DIRECTOR	1.00	X					0	0	0	
RENEE THOMAS DIRECTOR	1.00	X					0	0	0	
KATHY TROUT DIRECTOR	1.00	X					0	0	0	

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
RUTH WUKASCH DIRECTOR	1.00	X						0	0	0
SHARON THEOBALD EX-OFFICIO	1.00	X						0	0	0
1b Total								51,923		

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **0**

- 3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
- 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		X
4		X
5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

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

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **0**

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a Federated campaigns	1a					
	b Membership dues	1b	60,078				
	c Fundraising events	1c	1,665				
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	182,722				
	g Noncash contributions included in lines 1a-1f		\$ 23,030				
	h Total. Add lines 1a-1f		244,465				
Program Service Revenue	Busn. Code						
	2a EDUCATION INCOME	611600	40,426	40,426			
	b						
	c						
	d						
	e						
	g Total. Add lines 2a-2f		40,426				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			5,243		5,243	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross Rents	(i) Real	(ii) Personal				
		b Less rental exps					
		c Rental inc or (loss)					
	d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b Less cost or other basis & sales exps					
		c Gain or (loss)					
	d Net gain or (loss)						
	8a Gross income from fundraising events (not including \$ 1,665 of contributions reported on line 1c) See Part IV, line 18	a	127,060				
		b Less direct expenses	b	20,845			
		c Net income or (loss) from fundraising events			106,215		106,215
	9a Gross income from gaming activities See Part IV, line 19	a					
b Less direct expenses		b					
c Net income or (loss) from gaming activities							
10a Gross sales of inventory, less returns and allowances	a	15,700					
	b Less cost of goods sold	b	12,389				
	c Net income or (loss) from sales of inventory			3,311	3,311		
Miscellaneous Revenue		Busn. Code					
11a OTHER INCOME- ART LEAGUE		900099	3,002	3,002			
b OTHER INCOME: MISCELLANEOUS IN		900099	-178	-178			
c							
d All other revenue							
e Total. Add lines 11a-11d			2,824				
12 Total Revenue. See instructions			402,484	46,561	0	111,458	

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) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	684	684		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	52,467		52,467	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	100,171	73,183	25,863	1,125
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	11,624	4,116	7,508	
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	2,750		2,750	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion	4,907		4,907	
13 Office expenses	16,523		16,523	
14 Information technology	2,779		2,779	
15 Royalties				
16 Occupancy	31,874		31,874	
17 Travel	475		475	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	4,710		4,710	
20 Interest	3,434		3,434	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	16,275		16,275	
23 Insurance	14,560	7,280	7,280	
24 Other expenses. Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a EVENT EXPENSES	68,004			68,004
b GRANT EXPENSES	25,728		25,728	
c PERMANENT COLLECTION EXPENSES	5,715	5,715		
d DUES, FEES & OTHER EXPENSES	4,209		4,209	
e FUNDRAISING EXPENSES: DOG	1,688			1,688
f All other expenses	4,527	2,435	248	1,844
25 Total functional expenses. Add lines 1 through 24f	373,104	93,413	207,030	72,661
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest bearing	234,271	1	24,580
	2	Savings and temporary cash investments		2	192,047
	3	Pledges and grants receivable, net		3	55,959
	4	Accounts receivable, net	25,073	4	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	703	8	
	9	Prepaid expenses and deferred charges	4,833	9	5,834
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 1,039,881		
	b	Less accumulated depreciation	10b 714,969	10c 341,188	324,912
	11	Investments—publicly traded securities	210,996	11	102,394
	12	Investments—other securities See Part IV, line 11	170,605	12	
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	6,514	15	1,324
16	Total assets. Add lines 1 through 15 (must equal line 34)	994,183	16	707,050	
Liabilities	17	Accounts payable and accrued expenses	44,962	17	9,649
	18	Grants payable		18	
	19	Deferred revenue	20,259	19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	48,600	23	24,422
	24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities Complete Part X of Schedule D		25		
26	Total liabilities. Add lines 17 through 25	113,821	26	34,071	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	680,629	27	489,240
	28	Temporarily restricted net assets	151,386	28	125,885
	29	Permanently restricted net assets	48,347	29	57,854
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	880,362	33	672,979	
34	Total liabilities and net assets/fund balances	994,183	34	707,050	

Part XI Financial Statements and Reporting

1 Accounting method used to prepare the Form 990 Cash Accrual Other _____

If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

b Were the organization's financial statements audited by an independent accountant?

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both

Separate basis Consolidated basis Both consolidated and separate basis

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a	X	
2b		X
2c	X	
3a		X
3b		

Form 990 (2009)

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2009

Open to Public Inspection

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.

Department of the Treasury
Internal Revenue Service

Name of the organization ART MUSEUM OF GREATER LAFAYETTE, INC.	Employer identification number 35-0828754
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Part I Reason for Public Charity Status (All organizations must complete this part) See instructions.

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

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)
- 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v)
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)
- 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)
- 9 An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)
- 10 An organization organized and operated exclusively to test for public safety See section 509(a)(4).
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h
 - a Type I b Type II c Type III—Functionally integrated d Type III—Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 - (ii) A family member of a person described in (i) above?
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the supported organization(s)

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

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

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

Schedule A (Form 990 or 990-EZ) 2009

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
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						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	%
16a 33 1/3 % support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 33 1/3 % support test—2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

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)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	173,744	421,010	83,142	392,903	244,465	1,315,264
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	22,384	33,473	200,238	158,435	56,126	470,656
3 Gross receipts from activities that are not an unrelated trade or business under section 513				76,057	127,060	203,117
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	196,128	454,483	283,380	627,395	427,651	1,989,037
7a Amounts included on lines 1, 2, and 3 received from disqualified persons					4,666	4,666
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						
c Add lines 7a and 7b					4,666	4,666
8 Public support (Subtract line 7c from line 6)						1,984,371

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	196,128	454,483	283,380	627,395	427,651	1,989,037
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources			18,047	11,383	5,243	34,673
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b			18,047	11,383	5,243	34,673
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on					0	
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)			4,828	8,693	2,824	16,345
13 Total support. (Add lines 9, 10c, 11, and 12)	196,128	454,483	306,255	647,471	435,718	2,040,055
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	97.27%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	98.28%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	2%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	1%

- 19a** 33 1/3 % support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization
- b** 33 1/3 % support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization
- 20** Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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

PART III, LINE 12 - OTHER INCOME DETAIL

\$ 16,345

**SCHEDULE D
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization ART MUSEUM OF GREATER LAFAYETTE, INC.	Employer identification number 35-0828754
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Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

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

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

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

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

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

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

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

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

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

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

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

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

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

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

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

(i) Revenues included in Form 990, Part VIII, line 1	▶ \$ <u> </u>
(ii) Assets included in Form 990, Part X	▶ \$ <u> </u>

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

a Revenues included in Form 990, Part VIII, line 1	▶ \$ <u> </u>
b Assets included in Form 990, Part X	▶ \$ <u> </u>

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

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

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

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

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

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

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

b If "Yes," explain the arrangement in Part XIV and complete the following table

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

	Amount
1c	
1d	
1e	
1f	

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

b If "Yes," explain the arrangement in Part XIV

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	68,782	46,982			
b Contributions		20,435			
c Net investment earnings, gains, and losses	9,507	1,365			
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	78,289	68,782			

2 Provide the estimated percentage of the year end balance held as

- a Board designated or quasi-endowment ▶ _____ %
- b Permanent endowment ▶ 74.00 %
- c Term endowment ▶ 26.00 %

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

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

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

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		7,203		7,203
b Buildings		1,032,678	714,969	317,709
c Leasehold improvements				
d Equipment				
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				324,912

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 through 8	9	
10	Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9	10	

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

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		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	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:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	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 XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

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		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	
e	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:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18)	5	

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2; Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

PART III, LINE 1A - TERMS FOR NOT REPORTING ASSETS PER SFAS 116
ART COLLECTION- THE COLLECTIONS, WHICH WERE ACQUIRED THROUGH PURCHASES AND
DONATIONS SINCE THE MUSEUM'S INCEPTION, ARE NOT RECOGNIZED AS ASSETS ON THE
STATEMENT OF FINANCIAL POSITION. PURCHASES OF COLLECTION ITEMS ARE RECORDED
AS DECREASES IN UNRESTRICTED NET ASSETS IN THE YEAR IN WHICH THE ITEMS ARE
ACQUIRED OR AS TEMPORARILY OR PERMANENTLY RESTRICTED NET ASSETS IF THE
ASSETS USED TO PURCHASE THE ITEMS ARE RESTRICTED BY DONORS. CONTRIBUTED

Part XIV | Supplemental Information (continued)

COLLECTION ITEMS ARE NOT REFLECTED ON THE FINANCIAL STATEMENTS. PROCEEDS FROM DEACQUISITION OR INSURANCE RECOVERIES ARE REFLECTED AS INCREASES IN APPROPRIATE NET ASSET CLASSES.

PART X - LIABILITY UNDER FIN 48 FOOTNOTE

ON JULY 1, 2009 THE ORGANIZATION ADOPTED THE RECOGNITION REQUIREMENTS FOR UNCERTAIN TAX POSITIONS AS REQUIRED BY GENERALLY ACCEPTED ACCOUNTING PRINCIPLES, WITH NO CUMULATIVE EFFECT ADJUSTMENT REQUIRED. INCOME TAX BENEFITS ARE RECOGNIZED FOR INCOME TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN, ONLY WHEN IT IS DETERMINED THAT THE INCOME TAX POSITIONS WILL MORE-LIKELY-THAN-NOT BE SUSTAINED UPON EXAMINATION BY TAXING AUTHORITIES. THE ORGANIZATION HAS ANALYZED TAX POSITIONS TAKEN FOR FILING WITH THE INTERNAL REVENUE SERVICE AND ALL STATE JURISDICTIONS WHERE IT OPERATES. THE ORGANIZATION BELIEVES THAT INCOME TAX FILING POSITIONS WILL BE SUSTAINED UPON EXAMINATION AND DOES NOT ANTICIPATE ANY ADJUSTMENTS THAT WOULD RESULT IN A MATERIAL ADVERSE AFFECT ON THE ORGANIZATION'S FINANCIAL CONDITION, RESULTS OF OPERATIONS OR CASH FLOWS. ACCORDINGLY, THE ORGANIZATION HAS NOT RECORDED ANY RESERVES, OR RELATED ACCRUALS FOR INTEREST AND PENALTIES FOR UNCERTAIN INCOME TAX POSITIONS AT JUNE 30, 2010.

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
		<u>OTHER FUNDRAISI</u> (event type)	<u>HEART OF ART FU</u> (event type)	<u>2</u> (total number)	(add col (a) through col (c))	
Revenue	1	Gross receipts	57,201	34,753	36,771	128,725
	2	Less Charitable contributions			1,665	1,665
	3	Gross revenue (line 1 minus line 2)	57,201	34,753	35,106	127,060
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs		5,611		5,611
	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses			15,234	15,234
	10	Direct expense summary Add lines 4 through 9 in column (d)				20,845
11	Net income summary Combine line 3, column (d), and line 10				106,215	

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))	
Revenue	1	Gross revenue				
Direct Expenses	2	Cash prizes				
	3	Noncash prizes				
	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	<input type="checkbox"/> Yes % <input type="checkbox"/> No	<input type="checkbox"/> Yes % <input type="checkbox"/> No	<input type="checkbox"/> Yes % <input type="checkbox"/> No	
	7	Direct expense summary Add lines 2 through 5 in column (d)				
	8	Net gaming income summary Combine line 1, column d, and line 7				

	Yes	No
9 Enter the state(s) in which the organization operates gaming activities		
a Is the organization licensed to operate gaming activities in each of these states?	9a	
b If "No," Explain		
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a	
b If "Yes," Explain		
11 Does the organization operate gaming activities with nonmembers?	11	
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	12	

13 Indicate the percentage of gaming activity operated in

- a The organization's facility
- b An outside facility

13a		%
13b		%

14 Provide the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?

- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$
- c If "Yes," enter name and address of the third party

Name ▶

Address ▶

16 Gaming manager information

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

- Director/officer Employee Independent contractor

17 Mandatory distributions

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?
- b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$

Yes No

15a

17a

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No 1545-0047

2009

**Open To Public
Inspection**

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

Department of the Treasury
Internal Revenue Service

Name of the organization **ART MUSEUM OF GREATER LAFAYETTE, INC.** Employer identification number **35-0828754**

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art—Works of art	X	1	9,720	FAIR MARKET VALUE
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods	X		9,904	FAIR MARKET VALUE
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded				
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (AD SUPPLIES)	X	6	450	FAIR MARKET VALUE
26 Other ▶ (MISC EQUIP)	X	5	2,956	FAIR MARKET VALUE
27 Other ▶ ()				
28 Other ▶ ()				
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement			29	0

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

	Yes	No
30a		X
31		X
32a		X

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

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

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

b If "Yes," describe in Part II

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

Part II **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information

SCHEDULE O
(Form 990)**Supplemental Information to Form 990**

OMB No 1545-0047

2009Open to Public
InspectionDepartment of the Treasury
Internal Revenue ServiceComplete to provide information for responses to specific questions on
Form 990 or to provide any additional information.

▶ Attach to Form 990.

Name of the organization **ART MUSEUM OF GREATER
LAFAYETTE, INC.**Employer identification number
35-0828754

FORM 990, PART VI, LINE 6 - CLASSES OF MEMBERS OR STOCKHOLDERS

ANY PERSON MAY BECOME A MEMBER OF THE ASSOCIATION BY PAYING THE ANNUAL DUES OF THE ART MUSEUM OF GREATER LAFAYETTE, INC FOR THE CLASS OF MEMBERSHIP DESIRED, AS THE SAME MAY BE PRESCRIBED FROM TIME TO TIME BY THE BOARD OF DIRECTORS. ALL PERSONS NOW MEMBERS OF THE ASSOCIATION SHALL CONTINUE TO BE MEMBERS SO LONG AS THEY COMPLY WITH SAID REGULATIONS AND PAY SAID REGULAR MEMBERSHIP DUES.

FORM 990, PART VI, LINE 7A - ELECTION OF MEMBERS AND THEIR RIGHTS
MEMBERS OF THE ART MUSEUM OF GREATER LAFAYETTE ELECT THE DIRECTORS.

FORM 990, PART VI, LINE 11A - ORGANIZATION'S PROCESS TO REVIEW FORM 990
RETURN REVIEWED BY BOARD PRIOR TO FILING.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL
THE EXECUTIVE DIRECTOR'S SALARY IS REVIEWED ANNUALLY BY THE PERSONNEL AND
FINANCE COMMITTEE AS WELL AS THE EXECUTIVE COMMITTEE.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
DOCUMENTS AVAILABLE UPON REQUEST.

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

**ART MUSEUM OF GREATER
LAFAYETTE, INC.**

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2009

**Open to Public
Inspection**

Employer identification number
35-0828754

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
LAFAYETTE ART ASSOCIATION FOUNDATIO 102 SOUTH 10TH STREET LAFAYETTE IN 47901 31-1085558	ARTS	IN	501C3	11A	N/A

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

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

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) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity

b Gift, grant, or capital contribution to other organization(s)

c Gift, grant, or capital contribution from other organization(s)

d Loans or loan guarantees to or for other organization(s)

e Loans or loan guarantees by other organization(s)

f Sale of assets to other organization(s)

g Purchase of assets from other organization(s)

h Exchange of assets

i Lease of facilities, equipment, or other assets to other organization(s)

j Lease of facilities, equipment, or other assets from other organization(s)

k Performance of services or membership or fundraising solicitations for other organization(s)

l Performance of services or membership or fundraising solicitations by other organization(s)

m Sharing of facilities, equipment, mailing lists, or other assets

n Sharing of paid employees

o Reimbursement paid to other organization for expenses

p Reimbursement paid by other organization for expenses

q Other transfer of cash or property to other organization(s)

r Other transfer of cash or property from other organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

	(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

Mortgages and Other Notes Payable

Forms
990 / 990-PF

2009

For calendar year 2009, or tax year beginning **07/01/09**, and ending **06/30/10**

Name
ART MUSEUM OF GREATER LAFAYETTE, INC.

Employer Identification Number
35-0828754

FORM 990, PART X, LINE 23 - ADDITIONAL INFORMATION

Name of lender	Relationship to disqualified person
(1) LAFAYETE BANK & TRUST MORTGAGE	NONE
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	

Original amount borrowed	Date of loan	Maturity date	Repayment terms	Interest rate
(1) 52,330	05/03/06	05/03/26	MONTHLY PAYMENTS	VARIABLE
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

Security provided by borrower	Purpose of loan
(1) LAND & BUILDING	MORTGAGE
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	

Consideration furnished by lender	Balance due at beginning of year	Balance due at end of year
(1)	48,600	24,422
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Totals	48,600	24,422

Federal StatementsTaxable Interest on Investments

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business Code</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>
INTEREST & DIVIDENDS- ART LEA	\$ 773		14	IN	
INTEREST INCOME	130		14	IN	
INTEREST INCOME: BANK ACCT INT	224		14	IN	
INTEREST INCOME: SECURITIES IN	4,116		14	IN	
TOTAL	\$ <u>5,243</u>				

Federal Statements

Form 990, Part IX, Line 24f - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
GALLERY SUPPLIES & MAINTENANCE	\$ 1,498	1,498		
AWARDS- ART LEAGUE	937	937		
FUNDRAISING EXPENSES:DOG	688			688
FUNDRAISING EXPENSES:DOG	649			649
FUNDRAISING EXPENSES:DOG	372			372
DONATIONS- ART LEAGUE	220		220	
MISCELLANEOUS- ART LEAGUE	127		127	
FUNDRAISING EXPENSES:DOG	36		-99	36
TO ALLOCATE				99
TOTAL	\$ 4,527	\$ 2,435	\$ 248	\$ 1,844

Federal Statements

Schedule A, Part III, Line 7a - Support from Disqualified Persons

Donor Name	2009	2008	2007	2006	2005
GORDON & SUSAN CHAVERS	\$ 2,300	\$	\$	\$	\$
LOWELL & SUSAN HORWEDEL	2,366				
TOTAL	\$ 4,666	\$ 0	\$ 0	\$ 0	\$ 0

09/27/10 10:21:46AM

Type: Federal

Asset Detail Federal Report

Year Ending June 30, 2010

Item number	Activity	Description ** Indicates Sold # part of bulk sale	Date placed in service	Group	Location	Serial number	Cost or Basis	Bus %	Salvage Value	Method	CV	Recovery Period	Current/ Prior Sec 179	Current/ Prior Special	Recovery Basis	Prior Accum Depr	Current Depr	Accum Depr	Net Book Value
1502-CAPITAL IMPROVEMENTS																			
008	1120S	IMPROVE NORTH WING	01/01/1968				6,253	100	0	SL	HY	20	0	0	6,253	6,253	0	6,253	0
009	1120S	IMPROVE NORTH WING	01/01/1973				1,104	100	0	SL	HY	20	0	0	1,104	1,104	0	1,104	0
010	1120S	IMPROVE NORTH WING	01/01/1980				191,847	100	0	SL/ADS	MM	40	0	0	191,847	139,087	4,796	143,883	47,964
011	1120S	PAVE DRIVEWAY	08/01/1980				9,000	100	0	150DB	HY	15	0	0	9,000	9,000	0	9,000	0
012	1120S	ARCHITECT FEES	06/01/1984				5,000	100	0	SL/GDS	MM	5	0	0	5,000	5,000	0	5,000	0
013	1120S	BUILDING ADDITION	06/01/1985				41,384	100	0	SL/GDS	MM	5	0	0	41,384	41,384	0	41,384	0
015	1120S	52 GALLON WATER HEATER	08/04/1986				305	100	0	SL	HY	31.5	0	0	305	202	11	213	92
017	1120S	ELECTRIC WORK-OLD WING	06/01/1988				2,660	100	0	SL		31.5	0	0	2,660	1,694	102	1,796	864
018	1120S	REMODEL RENTAL AREA	06/01/1988				2,385	100	0	SL		31.5	0	0	2,385	1,519	91	1,610	775
019	1120S	SECURITY SYSTEM	06/01/1988				1,180	100	0	SL		31.5	0	0	1,180	751	45	796	384
020	1120S	LANDSCAPING	06/01/1988				2,846	100	0	SL		5	0	0	2,846	2,846	0	2,846	0
021	1120S	PAVING - NEW SURFACE	06/01/1988				2,707	100	0	SL		15	0	0	2,707	2,707	0	2,707	0
006	1120S	FACADE RECONSTRUCTION	09/15/1992				54,379	100	0	SL		27.5	0	0	54,379	27,290	0	27,290	27,089
024	1120S	SECURITY	10/13/1997				3,655	100	0	SL		15	0	0	3,655	1,965	0	1,965	1,690
023	1120S	NEW ROOF	11/12/1997				15,510	100	0	SL		15	0	0	15,510	13,787	0	13,787	1,723
025	1120S	COVERING SKYLIGHTS	11/21/1997				3,671	100	0	SL		15	0	0	3,671	3,671	0	3,671	0
026	1120S	BOILER FOR OFFICE	05/06/1998				5,078	100	0	SL		15	0	0	5,078	5,078	0	5,078	0
028	1120S	TRACK LIGHTING FOR GALLERY	09/03/1998				2,087	100	0	SL		15	0	0	2,087	2,052	0	2,052	35
030	1120S	PANIC BAR FOR FRONT DOOR	09/10/1998				627	100	0	SL		15	0	0	627	617	0	617	10
027	1120S	TRACK LIGHTING FOR GALLERY	02/18/1999				1,876	100	0	SL		15	0	0	1,876	1,767	0	1,767	109
031	1120S	CARPET-DOWNSTAIRS	03/10/1999				1,020	100	0	SL		15	0	0	1,020	952	0	952	68
032	1120S	CARPET	03/10/1999				1,811	100	0	SL		15	0	0	1,811	1,690	0	1,690	121
029	1120S	SINK	05/02/1999				738	100	0	SL		15	0	0	738	677	0	677	61

F-1

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Type: Federal

ART MUSEUM OF GREATER LAFAYETTE, INC.

AMGL

Asset Detail Federal Report

Page 3 of 5

Year Ending June 30, 2010

Item number	Activity	Description ** Indicates Sold # part of bulk sale	Date placed in service	Group	Location	Serial number	Cost or Basis	Bus %	Salvage Value	Method	CV	Recovery Period	Current/ Prior Sec 178	Current/ Prior Special	Recovery Basis	Prior Accum Depr	Current Depr	Accum Depr	Net Book Value
Total: 1512-COMMUNITY SERVICE ROOM																			
							271,328	0	0				0	0	271,328	173,786	0	173,786	98,542
1522-FURNITURE & FIXTURES																			
033	1120S	4 DRAWER LATERAL FILE	06/01/1983				390	100	0	150DB		5	0	0	390	390	0	390	0
034	1120S	FURNITURE	11/01/1986				122	100	0	SL		5	0	0	122	122	0	122	0
038	1120S	6019 FOLDING CHAIRS	05/13/1988				1,500	100	0	SL		7	0	0	1,500	1,500	0	1,500	0
039	1120S	LECTURN WITH SOUND	05/31/1988				820	100	0	SL		7	0	0	820	820	0	820	0
046	1120S	DESK WITH CENTER DRAWER	05/31/1988				1,780	100	0	SL		7	0	0	1,780	1,780	0	1,780	0
048	1120S	CREDENZA	05/31/1988				1,852	100	0	SL		7	0	0	1,852	1,852	0	1,852	0
049	1120S	TABLE 30X30X30	05/31/1988				351	100	0	SL		7	0	0	351	351	0	351	0
050	1120S	BOOKCASE	05/31/1988				472	100	0	SL		7	0	0	472	472	0	472	0
053	1120S	CENTER UNIT DESK	05/31/1988				845	100	0	SL		7	0	0	845	845	0	845	0
054	1120S	LATERAL FILE 2	05/31/1988				1,844	100	0	SL		7	0	0	1,844	1,844	0	1,844	0
055	1120S	STACK CHAIRS	05/31/1988				8,370	100	0	SL		7	0	0	8,370	8,370	0	8,370	0
056	1120S	SIDE ARM CHAIRS	05/31/1988				854	100	0	SL		7	0	0	854	854	0	854	0
058	1120S	3 DRAWER LATERAL FILE 4	05/31/1988				2,852	100	0	SL		7	0	0	2,852	2,852	0	2,852	0
059	1120S	2 BOOKCASES	05/31/1988				612	100	0	SL		7	0	0	612	612	0	612	0
061	1120S	RIGHT HAND FILE CABINET	05/31/1988				969	100	0	SL		7	0	0	969	969	0	969	0
079	1120S	KITCHEN CABINETS	05/31/1988				1,356	100	0	SL		7	0	0	1,356	1,356	0	1,356	0
086	1120S	4 PRINT CABINETS	10/12/1989				600	100	0	SL		7	0	0	600	600	0	600	0
097	1120S	MAT CUTTER	03/10/1994				678	100	0	SL		7	0	0	678	678	0	678	0
107	1120S	DISHWASHER	10/23/1996				3,557	100	0	SL		7	0	0	3,557	3,557	0	3,557	0
108	1120S	CHILDRENS FURNITURE	07/30/1997				765	100	0	SL		7	0	0	765	765	0	765	0
113	1120S	PEOPLE COUNTERS	09/28/1997				820	100	0	SL		7	0	0	820	820	0	820	0
112	1120S	POTTERY WHEEL	06/19/1998				733	100	0	SL		7	0	0	733	733	0	733	0
118	1120S	PEDESTALS FOR GALLERIES	07/30/1998				1,969	100	0	SL		7	0	0	1,969	1,969	0	1,969	0

09/27/10 10:21:46AM

Type: Federal

Asset Detail Federal Report

Year Ending June 30, 2010

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ART MUSEUM OF GREATER LAFAYETTE, INC.

Page 4 of 5

Item number	Activity	Description -- Indicates Sold # part of bulk sale	Date placed in service	Group	Location	Serial number	Cost or Basis	Bus %	Salvage Value	Method	CV	Recovery Period	Current/ Prior Sec 179	Current/ Prior Special	Recovery Basis	Prior Accum Depr	Current Depr	Accum Depr	Net Book Value
117	1120S	PLEXIGLASS COVERS	08/01/1998				1,771	100	0	SL		7	0	0	1,771	1,756	0	1,756	15
120	1120S	2 POTTERY WHEELS	12/06/1999				1,455	100	0	SL		7	0	0	1,455	1,249	0	1,249	206
129	1120S	POTTERY TABLE	01/15/2002				1,985	100	0	SL		7	0	0	1,985	1,985	0	1,985	0
127	1120S	SCANNER	05/01/2002				399	100	0	SL		5	0	0	399	399	0	399	0
134	1120S	RAFFLE CAGE	07/01/2002				291	100	0	SL		5	0	0	291	291	0	291	0
132	1120S	LIGHTING	12/31/2002				6,576	100	0	SL		7	0	0	6,576	6,576	0	6,576	0
136	1120S	TELEPHONE SYSTEM	06/23/2003				4,449	100	0	SL		5	0	0	4,449	4,449	0	4,449	0
133	1120S	KILN	06/30/2003				2,089	100	0	SL		7	0	0	2,089	2,089	0	2,089	0
139	1120S	TABLE & SKIRTING	02/03/2004				2,363	100	0	SL		5	0	0	2,363	2,363	0	2,363	0
140	1120S	ICE MACHINE	06/02/2004				1,283	100	0	SL		5	0	0	1,283	1,283	0	1,283	0
142	1120S	PAPER CUTTER	06/09/2004				236	100	0	SL		5	0	0	236	236	0	236	0
141	1120S	CABINETS	06/14/2004				288	100	0	SL		5	0	0	288	288	0	288	0
143	1120S	CART TV WIDE BODY	07/26/2004				389	100	0	SL		5	0	0	389	305	0	305	84
144	1120S	EASELS	07/26/2004				170	100	0	SL		5	0	0	170	133	0	133	37
160	1120S	COUNTER GIFT SHOP	08/11/2004				2,581	100	0	SL		7	0	0	2,581	2,581	0	2,581	0
161	1120S	BLINDS	08/30/2004				119	100	0	SL		7	0	0	119	46	0	46	73
151	1120S	DISPLAY 23* APPLE	09/23/2004				1,799	100	0	SL		5	0	0	1,799	1,349	0	1,349	450
152	1120S	COMPUTERS APPLE IBOOK	09/23/2004				6,993	100	0	SL		5	0	0	6,993	6,993	0	6,993	0
154	1120S	TOUCHSCREEN	10/21/2004				2,986	100	0	SL		5	0	0	2,986	2,986	0	2,986	0
155	1120S	SOFTWARE QB POINT OF SALE	10/21/2004				606	100	0	SL		3	0	0	606	606	0	606	0
156	1120S	SCANNER NIKON COOL	10/21/2004				570	100	0	SL		5	0	0	570	418	0	418	152
164	1120S	TELEPHONE	10/12/2006				672	100	0	SL		7	0	0	672	72	0	72	600
167	1120S	NEW COMPUTER AND MAIN SERVER	09/04/2007				1,437	100	0	SL		5	0	0	1,437	431	287	718	719
168	1120S	UPGRADE APPLE	10/10/2007				214	100	0	SL		5	0	0	214	64	43	107	107
169	1120S	TECH SUPPORT SOFTWARE	10/28/2007				331	100	0	SL		3	0	0	331	99	66	165	166

09/27/10 10:21:46AM

Type: Federal

Asset Detail Federal Report

Year Ending June 30, 2010

Item number	Activity	Description ** Indicates Sold ## part of bulk sale	Date placed in service	Group	Location	Serial number	Cost or Basis	Bus %	Salvage Value	Method	CV	Recovery Period	Current/ Prior Sec-179	Current/ Prior Special	Recovery Basis	Prior Accum Depr	Current Depr	Accum Depr	Net Book Value
170	1120S	BATTERY BU FOR 1031/2007 SERVER	10/31/2007				297	100	0	SL	5	5	0	0	297	89	59	148	149
171	1120S	HARD DRIVE FOR 11/07/2007 COMPUTER	11/07/2007				69	100	0	SL	5	5	0	0	69	21	14	35	34
172	1120S	SURGE 03/31/2008 SUPPRESSOR	03/31/2008				413	100	0	SL	5	5	0	0	413	124	83	207	206
Subtotals: 1522-FURNITURE & FIXTURES																			
Less: Assets Sold 1522-FURNITURE & FIXTURES																			
Total: 1522-FURNITURE & FIXTURES																			
SubTotals: All G/L Asset Accounts																			
Less: Assets Sold All G/L Asset Accounts																			
Ending Totals All G/L Asset Accounts																			

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 ac 1520 Bldg... 1032,678
1039,881
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Form **4562**
 Department of the Treasury
 Internal Revenue Service

Depreciation and Amortization
 (Including Information on Listed Property)

OMB No 1545-0172

2009

Attachment Sequence No **67**

▶ See separate instructions. ▶ Attach to your tax return.

Name(s) shown on return **ART MUSEUM OF GREATER LAFAYETTE, INC.** Identifying number **35-0828754**

Business or activity to which this form relates
INDIRECT DEPRECIATION

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount See the instructions for a higher limit for certain businesses	1	250,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	800,000
4	Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	4	
5	Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property Enter the amount from line 29	7	
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2008 Form 4562	10	
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2010 Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property Instead, use Part V

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instr.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS) SEE ATTACHED ASSET DETAIL FEDERAL REPORT	16	16,275

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2009	17	0
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B—Assets Placed in Service During 2009 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27 5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	

Section C—Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property Enter amount from line 28	21	
22	Total Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions	22	16,275
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2009)