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)

Internal Revenue Service

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

Open to Public Inspection

Α	For the	2012 calendar year, or tax year beginning $OCT~1$, 2012 and ϵ	ending S	EP 30, 20	13				
	Check if applicable	C Name of organization		D Employer ide	ntific	ation number			
	Address	THE BOOK ARTS PRESS, INC.							
	Name change	Doing Business As RARE BOOK SCHOOL		5.4	-16	667557			
F	Initial return		Room/suite	E Telephone nur	-				
	Termin- ated	114 ALDERMAN LIBRARY	nooniysuite	434-924-8851					
	Amende return	City, town, or post office, state, and ZIP code		G Gross receipts \$		1,357,367.			
	Applica	CHARLOTALDVILLE, VA. 22504		H(a) Is this a grou	ip re	turn			
	pending	F Name and address of principal officer:MICHAEL F. SUAREZ		for affiliates?	,	Yes X No			
		SAME AS C ABOVE		H(b) Are all affiliate	s incl	uded? Yes No			
1	Tax-exe	mpt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) 0	r 527	If "No," attac	h a l	ist. (see instructions)			
J	Website	E: ► WWW.RAREBOOKSCHOOL.ORG		H(c) Group exem	ption	number >			
K	Form of o	organization: X Corporation Trust Association Other	L Year	of formation: 198	3 м	State of legal domicile: VA			
0000000	art I	Summary							
(1)	1 E	riefly describe the organization's mission or most significant activities: ADVOC	CACY,	EDUCATION	AN	ND OUTREACH			
Activities & Governance		FOR THE STUDY OF THE HISTORY OF BOOKS, PR							
rna	2 (Check this box if the organization discontinued its operations or dispos	ed of more	than 25% of its ne	et ass	sets.			
ove					3	19			
Ğ		lumber of independent voting members of the governing body (Part VI, line 1b)		A CONTRACTOR OF THE PROPERTY O	4	19			
S	1	otal number of individuals employed in calendar year 2012 (Part V, line 2a)			5	31			
itie	4	otal number of volunteers (estimate if necessary)			6	19			
ctiv		otal unrelated business revenue from Part VIII, column (C), line 12			7a	0.			
A	1	let unrelated business taxable income from Form 990-T, line 34			7b	0.			
	-	iot difficiated business taxable modific from 535 f; iiilo 54		Prior Year		Current Year			
м	8 0	Contributions and grants (Part VIII, line 1h)	1,992,94	7.	894,852.				
Jue	9 P	rogram service revenue (Part VIII, line 2g)	308,51		451,618.				
Revenue	10 lr			0.	0.				
Re	11 0	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		6,22		3,400.			
		other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2,307,68	_	1,349,870.			
	100000 000	otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)			0.	81,735.			
		irants and similar amounts paid (Part IX, column (A), lines 1-3)			0.	01,733.			
		enefits paid to or for members (Part IX, column (A), line 4)		380,16		399,730.			
Expenses	15 8	alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.000		0.	0.			
en	10a P	rofessional fundraising fees (Part IX, column (A), line 11e)			<i>J</i> .				
EXF	D 1	otal fundraising expenses (Part IX, column (D), line 25) 108,69		471,87	7	711,437.			
		other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	-	852,03		1,192,902.			
	1	otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)			-				
_ S	19	evenue less expenses. Subtract line 18 from line 12		1,455,64	-	156,968.			
ts o		and the contract of the contra	Red	ginning of Current Ye		End of Year			
Sse	20 T	otal assets (Part X, line 16)		3,527,13		3,928,535.			
Net Assets or Fund Balances	21 T	otal liabilities (Part X, line 26)		47,909	_	48,213.			
		et assets or fund balances. Subtract line 21 from line 20		3,479,220	0 •	3,880,322.			
	art II	Signature Block							
		es of perjury, I declare that I have examined this return, including accompanying schedules			of my	knowledge and belief, it is			
true	, correct,	and complete. Declaration of preparer (other than officer) is based on all information of whi	ch preparer	has any knowledge.		· · · · · · · · · · · · · · · · · · ·			
		Signature of officer		Date	3/	12014			
Sig	n		. (40)	Date	-	1			
Her	re	MICHAEL F. SUAREZ, EXECUTIVE DIRECTOR			-	· · · · · · · · · · · · · · · · · · ·			
		Type or print name and title	10	ata la i		DTIN			
		Print/Type preparer's name IATTHEW J. DEAN Preparer's signature	, 0	ate		PTIN			
Paid				7 0011 011	nployed				
		Firm's name HANTZMON WIEBEL LLP, CPA'S	100	Firm's EIN	_	54-0618213			
Use	Only	Firm's address 818 E. JEFFERSON ST., P.O. BOX 1	408		, .	241206 2156			
		CHARLOTTESVILLE, VA 22902		Phone no.	(4	34)296-2156			
May	y the IRS	discuss this return with the preparer shown above? (see instructions)				X Yes No			

Pa	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission: RARE BOOK SCHOOL AT THE UNIVERSITY OF VIRGINIA PROVIDES INNOVATIVE AND
	OUTSTANDING EDUCATIONAL OPPORTUNITIES TO STUDY THE HISTORY, CARE, AND
	USE OF WRITTEN, PRINTED, AND DIGITAL MATERIALS. THROUGH THE HANDS-ON,
	INTENSIVE EXAMINATION AND ANALYSIS OF TEXTUAL ARTIFACTS IN
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Ver " 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 X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations 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	692 - 157 - including graphs of \$ 81,735 •) (Revenue \$ 455,018 •)
	RARE BOOK SCHOOL ANNUALLY OFFERS APPROXIMATELY 30 WEEK-LONG COURSES IN
	THE STUDY, CARE, AND USES OF MANUSCRIPTS, PRINTED AND BORN-DIGITAL
	MATERIALS IN FISCAL YEAR 2013, 400 STUDENTS TOOK 31 COURSES.
	TIBRARIANS, SCHOLARS, CONSERVATORS, BOOK DEALERS, STUDENTS, COLLECTORS
	AND EDUCATORS STUDIED TOPICS THAT RANGED FROM MEDIEVAL MANUSCRIPTS AND
	BOOKBINDING TO BORN-DIGITAL MATERIALS AND TEXTURAL ENCODING.
4b	(Code:) (Expenses \$195,840 • including grants of \$) (Revenue \$)
10	RARE BOOK SCHOOL HAS A TEACHING COLLECTION OF APPROXIMATELY 80,000
	TTEMS RELATED TO THE HISTORY OF BOOKS AND PRINTING. TEACHING METHODS
	AT THE SCHOOL CENTER AROUND CLOSE ENGAGEMENT WITH ORIGINAL MATERIALS,
	AND ALL ITEMS ACQUIRED AND HELD BY THE SCHOOL ARE USED FOR
	INSTRUCTIONAL PURPOSES AND SUPPORT THE EDUCATIONAL MISSION OF THE
	SCHOOL.
4c	(Code:) (Expenses \$ 134,255 • including grants of \$) (Revenue \$)
	RARE BOOK SCHOOL PROVIDES AN ONGOING SERIES OF WIDELY ADVERTISED, FREE
	PUBLIC LECTURES (BOTH DURING SCHOOL SESSIONS AND AT OTHER TIMES DURING
	THE YEAR) ON A WIDE VARIETY OF BIBLIOGRAPHICAL AND BOOK HISTORICAL
	TOPICS. TO DATE, THE SCHOOL HAS PRESENTED MORE THAN 500 LECTURES.
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 1,022,252.
20000	Form 990 (2012)

1 6	Official of frequired contradics		Yes	NI.
	10 17 17 17 17 17 17 17 17 17 17 17 17 17		res	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?	1	Х	
	If "Yes," complete Schedule A	2	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?		21	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	4		Х
	during the tax year? If "Yes," complete Schedule C, Part II	-		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	5		Х
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	3		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	6		X
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	0		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		X
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II.	-		- 15
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	X	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?	9		Х
	If "Yes," complete Schedule D, Part IV	9		25
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	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable.	(00000000000000000000000000000000000000		
8	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	11a	Х	
·	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	¥ 2		- 14
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
	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
	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		
6	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	× ==
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	12a	X	
	Schedule D, Parts XI and XII	120		
k	Was the organization included in consolidated, independent audited financial statements for the tax year?	12b	1 1 1	X
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	13	7	X
13	The state of the s	14a		Х
14a	f and the MAC OOD from prophersing fundraiging business	110		
k	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		X
45	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
15	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
4.0	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
16	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
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	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		Х
4.5	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
19	complete Schedule G, Part III	19		X
00	in the state of th	20a		X
20	b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
) IT YES TO line Zua, did the organization attach a copy of its addited financial statements to this fotom.		000	100101

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Pai	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V					
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	8			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and		able 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	31			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu			2b	X	
30770	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction		_			
3a	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		10.00
	At any time during the calendar year, did the organization have an interest in, or a signature or other					
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	nt)?	4a		X
b	If "Yes," enter the name of the foreign country:					
	See instructions for filling requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial	Accou	nts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans-			5b		X
Ç	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to					
	any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribu					
	were not tax deductible?			6b		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and see	ervices	provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it v					
	to file Form 8282?			7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	contra	ct?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont	tract?		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file F	Form 8	899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		300000000000000000000000000000000000000
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. I					
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings a	t any tir	me during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.					
a	Did the organization make any taxable distributions under section 4966?			9a	No.	
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b	3000000000	3000000000
10	Section 501(c)(7) organizations. Enter:	1	1			
	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:	1				
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	L.,			
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		
	Note. 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		1			
	organization is licensed to issue qualified health plans	13b				
C	Enter the amount of reserves on hand	13c		4.4-		Х
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		23
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu	iie U .		140	000	100401

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 . Section A. Governing Body and Management Yes No 19 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. 19 **b** Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X 2 officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 X of officers, directors, or trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or X more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X 7b persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X 8a The governing body? X 8b Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the X organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes X 10a 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X 12b b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe X 12c in Schedule O how this was done X 13 Did the organization have a written whistleblower policy? X 14 Did the organization have a written document retention and destruction policy? 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? X 15a a The organization's CEO, Executive Director, or top management official X 15b b Other officers or key employees of the organization 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 X 16a taxable entity during the year? 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 16b exempt status with respect to such arrangements? Section C. Disclosure NONE List the states with which a copy of this Form 990 is required to be filed ▶_ Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Other (explain in Schedule O) X Upon request Own website Another's website Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the organization: 20 THE ORGANIZATION - 434-924-8851 114 ALDERMAN LIBRARY, CHARLOTTESVILLE, 22904

06495 1

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

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 (Ď), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

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

- 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.

(A) Name and Title	Average hours per	Position (do not check more than one box, unless person is both an officer and a director/trustee)					h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	week (list any hours for related organizations	trustee or director	trustee		20	npensated		the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related
	below line)	Individual to	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) MR. WILLIAM T. BUICE, III CHAIR	2.00	X		X				0.	0.	0.
(2) MR. ROBERT A. GROSS VICE-CHAIR	2.00	Х		X				0.	0.	0 .
(3) MS. ALICE D. SCHREYER SECRETARY	2.00	Х		X				0.	0.	0.
(4) MS. JOAN M. FRIEDMAN TREASURER	2.00	X		Х				0.	0.	0.
(5) MR. TERRY BELANGER DIRECTOR	2.00	X						0.	0.	0.
(6) MR. JOHN ROBINSON BLOCK DIRECTOR	2.00	X						0.	0.	0 .
(7) MR. JOHN T. CASTEEN, III DIRECTOR	2.00	X						0.	0.	0 .
(8) MR. GIOVANNI FAVRETTI DIRECTOR	2.00	X						0.	0.	0 .
(9) MR. DON FRY DIRECTOR	2.00	X				L		0.	0.	0.
(10) MS. FLORENCE FEARRINGTON DIRECTOR	2.00	X						0.	0.	0 .
(11) MS. MARY C. SCHLOSSER DIRECTOR	2.00	X						0.	0.	0.
(12) MR. ARTHUR L. SCHWARZ DIRECTOR (13) MS. CAROLYN L. SMITH	2.00	X						0.	0.	0.
DIRECTOR (14) MR. HANS E. TAUSIG	2.00	X						0.	0.	0 .
DIRECTOR (15) MS. KARIN WITTENBORG	2.00	X			-			0.	0 .	0.
DIRECTOR (16) MR. JAMES N. GREEN	2.00	X			-	-	-	0.	0.	0.
DIRECTOR (17) MR. EDWARD LEAHY	2.00	X					-	0.		0.
DIRECTOR 232007 12-10-12		X						0.	0.	0 . Form 990 (2012

232007 12-10-12

(A) Name and title	(B) Average hours per week	Position (do not check more than one box, unless person is both ar officer and a director/trustee)					h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(18) MR. JOHN CHRICHTON	2.00	37						0.	0	0.
DIRECTOR	2.00	X						0.	0	. 0 .
(19) MS. MARY E. CRAWFORD DIRECTOR	2.00	X						0.	0	. 0.
(20) MR. MICHAEL F. SUAREZ PRESIDENT	40.00			Х	z			0.	0	. 0.
									4	
					2					
1b Sub-total c Total from continuation sheets to Part V	II, Section A							0.	0 0	. 0 .
d Total (add lines 1b and 1c)	not limited to th	ose	liste	ed at	 DOV	e) wh	no re	0. eceived more than \$100		0
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s										Yes No
4 For any individual listed on line 1a, is the su and related organizations greater than \$15	um of reportab 0,000? <i>If</i> "Yes,	le co	omp	ensa ete S	ation Sche	and adule	oth	ner compensation from to such individual	the organization	4 X
5 Did any person listed on line 1a receive or a rendered to the organization? If "Yes," com	accrue compe	nsat	ion f	rom	any	unr	elate	ed organization or indivi	dual for services	5 X
Complete this table for your five highest contact the organization. Report compensation for	ompensated inc the calendar y	depe	ende endi	ent c	onti vith	racto	rs tl	nat received more than the organization's tax	\$100,000 of comper rear.	sation from
(A) Name and business			INC					(B) Description of s		(C) Compensation
								. <u>1112</u>		
Total number of independent contractors (in \$100,000 of compensation from the organical states and the compensation from the organical states are states as a second state of the compensation from the organical states are states as a second state of the compensation from the organical states are states as a second state of the compensation from the organical states are states as a second state of the compensation from the organical states are states as a second state of the compensation from the organical states are states as a second state of the compensation from the organical states are states as a second state of the compensation from the organical states are states as a second state of the compensation from the organical states.		ot li	mite	d to		se lis	sted	above) who received m	nore than	Form 990 (2012)

		Check if Schedule O cont	ans a response	to any question	(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	1 a	Federated campaigns	1a					
Gra	b	Membership dues	1b					
S, (С	Fundraising events	1c					
lar	d	Related organizations	1d					
is,	е	Government grants (contributi	ions) 1e					
rS	f	All other contributions, gifts, grant	ts, and					
the		similar amounts not included above	ve 1f	894,852.				
do	g	Noncash contributions included in lines	1a-1f: \$	176,370.				
an	h	Total. Add lines 1a-1f		▶	894,852.			
				Business Code				
e	2 a	TUITION REVENUE		611600	451,618.	451,618.		
Program Service Revenue	b					Lend e		
	C						i kanana ara	
eve	d							
99 R	е							2
٦	f	All other program service reve	nue					
	g	Total. Add lines 2a-2f			451,618.			
	3	Investment income (including	dividends, inter	est, and				
		other similar amounts)						
	4	Income from investment of tax						
	5	Royalties						
			(i) Real	(ii) Personal				
	6 a	Gross rents	· · · · · · · · · · · · · · · · · · ·					
2	b	Less: rental expenses						
		Rental income or (loss)						
		Net rental income or (loss)		>				
		a Gross amount from sales of (i) Securities		(ii) Other				
		assets other than inventory	.,,	- X-7				
	b	Less: cost or other basis						
		and sales expenses						
	C	Gain or (loss)			1			
		Net gain or (loss)		>				
o		Gross income from fundraising						
nue	-	including \$,					
Other Revenu		contributions reported on line						
T.		Part IV, line 18						
the	b	Less: direct expenses						
0		Net income or (loss) from func						
		Gross income from gaming ac						
		Part IV, line 19						
	b	Less: direct expenses			1			
		Net income or (loss) from gam		- Landerson - Land				
		Gross sales of inventory, less						
		and allowances		10,449.				
	h	Less: cost of goods sold						
		Net income or (loss) from sale			2,952.	2,952.		
	U	Miscellaneous Revenu		Business Code				
	11 a	MINGER TRAINING D		900099	448.	448.		
	b							
	0							
	ن	All other revenue						
	a	Total. Add lines 11a-11d			448.			
	12	Total revenue. See instructions.			1,349,870.		0.	0
232009		rateriavanua, oco matruottolis.				American Control of the Control of t		Form 990 (2012

Form 990 (2012) THE BOOK ARTS PRESS, INC. Part IX Statement of Functional Expenses

	Check if Schedule O contains a respons		s Part IX (B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in	81,735.	81,735.		
_	the United States. See Part IV, line 22	01,733.	01,755.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
4	United States. See Part IV, lines 15 and 16 Benefits paid to or for members				
5	Compensation of current officers, directors,		°		
0	trustees, and key employees	- 1 1 4 44			*
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	344,649.	274,674.	5,574.	64,401
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)			4 404	11 ((1
9	Other employee benefits	55,081.	42,246.	1,174.	11,661
10	Payroll taxes				
11	Fees for services (non-employees):	2 625		2 625	
a	Management	3,635.		3,635.	
b	Legal	10 175		12,175.	
C	Accounting	12,175.		12,113.	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17	***			
f	Other. (If line 11g amount exceeds 10% of line 25,				
g	column (A) amount, list line 11g expenses on Sch O.)	25,126.	25,001.		125
12	Advertising and promotion	6,509.	6,509.		
13	Office expenses	53,898.	42,990.	4,302.	6,606
14	Information technology				
15	Royalties				
16	Occupancy	22,658.	18,749.	1,647.	2,262 3,385
7	Travel	100,040.	95,588.	1,067.	3,385
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	39,446.	29,778.	2,616.	7,052
20	Interest				
21	Payments to affiliates	0.5.110	20 760	2 (72	2 670
22	Depreciation, depletion, and amortization	37,110.	30,768.	2,672. 3,073.	3,670
23	Insurance	3,073.		3,073.	
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 0.)	195,840.	195,840.		
a	FACULTY HONORARIA	82,450.	82,450.		ile to the
b	STIPENDS	51,805.	51,805.		
c d	CLASSROOM SUPPLIES	29,621.	29,621.		*
	All other expenses	48,051.	14,498.	24,017.	9,536
25 25	Total functional expenses. Add lines 1 through 24e	1,192,902.	1,022,252.	61,952.	108,698
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				Form 990 (2012

11420124 700786 06495

	Check if Schedule O contains a response to any	question	n in this Part X		······	
				(A) Beginning of year		(B) End of year
1	Cash · non-interest-bearing			417,344		694,193
2	Savings and temporary cash investments			1,135,535		610,39
3	Pledges and grants receivable, net			51,700		65,42
4	Accounts receivable, net			15,059	. 4	5,82
5	Loans and other receivables from current and fo	cers, directors,				
	trustees, key employees, and highest compensa	ted emp	loyees. Complete			
	Part II of Schedule L				5	
6	Loans and other receivables from other disqualif	ons (as defined under				
	section 4958(f)(1)), persons described in section	4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of sect	ion 501(d	c)(9) voluntary			
	employees' beneficiary organizations (see instr).				6	
7	Notes and loans receivable, net				7	
8	Inventories for sale or use			11,724		11,59
9	Prepaid expenses and deferred charges			2,146	9	3,15
1	Land, buildings, and equipment: cost or other					
	basis. Complete Part VI of Schedule D	10a	989,682.			
1	Less: accumulated depreciation	10b	63,957.	278,459	10c	925,72
11	Investments - publicly traded securities				11	
12	Investments - other securities. See Part IV, line 1			1,615,168	. 12	1,612,23
13	Investments - program-related, See Part IV, line				13	
14	Intangible assets		AND CONTRACT OF THE PARTY OF TH		14	
15	Other assets. See Part IV, line 11				15	\$1.41 BOOK
16	Total assets. Add lines 1 through 15 (must equa	3,527,135		3,928,53		
17	Accounts payable and accrued expenses			30,110	• 17	28,14
18	Grants payable				18	
19	Deferred revenue				19	
20	Tax-exempt bond liabilities		20			
21	Escrow or custodial account liability. Complete F				21	
22	Loans and other payables to current and former					
	key employees, highest compensated employee					
	Complete Part II of Schedule L		22			
23	Secured mortgages and notes payable to unrela				23	
24	Unsecured notes and loans payable to unrelated				24	
25	Other liabilities (including federal income tax, pay	ables to	related third			
1-1-	parties, and other liabilities not included on lines					
	Schedule D			17,799		20,07
26	Total liabilities. Add lines 17 through 25			47,909	• 26	48,21
	Organizations that follow SFAS 117 (ASC 958	, check	here ▶ X and			
	complete lines 27 through 29, and lines 33 an	d 34.				
27	Unrestricted net assets			962,650		1,774,12
28	Temporarily restricted net assets			1,460,516		1,022,60
29	Permanently restricted net assets			1,056,060	• 29	1,083,58
	Organizations that do not follow SFAS 117 (A					
	and complete lines 30 through 34.					
30	Capital stock or trust principal, or current funds		2 11 2 1 2	30		
31	Paid-in or capital surplus, or land, building, or eq			31	0 1 2000	
32	Retained earnings, endowment, accumulated in				32	2 222 22
33	Total net assets or fund balances			3,479,226		3,880,32
	Total liabilities and net assets/fund balances			3,527,135	. 34	3,928,53

-orn	1990 (2012) THE BOOK ARTS TREES, THE				Annual Contract of the last of			
Pa	rt XI Reconciliation of Net Assets				37			
	Check if Schedule O contains a response to any question in this Part XI				X			
			1 241	0	7.0			
4	Total revenue (must equal Part VIII, column (A), line 12)	1 .	1,34					
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,19					
3	Revenue less expenses. Subtract line 2 from line 1	3		68.				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,47		$\frac{26.}{10.}$			
5	5							
6	Donated services and use of facilities	6						
7	Investment expenses	7						
8	Prior period adjustments	8			18.			
9								
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,		2					
	column (B))	10	3,88	0,3	22.			
Pa	rt XII Financial Statements and Reporting							
LENGTED.	Check if Schedule O contains a response to any question in this Part XII				X			
	Oncorri Concorri Contra de			Yes	No			
1	Accounting method used to prepare the Form 990: Cash X Accrual Other							
•	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.						
22	2a Were the organization's financial statements compiled or reviewed by an independent accountant?							
20	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a						
	separate basis, consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis							
· h	Were the organization's financial statements audited by an independent accountant?		2b	X				
D	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,						
	consolidated basis, or both:							
	X Separate basis Consolidated basis Both consolidated and separate basis							
11.2	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit.						
С	review, or compilation of its financial statements and selection of an independent accountant?		2c	Χ	atonamorano es			
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.						
	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	nale Audit						
За		1910 / 10011	3a		Χ			
1,	Act and OMB Circular A-133? If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required.	ired audit						
b	IT "Yes," and the organization undergo the required audit or audits? If the organization did not undergo the required		3b					
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			990	(2012)			
					,			

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Name of the organization

Employer identification number 54-1667557

*************			K ARTS PRESS						3	4-10	07.	551	
Partil			ity Status (All organiz					ructions.					
he organ			because it is: (For lines										
1			s, or association of chur			ction 170	(b)(1)(A)(i)						
2			'0(b)(1)(A)(ii). (Attach Sc			470/1 \/4\	(4)(:::)						
3	A hospital or	a cooperative hospi	tal service organization	described	in section	170(b)(1)	(A)(III).	/b\/4\/A\/ii	i) Entor	the hos	nital'	e nam	10
4			operated in conjunction	with a hos	pital descr	ibed in se	ection 170	(D)(1)(A)(II	i). Enter	the nos	pitar	5 Hall	10,
	city, and stat	e:		· 1 14		aratad by	1 0 00V0V0V	montal uni	t describ	and in			
5			benefit of a college or u	niversity of	wnea or op	perated by	a governi	nemai um	t describ	oca III			
		(b)(1)(A)(iv). (Comple		k dees die ee	dia aaadia	- 470/b\/-	41/41/4						
6	A federal, sta	ite, or local governm	ent or governmental uni eives a substantial part	of its augo	ort from o	aovernme	ntal unit	r from the	general	nublic o	descr	ibed i	'n
7				or its supp	orthonia	governine	ontal unit o	n nom mo	gonora	pasiio .	10001		
•		b)(1)(A)(vi). (Comple	ection 170(b)(1)(A)(vi).	(Complete	Part II)								
8 X	A community	trust described in s	eives: (1) more than 33	1/3% of its	eupport fi	rom contri	butions m	nembershi	n fees, a	nd aros	s rec	eipts	from
9 1	An organizati	on that normally rec	nctions - subject to certa	in exception	one and () no more	than 33 1	/3% of its	support	from a	ross i	nvest	ment
	income and	uproloted business to	axable income (less sec	tion 511 ta	x) from bu	sinesses :	acquired b	v the orga	nization	after Ju	ine 30	0, 197	75.
		509(a)(2). (Complete		liononnia	X) IIOIII O	011100000	204011000	,					
0			perated exclusively to te	st for publ	ic safety. S	See secti o	on 509(a)(4	1).					
1	An organizati	on organized and or	perated exclusively for the	ne benefit (of, to perfo	rm the fu	nctions of,	or to carr	y out the	purpos	ses of	fone	or
	more publicly	supported organiza	ations described in secti	on 509(a)(1) or section	on 509(a)(2	2). See sec	ction 509(a)(3). Ch	eck the	box	that	
			organization and compl					to re-			and a square		
	a Type I			ype III · Fu			C	і 🔲 Тур	e III - No	n-functi	onally	y integ	grated
е 🔲	By checking	this box, I certify that	at the organization is not					r more disc	qualified	person	s oth	er tha	ın
	foundation m	anagers and other t	han one or more publicly	y supporte	d organiza	tions des	cribed in s	ection 509	9(a)(1) or	section	509	(a)(2).	
f	If the organiz	ation received a writ	ten determination from	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III					
	supporting of	rganization, check th	nis box										. , L
g	Since August	t 17, 2006, has the c	organization accepted ar	ny gift or co	ontribution	from any	of the follo	owing pers	sons?		ſ		1
	(i) A perso	n who directly or ind	lirectly controls, either al	one or tog	ether with	persons of	described i	in (ii) and (iii) below	' ,		Yes	No
			upported organization?								g(i)		-
			n described in (i) above?							-	g(ii)		
			person described in (i)							11	g(iii)		
h	Provide the f	ollowing information	about the supported or	ganization	(s).	Comp. V							
	of supported	(ii) EIN	(iii) Type of organization (described on lines 1-9	(described on lines 1-9 in col. (i) listed in your organization in col.							(vii) Amount of moneta		
			above or IRC section (see instructions))	Yes	document?	Yes	r support?	Yes	No				
				163	140	103	1.10						
		1 4 4				1 × 1 1 ×							
			8 9 % % 4										
		,		5 T				4					
					1.65								
otal													

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

Schedule A (Form 990 or 990-EZ) 2012

232021 12-04-12

Schedule A (Form 990 or 990-EZ) 2012

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

oupport contocale for organizations a continue to the continue to the contocale for organizations and the continue to the cont	
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the	e organization
fails to qualify under the tests listed below, please complete Part III.)	

	on A. Public Support		Y			T	
4 0:0	r year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
I GIT	fts, grants, contributions, and						
me	embership fees received. (Do not						
inc	clude any "unusual grants.")						
2 Tax	x revenues levied for the organ-						
iza	ition's benefit and either paid to						
or	expended on its behalf						
3 The	e value of services or facilities						
fur	nished by a governmental unit to						
the	e organization without charge						
4 To	tal. Add lines 1 through 3						
5 The	e portion of total contributions						
by	each person (other than a						
go	vernmental unit or publicly						
0.000	pported organization) included						
	line 1 that exceeds 2% of the						
am	nount shown on line 11,						
	lumn (f)						
	iblic support. Subtract line 5 from line 4.						
	on B. Total Support						
Calenda	r year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	nounts from line 4				(B) 1/2/2010 (P) 50-37	1	
	oss income from interest,		120-131			4 - 1 4 King to 14	
	vidends, payments received on						
	curities loans, rents, royalties						
	d income from similar sources			S			
	et income from unrelated business						
	tivities, whether or not the				Kilona III.		
	siness is regularly carried on						
	her income. Do not include gain						200
	loss from the sale of capital						
	sets (Explain in Part IV.)		خلافها والك				
							reserved.
	otal support. Add lines 7 through 10 coss receipts from related activities,	etc (see instructi	ons)		Art g	12	*C - 18 + *
12 Gr	rst five years. If the Form 990 is for	the ergenization's	ofist second this				
13 FIF	ganization, check this box and stor	the organization :	s mst, second, tim	a, loartii, or illar a	ar your as a seem	S., CC., (C),(C)	▶□
Section	on C. Computation of Publ	ic Support Pe	rcentage				
	ublic support percentage for 2012 (l			column (fl)		14	
	ublic support percentage from 2011						
15 Pu	3 1/3% support test - 2012. If the o	reconization did no	ot check the box of	on line 13 and line	14 is 33 1/3% or	more, check this box	c and
160 22	op here. The organization qualifies						
		as a publicly supp	ot check a hox on	line 13 or 16a and	line 15 is 33 1/3	% or more, check thi	s box
sto	14/20/ support test 2011 If the	rannization did no		into to or toa, are	1110 10 10 00		
sto b 33	1/3% support test - 2011. If the	organization did no	cupported organiz	ration			
b 33	3 1/3% support test - 2011. If the old stop here. The organization gual	ifies as a publicly	supported organiz	ation	e 13, 16a, or 16b	and line 14 is 10% o	or more,
b 33 and 17a 10	1/3% support test - 2011. If the old stop here. The organization qual of facts-and-circumstances test	ifies as a publicly at a control of the org	supported organiz ganization did not	ation	e 13, 16a, or 16b,	and line 14 is 10% of	or more,
b 33 and 17a 10	1/3% support test - 2011. If the od stop here. The organization qual 9% -facts-and-circumstances tested if the organization meets the "facts"	ifies as a publicly t t - 2012. If the org ts-and-circumstan	supported organiz ganization did not aces" test, check t	cationcheck a box on line this box and stop I	e 13, 16a, or 16b, nere. Explain in Pa	and line 14 is 10% o art IV how the organi	or more, zation
sto b 33 and 17a 10 and me	1/3% support test - 2011. If the old stop here. The organization qual of the facts-and-circumstances test of if the organization meets the "facts-and-circumstances"	ifies as a publicly of the orgonical of the orgonical of the orgonical of the organization of the organiza	supported organiz ganization did not aces" test, check t ation qualifies as a	cation	e 13, 16a, or 16b, nere. Explain in Pa d organization	and line 14 is 10% o art IV how the organi	zation
sto b 33 and 17a 10 and me b 10	3 1/3% support test - 2011. If the old stop here. The organization qual 10% -facts-and-circumstances test if the organization meets the "facts-and-circumstances" 10% -facts-and-circumstances test test if and continuous and continuo	ifies as a publicly of t - 2012. If the orgonical transfer if the organization of the control of the organization of the organization o	supported organiz ganization did not aces" test, check t ation qualifies as a ganization did not	ation	e 13, 16a, or 16b, nere. Explain in Pa d organization e 13, 16a, 16b, or	and line 14 is 10% of art IV how the organing art IV how the organing art IV how the 15 is 1	zation
sto b 33 and 17a 10 and me b 10	3 1/3% support test - 2011. If the old stop here. The organization qual 1/3% -facts-and-circumstances test and if the organization meets the "factests the "facts-and-circumstances" 1/3% -facts-and-circumstances test ore, and if the organization meets the	ifies as a publicly of t - 2012. If the orgonical transfer its and circumstantest. The organizater 2011. If the organicater if acts and circumstantests.	supported organiz ganization did not aces" test, check t ation qualifies as a ganization did not umstances" test, c	ation	e 13, 16a, or 16b, nere. Explain in Pa d organization e 13, 16a, 16b, or stop here. Expla	and line 14 is 10% of art IV how the organion. 17a, and line 15 is 1 in in Part IV how the	zation 0% or
5 to 5 do	3 1/3% support test - 2011. If the old stop here. The organization qual 10% -facts-and-circumstances test if the organization meets the "facts-and-circumstances" 10% -facts-and-circumstances test test if and continuous and continuo	ifies as a publicly of t - 2012. If the orgonicates and circumstantest. The organizate - 2011. If the organizates of t - 2015 and circumstances of test.	supported organiz ganization did not gees" test, check t ation qualifies as a ganization did not umstances" test, c The organization	eation	e 13, 16a, or 16b, nere. Explain in Pa d organization e 13, 16a, 16b, or stop here. Expla icly supported org	and line 14 is 10% of art IV how the organities. 17a, and line 15 is 1 in in Part IV how the ganization	zation 0% or

Schedule A (Form 990 or 990-EZ) 2012 THE BOOK ARTS PRESS, INC. 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

elow, please comp					
					(0.7
(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
				004 050	
775,107.	346,300.	419,900.	1,992,947.	894,852.	4,429,106.
201,155.	248,088.	283,671.	318,006.	451,618.	1,502,538.
				. AS	
n					
	4				
269,278.	249,951.	333,654.	262,136.	405,492.	1,520,511.
	844,339.	1,037,225.	2,573,089.	1,751,962.	7,452,155.
459,036.	75,396.	95,570.	1,074,349.	476,898.	2,181,249.
					0.
459,036.	75,396.	95,570.	1.074.349.	476,898.	2,181,249.
	,				5,270,906.
(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
					7,452,155.
	145,547.				145,547.
	145,547.				145,547.
4,125.	3,751.	2,571.	1,085.		11,532.
Pro-				1,751,962.	7,609,234.
	first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3) organiz	ation,
ic Support Pe	rcentage	- l (A)		15	69.27 %
					75.06 %
				10	. 0 . 0 0 /0
		10 1 (0)		17	1.91 %
					2.14 %
2011 Schedule A,	Part III, line 17		dE is mare than G		
nd stop here. The organization did n	organization qual ot check a box on	ifies as a publicly s line 14 or line 19a	supported organization, and line 16 is mo	ation ore than 33 1/3%, a	and
on did not check a	box on line 14 10	a, or 19b, check th	nis box and see ins	structions	▶□
on did not check a	DOX OIT III O 14, 19	a, 5, 100, 0,100K ti	Sch	edule A (Form 99	0 or 990-EZ) 2012
	269,278. 269,278. 1,245,540. 459,036. (a) 2008 1,245,540. (b) 2008 1,245,540. (c) 2008 1,245,540. (d) 2008 1,245,540. (e) 2008 1,245,540.	269,278. 249,951. 1,245,540. 844,339. 459,036. 75,396. (a) 2008 (b) 2009 1,245,540. 844,339. 459,665. 993,637. The organization's first, second, thire is companied by the co	775,107. 346,300. 419,900. 201,155. 248,088. 283,671. 269,278. 249,951. 333,654. 1,245,540. 844,339. 1,037,225. 459,036. 75,396. 95,570. (a) 2008 (b) 2009 (c) 2010 1,245,540. 844,339. 1,037,225. 459,036. 75,396. 95,570. (b) 2009 (c) 2010 1,245,540. 844,339. 1,037,225. 145,547. 145,547. 145,547. 145,547. 145,547. 145,547. 2,571. 1,249,665. 993,637. 1,039,796. The organization's first, second, third, fourth, or fifth terms of the component of th	775,107. 346,300. 419,900. 1,992,947. 201,155. 248,088. 283,671. 318,006. 269,278. 249,951. 333,654. 262,136. 1,245,540. 844,339. 1,037,225. 2,573,089. 459,036. 75,396. 95,570. 1,074,349. 459,036. 75,396. 95,570. 1,074,349. (a) 2008 (b) 2009 (c) 2010 (d) 2011 1,245,540. 844,339. 1,037,225. 2,573,089. 145,547. (d) 2008 (d) 2019 (e) 2010 (e) 2010 (f) 2011 1,245,540. 844,339. 1,037,225. 2,573,089. 145,547. (e) 2010 (f)	775,107. 346,300. 419,900. 1,992,947. 894,852. 201,155. 248,088. 283,671. 318,006. 451,618. 269,278. 249,951. 333,654. 262,136. 405,492. 1,245,540. 844,339. 1,037,225. 2,573,089. 1,751,962. 459,036. 75,396. 95,570. 1,074,349. 476,898. 459,036. 75,396. 95,570. 1,074,349. 476,898. (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 1,245,540. 844,339. 1,037,225. 2,573,089. 1,751,962. 145,547. 145,547. 145,547. 1,039,796. 2,574,174. 1,751,962. 1,751,96

06495 1

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

Name of the organization

Employer identification number

54-1667557

THE BOOK ARTS PRESS, INC. Organization type (check one): Filers of: Section: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. Special Rules For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year

LHA 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)

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

mirm	DOOK	A DUC	DDDCC	INC
THE	BOOK	AKIS	PRESS,	TINC

54-1667557

Part I	Contributors (see instructions). Use duplicate copies of Part I if		1.4
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$\$	Person X 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 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
5		\$50,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$30,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.

06495_1

Employer identification number

THE	BOOK	ARTS	PRESS,	INC

54-1667557

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	Il space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$	Person Payroll Noncash X (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		\$	Person Payroll Noncash X (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		\$35,050.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10		\$46,744.	Person X 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
		\$	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
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Employer identification number

THE BOOK ARTS PRESS, INC.

54-1667557

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
7		71 220	11/19/12
		\$	11/19/12
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
8			
		\$70,000.	05/13/13
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
9		0.5.0.50	01/17/12
		\$35,050.	01/17/13
(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	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

THE BOOK ARTS PRESS, INC.

Employer identification number 54-1667557

Pai	rt I Organizations Maintaining Donor Advised	Funds or Other Similar Fund	ds or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line		
		(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 w	riting that the assets held in donor adv	vised funds
	are the organization's property, subject to the organization's e	xclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor ad	visors in writing that grant funds can b	be used only
•	for charitable purposes and not for the benefit of the donor or		
	impermissible private benefit?		
Pai	rt II Conservation Easements. Complete if the orga		
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or ed		nistorically important land area
	Protection of natural habitat	parameter 1	ertified historic structure
	Preservation of open space		
0	Complete lines 2a through 2d if the organization held a qualifie	nd conservation contribution in the for	m of a conservation easement on the last
2		ed conservation contribution in the len	II or a comocination can be a company to the compan
	day of the tax year.		Held at the End of the Tax Year
i e	Total number of conservation easements		
a	Total acreage restricted by conservation easements		
b			
С	Number of conservation easements on a certified historic structure. Number of conservation easements included in (c) acquired af		
d			2d
	listed in the National Register Number of conservation easements modified, transferred, rele		
3		ased, extilliguished, or terminated by t	The organization doming the tax
	year -	ament is lessted	
4	Number of states where property subject to conservation ease	discontinuo inconstina handling	- -
5	Does the organization have a written policy regarding the period		
12	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting, a	and enforcing conservation easements	ag the year
7	Amount of expenses incurred in monitoring, inspecting, and en	nforcing conservation easements during	70(h)(4)(P)(i)
8	Does each conservation easement reported on line 2(d) above		Voc No
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservatio	n easements in its revenue and expen	se statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	on's financial statements that describe	es the organization's accounting for
	conservation easements. It III Organizations Maintaining Collections of	Art Historical Transumas or	Other Similar Assets
Pa			Offici offinial Association
	Complete if the organization answered "Yes" to Form 9		ament and halance sheet works of art
1a	If the organization elected, as permitted under SFAS 116 (ASC	5 958), not to report in its revenue state	rence of public conice provide in Part XIII
	historical treasures, or other similar assets held for public exhi		failce of public service, provide, in rare viii,
	the text of the footnote to its financial statements that describ	es these items.	and balance shoot works of art historical
b	If the organization elected, as permitted under SFAS 116 (ASC	3 958), to report in its revenue statement	ent and palance sneet works of air, insterior
	treasures, or other similar assets held for public exhibition, ed	ucation, or research in furtherance of p	bublic service, provide the following amounts
	relating to these items:		•
	(i) Revenues included in Form 990, Part VIII, line 1		
	(ii) Assets included in Form 990, Part X		i.i. and ide
2	If the organization received or held works of art, historical trea	sures, or other similar assets for finan	ciai gain, provide
	the following amounts required to be reported under SFAS 11	6 (ASC 958) relating to these items:	▶ \$
а	Revenues included in Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X		

Schedule D (Form 990) 2012

232051 12-10-12

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

4 Describe in Part XIII the intended to Part VI Land, Buildings, and	uses of the organization's endowment t Equipment. See Form 990, Part X,	funds. . line 10.		
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings	la car			
c Leasehold improvements		785,459.	22,642.	762,817.
d Equipment		204,223.	41,315.	162,908
e Other		(2) (() () ()		925,725

Part VII Investments - Other Securities. See	Form 990, Part X, line 12	•		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of value	uation: Cost or end	-of-year market value
(1) Financial derivatives	7 P. C.			
(2) Closely-held equity interests				
(3) Other				
(A) UVA FUND INVESTMENTS	1,604,553.	END-OF-YE		
(B) UVIMCO INVESTMENTS	7,677.	END-OF-YE	AR MARKET	VALUE
(C)				
(D)				
(E)			2 2 2	
(F)				
(G)				
(H)	X 1			
(1)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	1,612,230.			
Part VIII Investments - Program Related. See	Form 990, Part X, line 1	3.		
(a) Description of investment type	(b) Book value	(c) Method of value	uation: Cost or end	-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	man grander of the transfer of	V-AND TO THE RESERVE OF THE PERSON OF THE PE		
(8)				
(9)				
(10)			Table 1 see 1 a see 1 a	
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX Other Assets. See Form 990, Part X, line 1	5.			
				(I-) Dealerralise
(a) De	escription			(b) Book value
	escription			(b) Book value
(1)	escription			(b) Book Value
(1) (2)	escription			(b) Book value
(1) (2) (3)	escription			(b) Book value
(1) (2) (3) (4)	escription			(b) Book value
(1) (2) (3) (4) (5)	escription			(b) Book value
(1) (2) (3) (4) (5) (6)	escription			(b) Book value
(1) (2) (3) (4) (5) (6) (7)	escription			(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8)	escription			(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9)	escription			(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)				(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9)	15.)			(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. See Form 990, Part X, line	<i>15.</i>)	(b) Book value	•	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. See Form 990, Part X, lin 1. (a) Description of liability	<i>15.</i>)		>	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. See Form 990, Part X, lin 1. (a) Description of liability (1) Federal income taxes	<i>15.</i>)	5,230.		(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. See Form 990, Part X, line 1. (a) Description of liability (1) Federal income taxes (2) ACCRUED PAYROLL	<i>15.</i>)		>	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. See Form 990, Part X, lin 1. (a) Description of liability (1) Federal income taxes (2) ACCRUED PAYROLL (3) TUITION DEPOSITS	<i>15.</i>)	5,230.	•	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. See Form 990, Part X, lin 1. (a) Description of liability (1) Federal income taxes (2) ACCRUED PAYROLL (3) TUITION DEPOSITS (4)	<i>15.</i>)	5,230.	•	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. See Form 990, Part X, lin 1. (a) Description of liability (1) Federal income taxes (2) ACCRUED PAYROLL (3) TUITION DEPOSITS (4) (5)	<i>15.</i>)	5,230.	•	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. See Form 990, Part X, lin 1. (a) Description of liability (1) Federal income taxes (2) ACCRUED PAYROLL (3) TUITION DEPOSITS (4) (5) (6)	<i>15.</i>)	5,230.	>	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. See Form 990, Part X, line 1. (a) Description of liability (1) Federal income taxes (2) ACCRUED PAYROLL (3) TUITION DEPOSITS (4) (5) (6) (7)	<i>15.</i>)	5,230.	•	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. See Form 990, Part X, lin 1. (a) Description of liability (1) Federal income taxes (2) ACCRUED PAYROLL (3) TUITION DEPOSITS (4) (5) (6) (7) (8)	<i>15.</i>)	5,230.	•	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. See Form 990, Part X, line 1. (a) Description of liability (1) Federal income taxes (2) ACCRUED PAYROLL (3) TUITION DEPOSITS (4) (5) (6) (7) (8) (9)	<i>15.</i>)	5,230.	>	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. See Form 990, Part X, line (a) Description of liability (1) Federal income taxes (2) ACCRUED PAYROLL (3) TUITION DEPOSITS (4) (5) (6) (7) (8) (9) (10)	<i>15.</i>)	5,230.	•	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. See Form 990, Part X, line 1. (a) Description of liability (1) Federal income taxes (2) ACCRUED PAYROLL (3) TUITION DEPOSITS (4) (5) (6) (7) (8) (9)	15.)e 25.	5,230. 14,840.	•	

232053 12-10-12

liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Sche	edule D (Form 990) 2012 THE BOOK ARTS PRESS, INC.				107337	Page 4
Pa	TXI Reconciliation of Revenue per Audited Financial Stateme	nts With	Revenue per Ret	urn	1 065	105
1	Total revenue, gains, and other support per audited financial statements			1	1,865,	137.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	- · ·				
а	Net unrealized gains on investments	2a	191,510.			
b	Donated services and use of facilities	2b	405,492.			
С	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIII.)	2d				
е	Add lines 2a through 2d					002.
3	Subtract line 2e from line 1			3	1,268,	135.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)	4b	81,735.		0.1	
С	Add lines 4a and 4b			С		735.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)				1,349,	870.
Pa	T XII Reconciliation of Expenses per Audited Financial Statem	ents Wit	h Expenses per Re	eturn	1 464	0.4.1
1	Total expenses and losses per audited financial statements			1	1,464,	041.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities	2a	352,874.			
b	Prior year adjustments	2b				
С	Other losses	2c				
d	Other (Describe in Part XIII.)	2d			250	074
е	Add lines 2a through 2d			е		874.
3	Subtract line 2e from line 1			3	1,111,	16/.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)	4b	81,735.		0.1	505
С	Add lines 4a and 4b		4	С		735.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	1,192,	902.
	rt XIII Supplemental Information					
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II	I, lines 1a a	and 4; Part IV, lines 1b a	nd 2b;	Part V, line 4	; Part

X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. PART III, LINE 1A: THE SCHOOL EXPENSES THE COST OF COLLECTION ITEMS. THE

ACQUISITION AND PRESERVATION OF COLLECTIONS IS ESSENTIAL IN FULFILLING THE ORGANIZATION'S MISSION OF PROVIDING CONTINUING PROFESSIONAL EDUCATION FOR RESEARCH LIBRARIANS AND ARCHIVISTS, ACADEMICS, ANTIQUARIAN BOOKSELLERS, CONSERVATORS AND BOOKBINDERS, AND BOOK COLLECTORS. THE SCHOOL ASSUMES THE RESPONSIBILITY OF PRESERVING AND MAINTAINING, AT THE HIGHEST LEVEL, THEIR HISTORIC COLLECTIONS. DURING THE YEARS ENDED SEPTEMBER 30, 2013 AND 2012, THE SCHOOL PURCHASED LIBRARY COLLECTIONS TOTALING \$19,043 AND \$20,762,

Part XIII Supplemental Information (continued)

RESPECTIVELY. IN ADDITION, THE SCHOOL RECEIVED \$176,370 AND \$78,641 IN DONATED LIBRARY COLLECTIONS FOR THE YEARS ENDED SEPTEMBER 30, 2013 AND 2012, RESPECTIVELY.

PART III, LINE 4: THE SCHOOL HAS A TEACHING COLLECTION OF APPROXIMATELY 80,000 ITEMS RELATED TO THE HISTORY OF BOOKS AND PRINTING, INCLUDING MANUSCRIPT, PRINT, AND BORN-DIGITAL MATERIALS. EVERYTHING THAT WE ACQUIRE AND HOLD IN THE COLLECTIONS IS INSTRUCTIONAL MATERIAL OBTAINED FOR TEACHING PURPOSES AND IS INTERPRETED SPECIFICALLY FOR CLASSROOM USE. THE INSTRUCTIONAL MATERIALS DIRECTLY SUPPORT THE EDUCATIONAL MISSION OF THE SCHOOL.

PART V, LINE 4: RARE BOOK SCHOOL'S ENDOWMENT FUNDS ARE USED EXCLUSIVELY FOR OPERATING EXPENSES PURSUANT TO THE EDUCATIONAL MISSION OF THE SCHOOL.

PART X, LINE 2: THE ORGANIZATION HAS REVIEWED AND EVALUATED THE RELEVANT TECHNICAL MERITS OF EACH OF ITS TAX POSITIONS IN ACCORDANCE WITH GUIDANCE ESTABLISHED BY THE FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) AND DETERMINED THAT THERE ARE NO UNCERTAIN TAX POSITIONS THAT WOULD HAVE A MATERIAL IMPACT ON THE FINANCIAL STATEMENTS OF THE ORGANIZATION.

THE ORGANIZATION GENERALLY IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY U. S. FEDERAL, STATE, OR LOCAL TAX AUTHORITIES FOR YEARS BEFORE 2010.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

TUITION REDUCTIONS

81,735.

SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

OMB No. 1545-0047 2012

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Employer identification number 54-1667557		X Yes No	11.00	/, line ∠ i, ior any	(h) Purpose of grant or assistance				A A		
1	the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection		110000	es to rorm 990, ran i	(g) Description of non-cash assistance						
	for the grants or ass		\= \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \	mization answered in	(f) Method of valuation (book, FMV, appraisal, other)						
	grantees' eligibility		d States.	kompiete ii the orga Jed.	(e) Amount of non-cash assistance						
	or assistance, the		funds in the United S	funds in the United United States. Co	funds in the United	e united states. Usual space is need	(d) Amount of cash grant				listed in the line 1 table
S, INC.			oring the use of grant	be duplicated if addit	(c) IRC section if applicable				ganizations listed in that table		
ARTS PRES	substantiate the	ance?	sedures for monit	5,000. Part II can	(b) EIN				nd government or listed in the line		
Name of the organization THE BOOK ARTS PRESS, Part General Information on Grants and Assistance	Ses		2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	1 (a) Name and address of organization or government				2 Enter total number of section 501(c)(3) and government organizations listed in 3 Enter total number of other organizations listed in the line 1 table		

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THE BOOK ARTS PRESS, INC.

54-1667557

Page 2

Schedule I (Form 990) (2012) THE BOOK ARTS PRESS, INC.

| Part III | Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
TUITION REDUCTIONS	72	0.		81,735.BOOK VALUE - COST	THE ORGANIZATION PROVIDED NON-CASH SCHOLARSHIPS TO PARTICIPANTS IN THE FORM OF REDUCTED TUITION.
Part IV Supplemental Information. Complete this part to provide the information required in Part II, line 2, Part III, column (b), and any other additional information.	vide the information	n required in Part I,	line 2, Part III, colum	in (b), and any other additional in	formation.
SCHEDULE I, PART I, LINE 2: THE OI	RGANIZATI	ON MAINTAI	THE ORGANIZATION MAINTAINS RECORDS	SUPPORTING	
THE SELECTION CRITERIA USED TO AW	AWARD SCHOL	SCHOLARSHIPS AND	D FINANCIAL	AL AID, WHICH	
ALSO INCLUDES THE AMOUNTS AWARDED	AND	RECIPIENT NAMES.	Š		

Schedule I (Form 990) (2012)

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

Name of the organization THE BOOK ARTS PRESS, INC. Employer identification number 54-1667557

Par	t I Types of Property				·			
		(a) Check if applicable	(b) Number of contributions or	(c) Noncash contribution amounts reported on	Method of one noncash contribution			A
	A N. W. I. See a		items contributed	Form 990, Part VIII, line 1g				
1	Art · Works of art					-		
2	Art - Historical treasures							
3	Art - Fractional interests	X		176 370	APPRAISAL			
4	Books and publications	Λ		170,370.	ATT TATE OF THE			
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							-
9	Securities · Publicly traded							
10	Securities - Closely held stock							
11	Securities · Partnership, LLC, or trust interests							
12	Securities · Miscellaneous		11 -0			4.		
13	Qualified conservation contribution - Historic structures							
14	Qualified conservation contribution - Other					A policy and		
15	Real estate - Residential							
16	Real estate · Commercial					2 %		
17	Real estate - Other							
18	Collectibles						24 62	- 1
19	Food inventory						7	
20	Drugs and medical supplies						. 1	
21	Taxidermy						8	
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts			and the second s	SEL 2 DE 201 CAS AN	1 (c) (d) 1 (d)	90 U	en/ :
25	Other ()							
26	Other ()					A property	112 11	
27	Other ()		W 60 3 02 3/3 1	4 15 X X X X X X X X X X X X X X X X X X	The state of the state of	8 X ²² = 10	A P IN	н .
28	Other ()					1		
29	Number of Forms 8283 received by the organi	zation durin	a the tax year for a	contributions				
29	for which the organization completed Form 82						3	
	for which the organization completed form oz	.oo, raitiv,	Dones Acknowled	gernerit		Y	es	No
20-	During the year, did the organization receive b	v contributio	on any property re	ported in Part I lines 1-28 th	at it must hold for			
Sua	at least three years from the date of the initial							
					ipt parposes for	30a	300000	Χ
	the entire holding period?					. 000		
	If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance	- alian that r	acuirae tha raviou	of any non-standard contrib	utions?	31		Х
31						. 01		
	Does the organization hire or use third parties contributions?					32a		X
b	If "Yes," describe in Part II.							
33	If the organization did not report an amount in describe in Part II.	column (c)	for a type of prope	rty for which column (a) is ch	recked,			

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

THE BOOK ARTS PRESS, INC.

Employer identification number 54-1667557

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
SEMINAR-STYLE CLASSES TAUGHT BY AN INTERNATIONAL FACULTY OF
DISTINGUISHED SCHOLARS AND PROFESSIONALS, RARE BOOK SCHOOL FOSTERS THE
KNOWLEDGE AND EXPERTISE ESSENTIAL TO THE RESPONSIBLE STEWARDSHIP OF THE
HISTORICAL ARCHIVE IN ALL ITS RICHNESS AND PLURIFORMITY. PROMOTING A
SPIRIT OF LEARNING AND INTELLECTUAL GENEROSITY, RARE BOOK SCHOOL BUILDS
AND ENRICHES RELATIONSHIPS AMONG BOOKSELLERS, COLLECTORS, CONSERVATORS,
EDUCATORS, LIBRARIANS, AND OTHER INDIVIDUALS FROM AROUND THE GLOBE TO
CREATE A COMMUNITY EQUIPPED TO ADVANCE HISTORICALLY INFORMED
UNDERSTANDINGS OF OUR CULTURAL HERITAGE.
FORM 990, PART VI, SECTION B, LINE 11: THE SCHOOL'S FORM 990 IS PROVIDED
TO THE ENTIRE BOARD OF DIRECTORS FOR REVIEW PRIOR TO FILING.
FORM 990, PART VI, SECTION B, LINE 12C: DURING THE YEAR, THE EXECUTIVE
DIRECTOR MONITORS FOR POTENTIAL CONFLICTS OF INTEREST. ANNUALLY, THE BOARD
REVIEWS THE CONFLICT OF INTEREST POLICY AND DISCLOSES ANY POTENTIAL
CONFLICTS OF INTEREST.
FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION FOR THE SCHOOL'S
EXECUTIVE DIRECTOR IS DETERMINED BY THE UNIVERSITY OF VIRGINIA, AN
AFFILIATED ORGAIZATION.

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

Schedule O (Form 990 or 990-EZ) (2012)

FORM 990, PART VI, SECTION C, LINE 18: THE SCHOOL'S FORM 1023 AND FORM 990

ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

Name of the organization THE BOOK ARTS PRESS, INC.	54-1667557
FORM 990, PART VI, SECTION C, LINE 19: THE SCHOOL'S GOVERN	NING DOCUMENTS
AND AUDITED FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBL	LIC UPON REQUEST.
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
DONATED SERVICES CAPITALIZED	52,618.
PART XII, LINE 2C	
SELECTION OF INDEPENDENT AUDITORS	<u> </u>
THE ORGANIZATION'S BOARD OF DIRECTORS HAS AN AUDIT COMMIT	TEE THAT IS
RESPONSIBLE FOR THE SELECTION AND RETENTION OF INDEPENDENT	T AUDITORS.
THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.	