Form **990**

Department of the Treasury Internal Revenus Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

► Information about Form 990 and its Instructions is at www.irs.gov/form990.

2014
Open to Public Inspection

~	LOL II	ie 2014 Calendar year, or tax year beginning OCT I, 2014 and	ending 5	EF JU, ZU	13
_	Check i	C Name of organization			ntification number
Г	Add	THE BOOK ARTS PRESS, INC.		ļ	
F	Nam	Doing business as RARE BOOK SCHOOL		54	-1667557
Ē	Initia		Room/suite	E Telephone nu	
Ē	Fina	114 ALDEDMAN LIDDADY	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		4-924-8851
	term	n. lo		G Gross receipts \$	1,072,884.
		OUNDIOMINESTITE TO COOL		H(a) Is this a grow	
	Appl				nates? Yes X No
	pend	SAME AS C ABOVE			ales included? Yes No
T	Tax-ex	cempt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1)	or 527	1	ch a list. (see instructions)
J	Webs	ite: ▶ WWW.RAREBOOKSCHOOL.ORG		1	ption number
		of organization: X Corporation Trust Association Other	L Year	of formation: 198	3 M State of legal domicile: VA
	art I				
60	1	Briefly describe the organization's mission or most significant activities: ADVO	CACY,	EDUCATION	AND OUTREACH
Activities & Governance	1	FOR THE STUDY OF THE HISTORY OF BOOKS, P			
Ę.	2	Check this box if the organization discontinued its operations or dispose	sed of more	than 25% of its no	et assets.
ove	3	Number of voting members of the governing body (Part VI, line 1a)			3 20
ڻ مح	4	Number of independent voting members of the governing body (Part VI, line 1b)			420
SS	5	Total number of individuals employed in calendar year 2014 (Part V line 2a)			5 35
Ϋ́	6	Total number of volunteers (estimate if necessary)		$_{A}\bigcup (\bigcap $	6 21
Ċţ	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			7a 0.
•	b	Net unrelated business taxable income from Form 990-T, line 34			7b 0.
				Prior Year	Current Year
a	В	Contributions and grants (Part VIII, line 1h)		2,147,94	
Ĕ	9	Program service revenue (Part VIII, line 2g)		495,05	5. 601,790.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)			0. 0.
Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		7,43	9. 7,729.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,650,43	6. 1,069,893.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		122,40	
	14	Benefits paid to or for members (Part IX, column (A), line 4)			0. 0.
Ŋ	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		482,26	2. 633,072.
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)			0. 0.
ē	Ь	Total fundraising expenses (Part IX, column (D), line 25) 134,72	27.		
ŭ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		758,51	9. 627,251.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,363,18	
	19	Revenue less expenses. Subtract line 18 from line 12		1,287,25	
Net Assets or Fund Balances				inning of Current Ye	
Ses	20	Total assets (Part X, line 16)		5,471,49	
SEG	21	Total liabilities (Part X, line 26)		64,71	
ᇎ	22	Net assets or fund balances. Subtract line 21 from line 20		5,406,78	
P	art II	Signature Block	A		
Und	er pena	alties of perjury, I declare that I have examined this return, including accompanying schedules	and stateme	nts, and to the best	of my knowledge and belief, it is
true	, corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of wh	i ch preparer l	nas any knowledge.	
Sig	n	Signature of officer		Date	
Her		MICHAEL F. SUAREZ, EXECUTIVE DIRECTOR			
		Type or print name and title			
		Print/Type preparer's name Preparer's signature	Da	ate Check	_
Paid	l	MATTHEW J. DEAN		seif-ei	mployed P00961509_
Prep	arer	Firm's name HANTZMON WIEBEL LLP, CPA'S		Firm's EIN	<u>54-0618213</u>
Use	Only	Firm's address 818 E. JEFFERSON ST., P.O. BOX 1	L408		
		CHARLOTTESVILLE, VA 22902		Phone no.	(434)296-2156
Mav	the I	RS discuss this return with the preparer shown above? (see instructions)			X Yes No

	m 990 (2014) THE BOOK ARTS PRESS, INC. 54-1667557 Pag	<u>e 2</u>
Pa	art III Statement of Program Service Accomplishments	
	<u> </u>	X
_		<u> </u>
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	
-		
		40
	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?	Vo
	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	Total	
	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 2015, 457 STUDENTS TOOK 37 COURSES.	_
		—
		_
	AND EDUCATORS STUDIED TOPICS THAT RANGED FROM MEDIEVAL MANUSCRIPTS AND	
	BOOKBINDING TO BORN-DIGITAL MATERIALS AND TEXTUAL ENCODING.	
		_
		—
4b	(Code:) (Expenses \$ 42,859 . including grants of \$) (Revenue \$)
	RARE BOOK SCHOOL HAS A TEACHING COLLECTION OF APPROXIMATELY 80,000	- '
	ITEMS 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	
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4c	INSTRUCTIONAL PURPOSES AND SUPPORT THE EDUCATIONAL MISSION OF THE SCHOOL. (Code) (Expenses \$	
4c	INSTRUCTIONAL PURPOSES AND SUPPORT THE EDUCATIONAL MISSION OF THE SCHOOL. (Code) (Expenses \$ 274,172. including grants of \$) (Revenue \$) (Revenue \$) RARE BOOK SCHOOL PROVIDES AN ONGOING SERIES OF WIDELY ADVERTISED, FREE	
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Form 990 (2014) THE BOOK ARTS PRESS, INC.
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	1_	X	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	<u> </u>
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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	simllar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			l
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II.	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	х	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	<u> </u>
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VII	11b	Х	
С	Did the organization report an amount for investments · program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			v
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	v	X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
T	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		v	
10-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	\vdash
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40-	х	
	Schedule D, Parts XI and XII	12a		_
D	Was the organization included in consolidated, independent audited financial statements for the tax year?	10h		Х
13	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	140		
U	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
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	X	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19_		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form	990 (2014)

Form 990 (2014) THE BOOK ARTS PRES
Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 17 if "Yes," complete Schedule I, Parts I and II	21	X	<u> </u>
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		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 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Dld the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	-		
20	instructions for applicable filing thresholds, conditions, and exceptions):		1	
-	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		22
C		28c		X
00	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	29	х	72_
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Λ	_
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	20	x	
	contributions? If "Yes," complete Schedule M	30	Α	
31	Did the organization liquidate, terminate, or dissolve and cease operations?			v
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			77
	Schedule N, Part II	32	-	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			12
	sections 301.7701-2 and 301.7701-37 If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? if "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197			
	Note. All Form 990 filers are required to complete Schedule O	38	X	

Form **990** (2014)

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-	Check if Schedule O contains a response or note to any line in this Part V				
	Check it Generale O contains a response of note to any line in this Part V			Yes	No
19	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 0		Tes	No
h	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	10	4		
	Did the organization comply with backup withholding rules for reportable payments to vendors and		1		
Ū	(gambling) winnings to prize winners?		10		
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		10		
20	filed for the calendar year ending with or within the year covered by this return	2a 35			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax retu		2b	х	
-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction				\vdash
За			3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule		3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other		00		
74	financial account in a foreign country (such as a bank account, securities account, or other financial		4a		X
h	If "Yes," enter the name of the foreign country:	Baoodings ,	7.0		<u> </u>
~	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
Ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa		5b		X
	Mindra Ray II and an analysis of the second		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the		30		
va			6a		X
h	If "Yes," did the organization include with every solicitation an express statement that such contributions	ions or alfts	- 00		
	man make a state of the state of		6b		
7	Organizations that may receive deductible contributions under section 170(c).		0.5		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	vides provided to the payor?	7a		X
	and the latest and th	Tions provided to the payor.	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w				
•	to file Form 8282?		7c		Х
А	If "Yes," indicate the number of Forms 8282 filed during the year	7d	-, -		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		7e		X
1	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contri		71		X
	If the organization received a contribution of qualified intellectual property, did the organization file Fo		7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained				
-	sponsoring organization have excess business holdings at any time during the year?	<i>y</i>	8	ı	
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	9b		
0	Section 501(c)(7) organizations. Enter:			Ī	
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		ı	
1	Section 501(c)(12) organizations. Enter:				
а	Gross income from members or shareholders	11 <u>a</u>			
	Gross income from other sources (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)	11b			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.				
	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	,			
	organization is licensed to issue qualified health plans	13b			
С	Enter the amount of reserves on hand	13c			
	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule	0	14b		

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	n 990 (2014) THE BOOK ARTS PRESS, INC. 54-1667 rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a			age 6 se
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.		•	
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing]		
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 20			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1 1		
	officer, director, trustee, or key employee?	2		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?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	X	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b	х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			_
а	The governing body?	8a	X	
b		8b	Х	
9	is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
-	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
_	in Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
	Other officers or key employees of the organization	15b	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?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
_	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
	List the states with which a copy of this Form 990 is required to be filed NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vailabl	е	
	for public inspection, Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	finanç	ial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
	THE ORGANIZATION - 434-924-8851			
	114 ALDERMAN LIBRARY, CHARLOTTESVILLE, VA 22904			

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, 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.

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

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

Telated organizations below line Telated organizations Telated or	from the ganization /1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization
CHAIR X X (2) PROF. ROBERT A. GROSS 2.00 VICE-CHAIR X X (3) MR. GIOVANNI FAVRETTI 2.00 X SECRETARY X X (4) MS. JOAN M. FRIEDMAN 2.00 X TREASURER X X (5) MR. TERRY BELANGER 2.00 X DIRECTOR X X (6) MR. J. SELBY KIFFER 2.00 X DIRECTOR X X (7) MR. JOHN T. CASTEEN, III 2.00 X (8) MR. JON LINDSETH 2.00 X DIRECTOR X X (9) MR. DON FRY 2.00 X			and related organizations
VICE-CHAIR	0.	0.	0.
X X X X X X X X X X	0.	0.	0.
X X X X X X X X X X	0.	0.	0.
DIRECTOR	0.	0.	0.
DIRECTOR	0.	0.	0.
DIRECTOR X	0.	0.	0.
DIRECTOR X (9) MR. DON FRY 2.00	0.	0.	0.
(9) MR. DON FRY 2.00	0.	0.	0.
DIRECTOR X X	0.	0.	0.
(10) MS. FLORENCE FEARRINGTON 2.00 X	0.	0.	0.
(11) MS, MARY C, SCHLOSSER 2.00 X	0.	0.	0.
(12) MR, ARTHUR L. SCHWARZ 2.00 X	0.	0.	0.
(13) MR, HANS E, TAUSIG 2.00 X	0.	0.	0.
(14) MR, JAMES N. GREEN 2.00 X	0.	0.	0.
(15) MS. BEPPY OWEN 2.00 X	0.	0.	0.
(16) MS. SZILVIA SZMUK-TANENBAUM 2.00 X	0.	0.	0.
(17) MR. EDWARD LEAHY 2.00 X	0.	0.	0.

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Name and title	Average Position (do not check more than one box, unless person is both as officer and a director/trustee)					than is bol	th en	Reportable compensation from	Reportable compensation from related			stimat nount olher	of
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trostee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	fr org an	pensa rom th panizal d relat anizat	e tion ted
(18) MR. JOHN CRICHTON	2.00												^
DIRECTOR	2.00	X	-		 		-	0.		0.		_	0.
(19) MS. MARY E. CRAWFORD DIRECTOR	2.00	X						0.		٥.			0.
(20) MR. MICHAEL F. SUAREZ	40.00												
PRESIDENT		_	L	X				0.		0.			0.
<u> </u>									<u> </u>	\dashv			
	_												
										\dashv			
			П										
							-			\dashv			
1b Sub-total						<u> </u>		0.		0.			0.
c Total from continuation sheets to Part VI							ı	0.		0.			0.
d Total (add lines 1b and 1c)								0.		0.			0.
2 Total number of individuals (including but n	ot limited to th	ose	liste	d ab	ove) wh	o re	ceived more than \$100.	,000 of reportable				_
compensation from the organization												Yes	No
2 Did the exemination list and 4	director	-4			1		a - b	:-b	malayaa oo	Г		res	NO
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s											3		X
4 For any individual listed on line 1a, is the su											Ŭ		
and related organizations greater than \$150										[4		Х
5 Did any person listed on line 1a receive or a	ccrue comper	sati	on fr	om	any	unre	elate	d organization or individ					
rendered to the organization? If "Yes," com	<u>plete Schedule</u>	J fo	or su	ch p	oe <u>r</u> se	<u>оп</u> .,					5_		X
Section B. Independent Contractors													
 Complete this table for your five highest contains the organization. Report compensation for the compensation. 	•	•								ensa	mon i	rom	
(A)	ille calelloal ye	3AI 6	пин	ig w	ICI I C	N VVI	1	(B)	oai.		(C	; }	
Name and business	address	NC	NE	ı I				Description of se	ervices	Co		nsatio	n
	<u> </u>								-				
							\perp						
							+						
				_			\top						
			_										
2 Total number of independent contractors (in	_	ot lin	nited	to t	hos 0	e lisi	ted a	above) who received me	ore than				
\$100,000 of compensation from the organiz	ation				Ų			7			Form!	990 (2014)
460000											,	- (-	/

15170203 700786 06495

			se or note to any l	ine in this Part VIII			
		Check if Schedule O contains a respon	se or note to any i	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from lax under sections 512 - 514
nts	1	a Federated campaigns 1a					
irai our		b Membership dues 1b		7			
S, C		c Fundraising events 1c					
Sift.		d Related organizations 1d		7			
S.E.		e Government grants (contributions) 1e		7			
tion S		f All other contributions, gifts, grants, and		1			
Contributions, Gifts, Grants and Other Similar Amounts		similar amounts not included above 1f	460,374.	,			
		9 Noncash contributions included in lines 1a-1f; \$	71,517.				
<u> </u>		h Total, Add lines 1a-1f		460,374.			
			Business Code				
çe	2	a TUITION REVENUE	611600	601,790.	601,790.		
هِ کَمَ		b					
Program Service Revenue		c					
lev.		d					
90		e					
₫		f All other program service revenue					
_		g Total. Add lines 2a-2f		601,790.		<u> </u>	
	3	Investment income (including dividends, Int					
		other similar amounts)					
	4	Income from investment of tax-exempt bond	•				
	5	Royalties				<u> </u>	
		(i) Real	(ii) Personal				
	6			ļ			
	1	b Less: rental expenses		ļ			
	1	c Rental income or (loss)					
		d Net rental income or (loss)					
	7 :	a Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory					
	'	b Less; cost or other basis					
		and sales expenses					
		c Gain or (loss)					
		d Net gain or (loss)				 -	
9	8 8	a Gross income from fundraising events (not					
Other Revenu		including \$ of					1
a		contributions reported on line 1c). See					
je		Part IV, line 18	a b				
ō		Less: direct expenses Net income or (loss) from fundraising events	P				
		Gross income from gaming activities. See					
	3 6	Part IV, line 19	.				İ
			b				
ı		Net income or (loss) from gaming activities		1			
ĺ		Gross sales of inventory, less returns					
		and allowances	10,690.				
	Ŀ	Less: cost of goods sold	2,991.				
		Net income or (loss) from sales of inventory		7,699.	7,699.		
		Miscellaneous Revenue	Business Code		7,000		
	11 a		900099	30.	30.		
	ь						
	c						
	d	All other revenue					
	е	Total. Add lines 11a-11d		30.			
	12	Total revenue. See instructions.		1,069,893.	609,519.	0.	0.
32009 1-07-	14	——————————————————————————————————————					Form 990 (2014)

Form 990 (2014) THE BOOK ARTS PRESS, INC. Part IX Statement of Functional Expenses

Sec	tion 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All oth	ner organizations must co	omplete column (A).	
	Check if Schedule O contains a respon	nse or note to any line in	this Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(Å) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	and domestic governments. See Part IV, line 21	8,000.	8,000.		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	351,431.	351,43 <u>1</u> .		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	15,018.	15,018.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
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	524,180.	403,510.	40,963.	<u>79,707</u>
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	108,892.	86,464.	5,483.	16,945
10	Payroli taxes		20, 2021		
11	Fees for services (non-employees):				
а	Management	4,400.		4,400.	
b					
С		14,534.		14,534.	
d					
е	Professional fundraising services. See Part IV, line 17				
ť	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.)				
12	Advertising and promotion	16,039.	16,039.		_
13	Office expenses	69,992.	51,013.	6,429.	12,550
14	Information technology				
15	Royalties				
16	Occupancy	5,883.	5,131.	406.	346
17	Travel	94,375.	84,472.	4,427.	<u>5,476.</u>
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	76,241.	69,178.	2,523.	4,540
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	81,369.	61,448.	10,786	9,135.
23	Insurance	3,054.		3,054.	
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.)				
а	FACULTY HONORARIA	128,780.	128,780.		
b	COLLECTION/REF MATERIAL	43,517.	43,517.		
С	CLASSROOM SUPPLIES	32,418.	32,418.		
d					
е	All other expenses	56,649.	20,847.	29,774.	6,028.
25	Total functional expenses. Add lines 1 through 24e	1,634,772.	1,377,266.	122,779.	134,727.
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 (2014)

Part X	Balance Sheet			
	Check if Schedule O contains a response or note to any line in this Part X			
		(A) Beginning of year		(B) End of year
1	Cash · non-interest-bearing	1,299,148.	1	651,703
2	Savings and temporary cash investments		2	
3	Pledges and grants receivable, net	112,941.	3	69,494
4	Accounts receivable, net	3,615.	4	934
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees. Complete			
	Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under			
	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary		i	
,	employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
7	Notes and loans receivable, net		7	
2 8	Inventories for sale or use	12,572.	8	14,103
9	Prepaid expenses and deferred charges	6,013.	9	7,620
-	Land, buildings, and equipment; cost or other	0,0131	Ŭ	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
100	basis. Complete Part VI of Schedule D 10a 1,050,902.			
	Less: accumulated depreciation 10b 206, 450.	892,950.	100	844,452
	Investments - publicly traded securities	092,3301	11	011/102
11 12	Investments - publicly traded securities Investments - other securities. See Part IV, line 11	3,138,490.	12	3,438,227
13	Investments - program-related. See Part IV, line 11	3,130,430.	13	3/250/22/
1 '			14	
14	Intangible assets	5,767.	15	0
16	Other assets. See Part IV, line 11	5,471,496.	16	5,026,533
17	Total assets. Add lines 1 through 15 (must equal line 34) Accounts payable and accrued expenses	24,553.	$\overline{}$	15,091
18	Grants payable	24,3331	18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	Loans and other payables to current and former officers, directors, trustees,		-	<u> </u>
22	key employees, highest compensated employees, and disqualified persons.			
22			22	
م ا ڐ	Complete Part II of Schedule L Secured mortgages and notes payable to unrelated third parties		23	
23	Unsecured notes and loans payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties		24	
24	Other liabilities (including federal income tax, payables to related third			
25	parties, and other liabilities not included on lines 17-24). Complete Part X of			
		40,162.	25	57,615
00	Schedule D Total liabilities. Add lines 17 through 25	64,715.	26	72,706
26	Organizations that follow SFAS 117 (ASC 958), check here ► X and	04,7131	_20	12,100
.		ľ		
š	complete lines 27 through 29, and lines 33 and 34.	1,993,258.	27	2,081,561
27 28 29 30 31 32	Unrestricted net assets	2,321,109.	28	1,776,189
28	Temporarily restricted net assets Permanently restricted net assets	1,092,414.	29	1,096,077
29	Organizations that do not follow SFAS 117 (ASC 958), check here	1,002,414.	20	1,030,011
	and complete lines 30 through 34.		30	
30	Capital stock or trust principal, or current funds		31	
31	Paid-in or capital surplus, or land, building, or equipment fund		32	
32	Retained earnings, endowment, accumulated income, or other funds	5,406,781.	33	4,953,827
33	Total net assets or fund balances	5,471,496.	34	5,026,533
34	Total liabilities and net assets/fund balances	O, #/1, #70 *	34	Form 990 (2014

	n 990 (2014) THE BOOK ARTS PRESS, INC.	54-16	<u> </u>	Pag	ge 12
Pa	art XI Reconciliation of Net Assets				_
	Check if Schedule O contains a response or note to any line in this Part XI				<u> </u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1 _	<u>1,06</u>		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,63		
3	Revenue less expenses. Subtract line 2 from line 1	3	-56		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	5,40	<u>6,7</u>	<u>81.</u>
5	Net unrealized gains (losses) on investments	5	11:	1,9	<u> 25.</u>
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8	_		
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	4,953	3,8	27.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XI!			*1*)~	X
				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	0.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed		·		
	separate basis, consolidated basis, or both:	011 0			
	Separate basis Consolidated basis Both consolidated and separate basis				
h	Were the organization's financial statements audited by an independent accountant?		2b	x	
_	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate				
	consolidated basis, or both:	, 500101,			
	X Separate basis Consolidated basis Both consolidated and separate basis				
	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit	1 1		
•	review, or compilation of its financial statements and selection of an independent accountant?		2c	x	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche		20	-	
32	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin				
Ja	Act and OMB Circular A-133?	gie Addit	3a		X
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit	· 3a		41
U	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	SU AUUIL	3b		
	or addits, sopiain why in ocheous o and describe any steps taken to undergo such addits		Form	390 #	2014
			COULT 4	200 (4014)

SCHEDULE A

(Form 990 or 990-EZ)

Name of the organization

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

2014

Open to Public inspection

Employer identification number

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ.

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

54-1667557 THE BOOK ARTS PRESS, INC. 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.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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 in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization(s). (I) Name of supported (ii) EIN (iv) Is the organization (v) Amount of monetary (vi) Amount of (iii) Type of organization listed in your (described on lines 1-9 organization support (see other support (see governing document? above or IRC section Instructions) Instructions) (see instructions))

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Schedule A (Form 990 or 990-EZ) 2014

Schedule A (Form 990 or 990 EZ) 2014

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 or if the organization falled to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Se	ction A. Public Support										
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total				
1	Gifts, grants, contributions, and	-									
	membership fees received. (Do not										
	include any funusual grants.")										
2	Tax revenues levied for the organ-										
	ization's benefit and either paid to										
	or expended on its behalf										
3	The value of services or facilities			i							
-	furnished by a governmental unit to										
	the organization without charge										
4							-				
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	İ									
	amount shown on line 11,										
	column (f)										
6	Public support. Subtract line 5 from line 4.				_						
	ction B. Total Support		<u> </u>	<u> </u>							
	ndar year (or fiscal year beginning In)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total				
	Amounts from line 4	(4) 2010	(0) 2011	(0) 2012	(0) 2010	(0) = 0	1,7,				
	Gross income from interest,			-							
•	dividends, payments received on										
	securities loans, rents, royalties	ļ					1				
	and income from similar sources				1						
٥	Net income from unrelated business			-		-					
•	activities, whether or not the										
	business is regularly carried on										
10	Other income. Do not include gain										
10	or loss from the sale of capital										
	assets (Explain in Part VI.)										
44	Total support. Add lines 7 through 10			-							
	Gross receipts from related activities,	eto /coo instructi				12					
	First five years. If the Form 990 is for										
10	organization, check this box and stop				•	•					
Sec	tion C. Computation of Publ	ic Support Pe	rcentage		***********************	***************************************					
_	Public support percentage for 2014 (I			column (fi)		14	%				
	Public support percentage from 2013						%				
	33 1/3% support test - 2014. If the o										
	stop here. The organization qualifies										
b	33 1/3% support test - 2013. If the o										
-	and stop here. The organization quali	=									
17a	10% -facts-and-circumstances test										
	and if the organization meets the "fac										
	meets the "facts-and-circumstances"										
Ь	10% -facts-and-circumstances test	_	•		•						
D	more, and if the organization meets th										
	organization meets the "facts-and-circ										
18	Private foundation. If the organization		-		•		ns				
	THE TOURS OF THE PROPERTY AND THE PROPER	. SIG HOLDHOOK & I	on on mic 10, 100	<u>., .00, 178, 01 170</u>			0 or 990-F7\ 2014				

432022 09-17-14

Schedule A (Form 990 or 990-EZ) 2014 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 com	plete Part II.)				_
Section A. Public Su			-				
Calendar year (or liscal year	beginning in) 📂	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
 Gifts, grants, contribu 	itions, and						
membership fees rec	eived. (Do not						
include any "unusual	grants.")	419,900.	1,992,947.	894,852.	2,156,866.	460,374.	5,924,939,
2 Gross receipts from a merchandise sold or formed, or facilities fu any activity that is rel- organization's tax-exe	services per- rnished in ated to the	283 671	318,006.			601,790.	2.150.140.
3 Gross receipts from a		203/0/10	320,0001	101 /010.	433,0331	0027.501	2,130,110,
are not an unrelated t							
iness under section 5	************						
4 Tax revenues levied for ization's benefit and e or expended on its be	ither paid to						
5 The value of services							
furnished by a govern		222 654	262 126	405 400	260 010	405 704	4 054 004
the organization without	- 1111	333,654.	262,136.	405,492.		485,794.	1 856 094.
6 Total. Add lines 1 thro		1,037,225,	2,573,089.	1,751,962.	3,020,939.	1,547,958.	9,931,173,
7a Amounts included on						!	
3 received from disqu	alified persons	99,070.	1,078,349.	311,898.	1,766,588.	94,974.	3,350,879.
b Amounts included on lines 2 from other than disqualified p exceed the greater of \$5,000 amount on line 13 for the year	ersons that or 1% of the						0.
c Add lines 7a and 7b		99,070.	1,078,349,	311,898.	1,766,588,	94,974.	3 350 879.
8 Public support (Subtract		3370.00	1,070,343.	31170301	1,700,300.	3 - 7 - 3 - 3	6 580 294
Section B. Total Sup							0,300,234.
alendar year (or fiscal year l		(=) 2010	(L) 2011	(=) 0010	(4) 2013	(e) 2014	(f) Total
- ,		(a) 2010	(b) 2011	(c) 2012	(d) 2013		
9 Amounts from line 6 10a Gross income from int dividends, payments r securitles loans, rents and income from simil	erest, eceived on , royalties	1,037,225,	2,573,089,	1,751,962.	3,020.939.	1,547,958,	9,931,173,
b Unrelated business taxab	le income						
(less section 511 taxes) (acquired after June 30, 1	1				_		
c Add lines 10a and 10b	· [
11 Net income from unrel activities not included whether or not the bus regularly carried on	in line 10b,						
Other income. Do not or loss from the sale or assets (Explain in Part	f capital	2,571.	1,085.	·	1,314.	30.	5,000.
13 Total support. (Add lines 8		1,039,796.	2,574,174	1,751,962.	3,022,253.	1,547,988.	9,936,173,
14 First five years. If the	Form 990 is for	the organization's	first, second, third	, fourth, or fifth ta	x year as a section	n 501(c)(3) organiza	ation,
check this box and sto	p here						
ection C. Computat	tion of Public					10 3	
15 Public support percen				olumn (fl)		15	66.23 %
16 Public support percen					[16	62.94 %
Section D. Computat							
7 Investment income per				12 column (f)		17	.00 %
8 Investment income per	_					18	1.55 %
9a 33 1/3% support test							h 9 m
more than 33 1/3%, ch	s - 2013. If the c	organization did no	ot check a box on I	ine 14 or line 19a,	and line 16 is mo	re than 33 1/3%, a	and
line 18 is not more that							
O Private foundation. If	tne organization	i did not check a b	ox on line 14, 19a	, or 19b, check thi	s pox and see ins	tructions	

Schedule A (Form 990 or 990-EZ) 2014

432023 09-17-14

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A D, and F. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Sec	Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)			
500	Attorn A. All Supporting Organizations		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing		103	110
•	documents? If "No" describe in Part VI how the supported organizations are designated. If designated by	1		
	class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
_	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2).	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	(b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the	1		ŀ
	organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)			
	(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If			
	"Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination			
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used			
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
	answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action,			
	(iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action			
	was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already			
	designated in the organization's organizing document?	_ 5b		
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
	anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class			
	benefited by one or more of its supported organizations; or (c) other supporting organizations that also			
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in			
	Part VI.	6		_
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial			
	contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent	_		
_	controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7_		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 77			
_	If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more			
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described	0-		
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which	Oh		
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		_
С	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit	0-		
o	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
ua	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f)			
	(regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.	10a		
,	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	-:34		
	Die and digentiend neve eny excess besiness normige in the tex years (ose benedute o, i onn ti zv, to	1		

determine whether the organization had excess business holdings.)

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Schedule A (Form 990 or 990-EZ) 2014 THE BOOK ARTS PRESS, IN	ic.		54-1667557 Pag
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting			
1 Check here if the organization satisfied the Integral Part Test as a qualifying	g trust on	Nov. 20, 1970. See instr	uctions. All
other Type III non-functionally integrated supporting organizations must co	omplete Se	ctions A through E.	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
ection B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1 <u>a</u>		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see instructions).	4		
Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
B Minimum Asset Amount (add line 7 to line 6)	8		
ection C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount, Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functional	wintegrates	Type III supporting orga	anization (see

Schedule A (Form 990 or 990-EZ) 2014

instructions).

Schedule A (Form 990 or 990-EZ) 2014

e Excess from 2014

	mental	Informa	tion. Provide	e the expla	nations required (See instruction	by Part II,	line 10; Pari	II, line 17a or 1	7b; and Part III	, line 12.
SCHEDULE A,	PART	III,	LINE 1	2, EX	PLANATIO	N FOR	OTHER	INCOME:		
MISCELLANEOU	JS									
2010 AMOUNT	: \$	2,57	1.							
2011 AMOUNT	: \$	1,08	5							
2013 AMOUNT:	\$	1,314	1							
2014 AMOUNT:	\$	30.								
					_				<u> </u>	<u>.</u>
	_									
						<u> </u>				
					. <u>.</u> .					
	_			_						
	_									
	_									
								_		
			_							

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.

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

OMB No. 1545-0047

2014

Name of the organization Employer identification number THE BOOK ARTS PRESS, INC. 54-1667557 Organization type (check one): Filers of: Section: Form 990 or 990-EZ X 501(c)(3) (enter number) organization 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 For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) 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), that checked Schedule A (Form 990 or 990 EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions 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 an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled 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 totaling \$5,000 or more during the year ______ 🕨 \$ _ Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule 8 (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 its Form 990-PF, Part I, line 2, to

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) (2014)

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

Employer identification number

THE DOOK INTE TRADE, INC	THE	BOOK	ARTS	PRESS,	INC.
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54-1667557

Part I	Contributors (see instructions). Use duplicate copies of Part I if ac	dditional space is needed.	
(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		ss	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b)	(c) Total contributions	(d) Type of contribution
6		\$10,027.	Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer Identification number

THE BOOK ARTS PRESS, INC.

54-1667557

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ 50,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$ <u>14,936.</u>	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	<u></u>	\$ 10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10		\$10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11		s9, <u>250.</u>	Person X Payroll
(a) No.	(b)	(c) Total contributions	(d) Type of contribution
12	,	\$ 10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

TUE D	OUR ARTS PRESS, INC.	<u> </u>	4-1667557
Part i	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	 	\$10,068.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Occash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person Payroll Oncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

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Employer identification number

THE BOOK ARTS PRESS, INC.

54-1667557

Part II	Noncash Property (see instructions). Use duplicate copies of F	Part II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see Instructions)	(d) Date received
6	SIGMA ALDRICH CORP. STOCK		
		s 10,027.	11/16/14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
8	ORACLE CORP. STOCK	_	
		ssss	02/25/15
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
13	PEPSI CO. STOCK		
		\$\\$\\$\	11/20/14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_			
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Name of or	rganization	•		Employer identification number				
य समण	OOK ARTS PRESS, INC.			54-1667557				
Part III	Exclusively religious, charitable, etc., column the year from any one contributor. Complete completing Part III, enter the total of exclusively religious duplicate copies of Part III if addition	ous, charitable, etc., contributions of \$1,000 c	d in section $501(c)(7)$, (8) , 0 . Dwing line entry. For organization less for the year (Enter this ide. Once	r (10) that total more than \$1,000 for				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held				
	Transferee's name, address, a	(e) Transfer of git and ZIP + 4		nsferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held				
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee							
	Transferee 3 manie, address, a		Treationship of a c					
(a) No. from Part I	(b) Purpose of gift (c) Use of gift		(d) Desc	ription of how gift is held				
	(e) Transfer of gift							
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held				
-		(e) Transfer of giff	t					
	Transferee's name, address, a		nsferor to transferee					

SCHEDULE D

(Form 990)

Department of the Treasury

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.

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

OMB No. 1545-0047

Internal Revenue Service Employer identification number Name of the organization 54-1667557 THE BOOK ARTS PRESS, 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 Total number at end of year 1 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year 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? 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 Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space 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 Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, Inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ ____ 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)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III | Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Revenue Included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

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

-		K ARTS PRE					<u> 67557</u>				
Ра	rt III Organizations Maintaining (
3	Using the organization's acquisition, access	ion, and other record	ds, check any of the	following that are a	significant u	se of its c	ollection i	items			
	(check all that apply):										
а	Public exhibition	C		hange programs							
b	X Scholarly research	e	e X Other TE	ACHING							
C	X Preservation for future generations										
4	Provide a description of the organization's of	ollections and explai	in how they further t	he organization's ex	empt purpos	se in Part	XIII.				
5	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?										
Pa	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.										
-		•			. 4. 1 1- x al - al						
1a	is the organization an agent, trustee, custoo		=				Yes	□ No			
	on Form 990, Part X7						res	ייין אס			
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	illowing table:				Amount				
	5				4.		Amount				
C	Beginning balance										
d	Additions during the year										
e	Distributions during the year										
f	Ending balance				1f		Yes	□ No			
	Did the organization include an amount on F						162	"			
Pai	If "Yes," explain the arrangement in Part XIII † V Endowment Funds. Complete										
T al	Lindowine it i direa. Complete			(c) Two years back		are hack	(e) Four y	ears back			
4-	Basinsing of year balance	(a) Current year	(b) Prior year					78,366,			
18											
D											
C	c Net investment earnings, gains, and losses 97,547, 224,321, 178,004, 163,704, 136,775, d Grants or scholarships										
0											
е	Other expenditures for facilities	61 003	56 214	104 415		3 023		36,600.			
	and programs	61.093,	56,314.	104,415,		9.769.		10,222.			
	Administrative expenses	14,014.	11,376,	10,991, 1,604,553,		4 426		198 329			
g	End of year balance Provide the estimated percentage of the cur	1,852,812,	1,826,709,		1 1,31	4,440,	1,3	JU, 323,			
2	Board designated or quasi-endowment	20.00	e (iiile Tg, coloitiit (a %	ij) Heid as.							
a	Permanent endowment 59.00	%	_70								
0	Temporarily restricted endowment 2										
С	The percentages in lines 2a, 2b, and 2c shot										
2-	Are there endowment funds not in the posse		ation that are held a	nd administered for	the organiza	tion					
34		sasion of the organize	Ition that are note a	no sommistered to:	ino organiza		Y	es No			
	by: (i) unrelated organizations						3a(i)	X			
	(ii) related organizations						3a(li)	X			
h	If "Yes" to 3a(ii), are the related organizations						3b				
4	Describe in Part XIII the intended uses of the										
Par	t VI Land, Buildings, and Equipm		1111011111011								
	Complete if the organization answere		, Part IV, line 11a. Se	e Form 990, Part X	, line 10.						
	Description of property	(a) Cost or of			Accumulated		(d) Book v	/alue			
	Decomposition of property	basis (investm	1 , ,		preclation						
	Land										
	Buildings										
	Leasehold improvements		80	2,202.	102,35	3.	699	,849.			
	Equipment				104,09		144	,603.			
	Other										
	. Add lines 1a through 1e. (Column (d) must e		X, column (B), line 1	0c.)			844	, 45 <mark>2.</mark>			

D	Investments - Other Securities.
Dom VIII	Investments - Other Securities
rait vii	i invesiments - Omer aecunites.

Complete if the organization answered "Yes"	to Form 990, Part IV, line					
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value				
(1) Financial derivatives						
(2) Closely-held equity interests						
(3) Other	-					
(A) UVA FUND INVESTMENTS	1,852,812.	END-OF-YEAR MARKET VALUE				
(B) UVIMCO INVESTMENTS	209,986.	END-OF-YEAR MARKET VALUE				
(C) SHORT TERM POOL	1,375,429.	END-OF-YEAR MARKET VALUE				
(D)						
(E)						
(F)						
(G)						
(H)						
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	3,438,227.					
Part VIII Investments - Program Related.	-					
Complete if the organization answered "Yes" t	o Form 990, Part IV, line 1	1c. See Form 990, Part X, line 13.				
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value				
(1)	_					
(2)	_					
(3)		·				
(4)						
(5)						
(6)						
(7)						
(8)	"					
(9)						
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)						
Part IX Other Assets.						
Complete if the erconization previous divoration	a Form 000 Port IV line 1	1d Con Form 000 Bort V line 15				

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

Part X Other Liabilities.

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

1.	(a) Description of liability	(b) Book value
(1) Fed	eral income taxes	
(2) AC	CRUED PAYROLL	16,575.
(3) TU	ITION DEPOSITS	41,040.
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Colui	nn (b) must equal Form 990, Part X, col. (B) line 25.)	▶ 57,615.

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

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,

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, 2015 AND 2014, THE SCHOOL PURCHASED LIBRARY COLLECTIONS TOTALING \$41,609 AND \$41,479, RESPECTIVELY. IN ADDITION, THE SCHOOL RECEIVED \$1,250 AND \$33,000 IN DONATED LIBRARY COLLECTIONS FOR THE YEARS ENDED SEPTEMBER 30, 2015 AND

2014, RESPECTIVELY.

Schedule D (Form 990) 2014

06495 1

PART XII, LINE 4B - OTHER ADJUSTMENTS:

182,366. NON-CASH TUTION REDUCTIONS

SCHEDULE F (Form 990)

Department of the Treasury

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

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

OMB No. 1545-0047 Open to Public

Inspection Internal Revenue Service Name of the organization Employer identification number THE BOOK ARTS PRESS, INC. 54-1667557 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 🔲 Yes 🛛 🛣 No 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (c) Number of (e) If activity listed in (d) (a) Region (b) Number of (d) Activities conducted in region (f) Total employees, agents, and expenditures offices (by type) (e.g., fundraising, program is a program service, for and in the region describe specific type services, investments, grants to independent investments contractors of service(s) In region recipients located in the region) in region in region 3 a Sub-total 0 b Total from continuation sheets to Part I 0 c Totals (add lines 3a and 3b)

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

Schedule F (Form 990) 2014

15170203 700786 06495

Schedule F (Form 990) 2014

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

Page 2

54-1667557

(i) Method of valuation (book, FMV, appraisal, other)						Schedule F (Form 990) 2014
(h) Description of non-cash assistance						Schedu
(g) Amount of non-cash assistance					tempt by	
(f) Manner of cash disbursement					recognized as tax-ex	
(e) Amount of cash grant					foreign country,	
(d) Purpose of grant					Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Enter total number of other organizations or entities	
(c) Region					s listed above that are r has provided a section entities	
(b) IRS code section and EIN (if applicable)					Enter total number of recipient organizations listed at the IRS, or for which the grantee or counsel has pro Enter total number of other organizations or entities	
(а) Name of organization					2 Enter total number of the IRS, or for which the IRS and a Enter total number of the state of t	

54-1667557

Page 3

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

Part III can be duplicated if additional space is peeded

Part III can be duplicated if additional space is needed	additional space is neede	ď.					
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
						REDUCTION OF TUITION	
						RATES FOR INDIVIDUALS	
						ATTENDING RARE BOOK	_
TUITION REDUCTIONS	EUROPE	7	0,		1,943,	SCHOOL COURSES	ВООК
						REDUCTION OF TUITION	
						RATES FOR INDIVIDUALS	
						ATTENDING RARE BOOK	
TUITION REDUCTIONS	NORTH AMERICA	ın	0,*		6,575,	SCHOOL COURSES	BOOK
						REDUCTION OF TUITION	
						RATES FOR INDIVIDUALS	
						ATTENDING RARE BOOK	
TUITION REDUCTIONS	NORTH AFRICA	H	0.		400,	SCHOOL COURSES	BOOK
						REDUCTION OF TUITION	
						RATES FOR INDIVIDUALS	
						ATTENDING RARE BOOK	
TUITION REDUCTIONS	SOUTH AMERICA	-	0		1,295,	295, SCHOOL COURSES	BOOK
STIFEND FOR TRAVEL AND RESEARCH	NORTH AMERICA	r-d	750	CHECK	-		ACC B
STIPEND FOR TRAVEL AND	201000	•	6				
KESEARCH	SOUTH AMERICA	4	2,000,0	CHBCK	0		BOOK
REIMBURSED TRAVEL EXPENSES	SOUTH AMERICA	1	2,055,0	CHECK	0		BOOK

SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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	2014	Open to Public	Inspection

Employer identification number

Information about Schedule I (Form 990) and its instructions is at www.lrs.gov/form990.

	THE BOOK ARTS PRESS,	S, INC.					54-1667557
Part I General Information on Grants and Assistance	and Assistance						
1 Does the organization maintain records to substantiate the amount of	to substantiate th	e amount of the grants	or assistance, the	grantees' eligibility	for the grants or ass	the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	tion
criteria used to award the grants or assistance?	istance?						X Yes No
ᇷ	rocedures for moni	toring the use of grant	funds in the United	d States.			
Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990. Part IV line 21 for any	Domestic Organ	izations and Domesti	c Governments. C	omplete if the orga	Inization answered "Y	'es" to Form 990. Part	IV. line 21, for any
recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	\$5,000. Part II car	be duplicated if addit	ional space is need	ied.			
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COLUMBIA UNIVERSITY ART HISTORY							
AND ARCHAEOLOGY DEPARTMENT - 1190							
AMSTERDAM AVENUE - NEW YORK, NY							
10027	13-5598093	501(C)3	8,000,	0			SYMPOSIA SPONSORSHIP
	-						
			_				
2 Enter total number of section 501(c)(3) and government organizations	and government o		listed in the line 1 table				1
3 Enter total number of other organizations listed in the line 1 table	ns listed in the line	1 table		***************************************			0
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	e, see the Instruc	tions for Form 990.					Schedule I (Form 990) (2014)

Schedule I (Form 990) (2014) THE BOOK ARTS PRESS, INC.

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

Part III can be duplicated if additional space is needed.

Page 2

54-1667557

	(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	156	0	172,153,	172,153,BOOK VALUE - COST	THE ORGANIZATION PROVIDED NON-CASH SCHOLARSHIPS TO PARTICIPANTS IN THE FORM OF REDIGTED FULLTION
STIPENDS	66	142,642,	0	l.	
REIMBURSEMENT FOR TRAVEL AND RESEARCH EXPENSES	40	36,636,	0	BOOK VALUE - COST	
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	uired in Part I, lin	e 2, Part III, column	(b), and any other ac	Iditional information.	
PART I, LINE 2:					
THE ORGANIZATION MAINTAINS RECORDS	- 1	SUPPORTING THE SE	LECTION CR	SELECTION CRITERIA USED	
TO AWARD SCHOLARSHIPS AND FINANCIAL	AID,	WHICH ALSO INCLUDES		THE AMOUNTS	
AWARDED AND RECIPIENTS NAMES.					

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

Attach to Form 990.

Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990. Employer identification number

THE BOOK ARTS PRESS, INC.

54-1667557

Pa	rt I	Type	es of Property				_					
		-		(a) Check if applicable	(b) Number of contributions or	(c) Noncash cont amounts repo			(d) Method of de cash contribu			s
					items contributed	Form 990, Part V	<u>/III, line 1g</u>					
1			of art							_		
2	Art	 Historica 	al treasures									
3	Art	 Fraction 	nal interests									
4	Boo	oks and p	ublications	X		1,	250	APPR	AISAL	_		
5	Clo	thing and	household goods									
6	Car	s and oth	ner vehicles									
7	Boa	ats and pl	lanes				_	ļ				
8			roperty				_					
9			Publicly traded	Х	9	70,	267.	FAIR	MARKET	_VA	<u>LUE</u>	
10			Closely held stock									
11			Partnership, LLC, or									
	trus	t interest	s									
12			/liscellaneous				_					
13			servation contribution ·									
	Hist	toric struc	ctures									
14			servation contribution - Other									
15	Rea	ıl estate -	Residential			-					_	
16			Commercial									
17	Real estate - Other											
18	Collectibles											
19			огу									
20			edical supplies			-						
21			***************************************									
22			ifacts							_		
23			ecimens									
24			l artifacts									
25		er 🕨	()									
26	Oth	er 🕨	()									
27	Oth	er 🕨	()			•						
28	Oth	er 🕨	(
29	Nun	nber of Fo	orms 8283 received by the organia	zation during	the tax year for co	ontributions						
			organization completed Form 82				29				0	
			-								Yes	No
30a	Duri	ing the ye	ear, did the organization receive by	y contributio	n any property rep	orted in Part I, line	es 1 throu	gh 28, th	at it			
			at least three years from the date									
			oses for the entire holding period?	_						30a		X
b			cribe the arrangement in Part II.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
			anization have a gift acceptance p	oolicy that re	quires the review o	of any non-standa	rd contrib	utions?		31		X
			anization hire or use third parties									
_		tributions								32a		_X_
b	If "Y	'es," desc	cribe in Part II.									
33			ation did not report an amount in	column (c) fo	or a type of proper	ty for which coluπ	nn (a) is ch	ecked,				
		cribe in P										
HA			work Reduction Act Notice, see	the Instruct	ions for Form 990).			Schedule M	(Form	990) (2014)

Schedule M	(Form 990) (2014)	THE BOOK	ARTS PRE	<u>ss, inc.</u>		<u>54-166755</u>	
Part II	Supplemental is reporting in Part this part for any ac	Information.	Provide the inform	nation required by outions, the numb	y Part I, lines 30b, 32b, a per of items received, or	and 33, and whether the or a combination of both. Als	ganization o complete
	· · · · · · · · · · · · · · · · · · ·						
					<u> </u>		
	<u>. </u>	_					
							
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			<u> </u>			<u></u>	
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	<u> </u>						
					_		

Schedule M (Form 990) (2014)

432142 08-12-14

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

➤ Attach to Form 990 or 990-EZ. ▶ Information about Schedule O (Form 990 or 990-EZ) and its Instructions is at www.irs.gov/form990. Open to Public

CMB No. 1545-0047

Inspection

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 A, LINE 4:
THE ORGANIZATION AMENDED THEIR BY-LAWS FOR CLARIFICATION PURPOSES. IN
ADDITION, THE ORGANIZATION ALSO AMENDED THE BY-LAWS TO UPDATE THE PROCESS
FOR ELECTION AND RETENTION OF BOARD MEMBERS. DESCRIPTIONS OF THE BOARD
OFFICERS' RESPONSIBILITIES WERE ALSO CLARIFIED AND UPDATED.
FORM 990, PART VI, SECTION A, LINE 7B:
AS AN AFFILIATED FOUNDATION OF THE UNIVERSITY OF VIRGINIA, RARE BOOK SCHOOL
IS SUBJECT TO THE UNIVERSITY'S POLICY ON THE UNIVERSITY-RELATED
FOUNDATIONS, WHICH STATES THAT THE FOUNDATION MUST SUBMIT TO THE BOARD OF
VISITORS FOR APPROVAL ANY PROPOSED NEW BUSINESS VENTURE OR CHANGE IN
NATURE, PURPOSE, OR SCOPE OF FOUNDATION ACTIVITIES. SUCH APPROVAL SHALL
NOT BE UNREASONABLY WITHHELD.

FORM 990, PART VI, SECTION B, LINE 11:

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 432211 08-27-14

Schedule O (Form 990 or 990-EZ) (2014)

FOR REVIEW PRIOR TO FILING.

UNIVERSITY OF VIRGINIA.

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

FORM 990, PART VI, SECTION C, LINE 18:

THE SCHOOL'S FORM 1023 AND FORM 990 ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART VI, SECTION C, LINE 19:

THE SCHOOL'S GOVERNING DOCUMENTS AND AUDITED FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

PART XII, LINE 2C

THE SCHOOL'S BOARD OF DIRECTORS HAS AN AUDIT COMMITTEE THAT IS RESPONSIBLE FOR THE SELECTION AND RETENTION OF INDEPENDENT AUDITORS.

THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.