Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public. Information about Form 990 and its instructions is at www irs gov/form990 tax year beginning JUL 1, 2013 and ending JUN 30,

Α	For the	2013 calendar year, or tax year beginning $$ JUL 1 , 2013 $$	<u>. J</u> ŬN 30, 2014	
В	Check if applicable	C Name of organization	D Employer identifi	cation number
	Addres change	FLORIDA ART EDUCATION ASSOCIATION, INC.		
Ē	Name change	Doing Business As		182663
	returnTerminated	Number and street (or P.O. box if mail is not delivered to street address) - 402 OFFICE PLAZA DRIVE		878-68 44
F	Ameno Ireturn		G Gross receipts \$	180,903.
	Applic tion	TALLAHASSEE, FL 32301	H(a) Is this a group re	
	pendin	F Name and address of principal officer: KATHLEEN D. SANZ, PH.L	for subordinates	s? Yes X No
		SAME AS C ABOVE	H(b) Are all subordinates in	ncluded? Yes No
			527 If "No," attach a	list. (see instructions)
		e:▶ WWW.FAEA.ORG	H(c) Group exemption	
			Year of formation: 1976	M State of legal domicile: \mathbf{FL}
P	art I	Summary		
æ	1	Briefly describe the organization's mission or most significant activities: ANNUAL C	ONVENTION REG	ARDING
Activities & Governance		CURRENT ART METHODS, TECHNICAL SUPPORT, ART		
ern	1	Check this box 🕨 📖 if the organization discontinued its operations or disposed of r	1	
હુ			3	17
«		Number of independent voting members of the governing body (Part VI, line 1b)		17
ies		Total number of individuals employed in calendar year 2013 (Part V, line 2a)		0
₹		Total number of volunteers (estimate if necessary)		35
Act		Total unrelated business revenue from Part VIII, column (C), line 12		3,885.
	b	Net unrelated business taxable income from Form 990-T, line 34	7b	-2,150.
			Prior Year	Current Year
ne		Contributions and grants (Part VIII, line 1h)	39,355.	37,007.
ē	1	Program service revenue (Part VIII, line 2g)	151,272.	
Revenue		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	190.	2,243.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	10.	0.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	190,827.	
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
		Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
Ř	b	Total fundraising expenses (Part IX, column (D), line 25)	100 105	151 560
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	198,195.	
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	198,195.	
		Revenue less expenses. Subtract line 18 from line 12	-7,368.	
SOC			Beginning of Current Year	End of Year
Sset	20	Total assets (Part X, line 16)	196,259.	206,591.
Net Assets or Fund Balances	21	Total liabilities (Part X, line 26)	11,920.	10,745.
	22	Net assets or fund balances. Subtract line 21 from line 20	184,339.	195,846.
	art II	Signature Block	-tt	
		Ities of perjury, I declare that I have examined this return, including accompanying schedules and st		y knowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which pre	parer has any knowledge.	
		Signature of officer	 Date	
Sig				
He	re	KATHLEEN D. SANZ, PH.D., BOARD CONSULTANT Type or print name and title		
			Date Check	II PTIN
De!		Print/Type preparer's name Preparer's signature POR POWELL	0110011	I
Pai		BOB POWELL BOB POWELL	11/25/14 if self-employ	P00005498
	parer	Firm's name JAMES MOORE & CO., P.L.	Firm's EIN	59-3204548
USE	Only	Firm's address 2477 TIM GAMBLE PLACE, SUITE 200	DE OF	N 206 6104
_		TALLAHASSEE, FL 32308-4386	Phone no.85	0-386-6184 X Yes No
I//Ia	v the IF	RS discuss this return with the preparer shown above? (see instructions)		X Yes No

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

Total program service expenses ▶

(Expenses \$ including grants of \$

146,004.

) (Revenue \$

Form 990 (2013) FLORIDA ART 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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
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	Х	
_	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	4	-25	
5	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
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,			37
_	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		Х
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,	44-		Х
h	Part VI Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	11a		- 22
b	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	110		
Ŭ	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
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	140		-22
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
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		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
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		Х
20a		20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Form 990 (2013) FLORIDA ART EDUCATE 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			
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? 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) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
	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			37
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			v
	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		
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29		
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			Х
32	If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		- 21
32	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
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		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
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		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			7.7
	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 19?		Х	
	Note. All Form 990 filers are required to complete Schedule O	38	Λ	

Form 990 (2013) FLORIDA ART EDUCATION ASSOCIATION, INC. Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0			
b				
С				
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country: ►			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	, , , , , , , , , , , , , , , , , , , ,	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			3,7
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	ا ا		
7	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	70		Х
a h		7a 7b		
b	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	75		
·	to file Form 8282?	7c		х
d				
e		7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
		9b		
10	Section 501(c)(7) organizations. Enter:			
а				
b 11				
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
a b				
b	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	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			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

FLORIDA ART EDUCATION ASSOCIATION, INC. 5

Management and Disclosure For each "Yes" response to lines 2 through 7h below Form 990 (2013)

Part VI Governance

ı uı	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule C	-		100 1	espon	3 C
	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	1a	17			
	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	17			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	ip with	any other			
	officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the	ne direc	t supervision			
	of officers, directors, or trustees, or key employees to a management company or other person? \dots			3	Х	
4	Did the organization make any significant changes to its governing documents since the prior Form			4		X
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?		5	77	Х
6	Did the organization have members or stockholders?			6	Х	
7a	, , , , , , , , , , , , , , , , , , , ,			l _	Х	
	more members of the governing body?			7a	Λ	
D	Are any governance decisions of the organization reserved to (or subject to approval by) members, spersons other than the governing body?			7b	Х	
8	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the ye			7.0	-22	
	The governing body?			8a	Х	
	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea					
	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 R	evenue	e Code.)			
					Yes	No
	Did the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such c	hapter	s, affiliates,			
				10b	Х	
	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	ay beto	re filing the form?	11a	Λ	
	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	Х	
ıza h	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise		flicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y					
	in Schedule O how this was done			12c	Х	
13	Did the organization have a written whistleblower policy?			13	X	
14	Did the organization have a written document retention and destruction policy?			14	X	
15	Did the process for determining compensation of the following persons include a review and approve	al by ir	dependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
	The organization's CEO, Executive Director, or top management official			15a		X
b	Other officers or key employees of the organization			15b		Х
16 -	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		م ماهان			
юа	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange taxable entity during the year?			16a		Х
h	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluation to evaluation.			104		
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization of the organizati		· ·			
	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	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 (Sect	ion 501(c)(3)s only) a	availab	le	
	for public inspection. Indicate how you made these available. Check all that apply.					
	X Own website Another's website X Upon request Other (explain					
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, co	onflict	ot interest policy, an	d finar	ncial	
20	statements available to the public during the tax year.	nd roc	ords of the organi	tion: ►		
20	State the name, physical address, and telephone number of the person who possesses the books a $THE\ ORGANIZATION\ -\ 850-878-6844$	ııu rec	orus or the organiza	นงก:		
	402 OFFICE PLAZA DRIVE TALLAHASSEE FL 32301					

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

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

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

- 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.

(A)	(B)	J. gc	411120	((про	iout	(D)	(E)	(F)
Name and Title	Average		not c	Pos heck	ition more	than		Reportable	Reportable	Estimated amount of
	hours per week					is bot or/trus		compensation from	compensation from related	other
	(list any hours for related organizations below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) MABEL MORALES	line) 3 • 0 0	Ĕ	î.	#0	æ.	훈늄	요			
PAST PRESIDENT	3.00	х		х				0.	0.	0.
(2) KAREN NOBEL	3.00	Δ		Λ				0.	0.	· ·
PRESIDENT	3.00	x		х				0.	0.	0.
(3) DR. NICOLE CRANE	3.00	22		22				0.	0.	0.
PRESIDENT ELECT	3.00	х		х				0.	0.	0.
(4) CHAN BLISS	3.00	25		22				0.	0.	0.
SECRETARY	3.00	х		х				0.	0.	0.
(5) JOANNA DAVIS-LANUM	3.00							•	•	
BOARD MEMBER	377	х						0.	0.	0.
(6) ANNI CHRISTIE	3.00							•	•	
BOARD MEMBER		х						0.	0.	0.
(7) MARTY LOFTUS	3.00							-		
BOARD MEMBER		х						0.	0.	0.
(8) SUSANNAH BROWN	3.00									
BOARD MEMBER		Х						0.	0.	0.
(9) ELIZABETH MIRON	3.00									
BOARD MEMBER		Х						0.	0.	0.
(10) ASHLEY SPERO	3.00									
BOARD MEMBER		Х						0.	0.	0.
(11) ELIZABETH JENKINS	3.00									
BOARD MEMBER		Х						0.	0.	0.
(12) PAT MILES	3.00									
BOARD MEMBER		Х						0.	0.	0.
(13) JACKIE HENSON-DACEY	3.00									
BOARD MEMBER		Х						0.	0.	0.
(14) BRITT FEINGOLD	3.00									
BOARD MEMBER		Х						0.	0.	0.
(15) PAM BROWN	3.00									
BOARD MEMBER		Х						0.	0.	0.
(16) ROXANA COCINA	3.00									_
BOARD MEMBER		Х						0.	0.	0.
(17) MICHELLE TODD	3.00									_
BOARD MEMBER		Х						0.	0.	0.

									compensated Employe					
	(A)								(D)	(E)		(F)		
	Name and title	Average	(do		Pos heck		I than	one	Reportable	Reportable			timate	
		hours per week					is bot or/trus		compensation	compensation from related			nount (other	of
		(list any	tor						from the	organization			pensa	tion
		hours for	or director				ted		organization	(W-2/1099-MI			om the	
		related	stee o	trustee			pensa		(W-2/1099-MISC)			_	anizati	
		organizations below	ual tru	tional t		ploye	st com	_					d relati anizatio	
		line)	Individual trustee	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				orga	ai iiZati	0113
						_		_						
						_								
	Sub-total							>	0.		0.			0.
	Total from continuation sheets to Part V								0.		0.			0.
	Total (add lines 1b and 1c) Total number of individuals (including but n							20 11		000 of roportoh				0.
2	compensation from the organization	ioi iimilea lo in	ose	iiste	eu ai	DOV	e) Wi	10 16	eceived more than \$100	,000 or reportat	ne			C
	compensation from the organization												Yes	No
3	Did the organization list any former officer,	director, or tru	ste	e, ke	y er	nplo	yee	, or I	highest compensated e	mployee on				
	line 1a? If "Yes," complete Schedule J for s	uch individual										3		X
4	For any individual listed on line 1a, is the su	•							•	•				77
_	and related organizations greater than \$15											4		X
5	Did any person listed on line 1a receive or a rendered to the organization? If "Yes," com	•				•			•			5		Х
Sec	tion B. Independent Contractors	ipicie ochedan	. 0 1	01 30	icii j	pers						3		
1	Complete this table for your five highest co	mpensated ind	depe	ende	nt c	onti	racto	ors t	hat received more than	\$100,000 of cor	npens	ation f	rom	
	the organization. Report compensation for	the calendar y	ear e	endi	ng v	vith	or w	ithir	n the organization's tax	year.				
	(A)				_				(B)			(0		
	Name and business	address	NC	INC	<u> </u>			_	Description of s	services		ompe	nsatioi	n
								_						
								+						
2	Total number of independent contractors (i	ncludina but n	ot lir	nite	d to	tho	se li	sted	l above) who received n	nore than				
	\$100,000 of compensation from the organi)		,					

		(2013) FLORIDA ART E	DUCATION	ASSOCIATI	ON, INC.	51-0182	663 Page 9
Pa	rt VI						
		Check if Schedule O contains a response	or note to any line	e in this Part VIII	(5)	(6)	<u></u>
				(A) Total revenue	(B) Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
nts	1 a	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues 1b	31,925.				
S, C		Fundraising events1c					
를		Related organizations 1d					
ini.	6	Government grants (contributions)	5,082.				
r io	f	All other contributions, gifts, grants, and					
혍		similar amounts not included above 1f					
g d	ç	Noncash contributions included in lines 1a-1f: \$					
g g	ŀ	Total. Add lines 1a-1f	>	37,007.			
			Business Code				
စ္ပ	2 a	CONFERENCES AND CLINIC	900099	137,768.	137,768.		
e Š	k	ADVERTISING	900099	3,885.		3,885.	
Program Service Revenue	c	;					
e a	c						
<u>Б</u> .	•	•					
ا ت	f	All other program service revenue	900099				
	Ç	Total. Add lines 2a-2f		141,653.			
	3	Investment income (including dividends, interest	est, and				
		other similar amounts)	▶↓	2,243.			2,243.
	4	Income from investment of tax-exempt bond p	oroceeds 🕨				
	5	Royalties					
		(i) Real	(ii) Personal				
		Gross rents					
		Less: rental expenses					
		Rental income or (loss)	<u> </u>				
		Net rental income or (loss)					
	7 a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory					
	k	Less: cost or other basis					
		and sales expenses	 				
		Gain or (loss)					
		Net gain or (loss)	·····				
Other Revenue	8 8	Gross income from fundraising events (not					
Ş		including \$ of contributions reported on line 1c). See					
~ ~		Part IV, line 18a					
喜	ŀ	Less: direct expenses b					
Ö		Net income or (loss) from fundraising events					
		Gross income from gaming activities. See					
		Part IV, line 19 a					
	Ł	Less: direct expenses b					
		Net income or (loss) from gaming activities					
		Gross sales of inventory, less returns	,				
		and allowances a					
	k	b Less: cost of goods sold b					
		Net income or (loss) from sales of inventory					
ľ			Business Code				
	11 a						
	k						
	c						
		ΔII other revenue	1				1

e Total. Add lines 11a-11d

Total revenue. See instructions.

3,885.

180,903.

137,768.

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (A)
Total expenses **(D)** Fundraising (B) Do not include amounts reported on lines 6b. Management and general expenses Program service 7b, 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to governments and organizations in the United States, See Part IV, line 21 Grants and other assistance to individuals in the United States. See Part IV, line 22 3 Grants and other assistance to governments. organizations, and individuals outside the United States. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 9 Payroll taxes 10 Fees for services (non-employees): 49,198. 43,350. 5,848. Management Legal 6,293. 5,349. 944. Accounting С 5,691. 4,837. 854. Lobbying Professional fundraising services. See Part IV. line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 8,600. 7,577. 1,023. column (A) amount, list line 11g expenses on Sch O.) Advertising and promotion 12 6,903. 4,083. 2,820. 13 Office expenses 6,854. 5,826. 1,028. Information technology 14 15 Royalties 3,001. 2,551. 450. 16 Occupancy 22,171. 18,845. 3,326. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 52,391. 44,519. 7,872. Conferences, conventions, and meetings 19 20 21 Payments to affiliates 22 Depreciation, depletion, and amortization 1,915. 1,628. 287. 23 Other expenses. Itemize expenses not covered 24 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.) 8,752. 7,439. 1,313. COMMUNICATIONS а b C d е All other expenses 171,769. 146,004. 25,765. 0. Total functional expenses. Add lines 1 through 24e 25 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 (2013) Part X Balance Sheet

Pal	πX	Balance Sneet				
		Check if Schedule O contains a response or not	te to any line in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		27,016.	1	33,452.
	2	Savings and temporary cash investments		169,118.	2	71,264.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		125.	4	0.
	5	Loans and other receivables from current and for				
		trustees, key employees, and highest compensations	ated employees. Complete			
		Part II of Schedule L			5	
	6	Loans and other receivables from other disquali				
		section 4958(f)(1)), persons described in section	n 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of sec	tion 501(c)(9) voluntary			
ts		employees' beneficiary organizations (see instr).	·		6	
Assets	7	Notes and loans receivable, net			7	
ĕ	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		9		
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D	10a			
	b	Less: accumulated depreciation			10c	
	11	Investments - publicly traded securities			11	101,875.
	12	Investments - other securities. See Part IV, line			12	
	13	Investments - program-related. See Part IV, line			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11		15		
	16	Total assets. Add lines 1 through 15 (must equ	196,259.	16	206,591.	
	17	Accounts payable and accrued expenses	1,870.	17	220.	
	18	Grants payable			18	
	19	Deferred revenue		10,050.	19	10,525.
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete			21	
Se	22	Loans and other payables to current and former	r officers, directors, trustees,			
Liabilities		key employees, highest compensated employee	es, and disqualified persons.			
iabi		Complete Part II of Schedule L			22	
_	23	Secured mortgages and notes payable to unrela			23	
	24	Unsecured notes and loans payable to unrelate	d third parties		24	
	25	Other liabilities (including federal income tax, pa	yables to related third			
		parties, and other liabilities not included on lines	s 17-24). Complete Part X of			
		Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		11,920.	26	10,745.
		Organizations that follow SFAS 117 (ASC 958	B), check here $ ightharpoonup$ X and			
es		complete lines 27 through 29, and lines 33 ar		101 000		
anc	27	Unrestricted net assets		184,339.	27	195,846.
Bal	28	Temporarily restricted net assets			28	
pu	29				29	
Ŀ		Organizations that do not follow SFAS 117 (A	SC 958), check here ▶ 📖 📗			
ō		and complete lines 30 through 34.				
sets	30	Capital stock or trust principal, or current funds			30	
Ass	31	Paid-in or capital surplus, or land, building, or ed	T .		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in		104 222	32	105 046
~	33	Total net assets or fund balances		184,339.	33	195,846.
	34	Total liabilities and net assets/fund balances		196,259.	34	206,591.

Form **990** (2013)

FLORIDA	ART	EDUCATION	ASSOCIATION,	INC.	51-0182663	Page 12

Form	1990 (2013) FLORIDA ART EDUCATION ASSOCIATION, INC.	51-018	2663	Pag	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		0,9	
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,7	
3	Revenue less expenses. Subtract line 2 from line 1	3			34.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			39.
5	Net unrealized gains (losses) on investments	5		2,3	73.
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	19	5,8	<u>46.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				LX.
				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		_		37
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 reviewe	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis			v	
b	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 separa	te basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the			Х	
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Λ	
•	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
за	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S	-			Х
1-	Act and OMB Circular A-133?		3a		
a	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schodule O and describe any stone taken to undergo such audits.	iired addit	26		

Form **990** (2013)

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section
4947(a)(1) nonexempt charitable trust.

➤ Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

FLORIDA ART EDUCATION ASSOCIATION, INC.

Employer identification number

51-0182663

Pa	rt I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	e this par	:.) See inst	ructions.					
Γhe	organi	zation is not a	a private foundation	because it is: (For lines	1 through	11, check	only one b	ox.)						
1		A church, cor	nvention of churche	s, or association of chur	ches desc	ribed in se	ction 170	(b)(1)(A)(i)						
2		A school des	cribed in section 17	'0(b)(1)(A)(ii). (Attach Sc	hedule E.)									
3				tal service organization		in section	170(b)(1)	(A)(iii).						
4		A medical res	search organization	operated in conjunction	with a hos	pital desc	ribed in se	ction 170	(b)(1)(A)(ii	i). Enter	the	hospita	l's nam	ne,
		city, and state										•		
5		An organizati	on operated for the	benefit of a college or ur	niversity ov	wned or or	perated by	a governi	mental uni	t describ	ed	in		
		-	(b)(1)(A)(iv). (Comple		,	•	,	Ü						
6				ent or governmental uni	t describe	d in sectio	n 170(b)(I)(A)(v).						
7									r from the	general	pub	olic desc	cribed i	in
		An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)												
8	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)													
9	X			eives: (1) more than 33			rom contri	hutions n	nemhershi	n fees a	ınd (aross re	ceints	from
•				nctions - subject to certa										
				axable income (less sect										
			509(a)(2). (Complete	•		,,, ,, o,,,, b,	011100000	zoquii ou k	y and orga		u	or carro v	50, 101	0.
10				perated exclusively to te	st for publ	ic safety 9	See sectio	n 509(a)(4	ı)					
11	一	•		perated exclusively for the	•	•			•	v out the	ווחי	rnoses (of one	or
••		J		ations described in section		′ '				•	•	•		Oi
				organization and compl				-). 000 00),,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	u)(0). 011	COIN	tile box	· inat	
		a Type I		· — ·	ype III - Fu	_		,	тур	e III - No	n-fu	nctional	lly inter	arated
е				at the organization is not		•	•		• •					-
·			•	han one or more publicly		-	-	-		-	-			
f				ten determination from t						<i>σ</i> (α)(1) σι	300	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	J(a)(∠).	
•			rganization, check th	de le					- III					
~			•	nis box organization accepted ar					owing por	2				
g				irectly controls, either al							,		Yes	No
				upported organization?								11a(i)		NO
		-		• •								11g(i)		
				n described in (i) above?								11g(ii)		
L				person described in (i) o								11g(iii)	/	<u> </u>
h		Provide the to	ollowing information	about the supported or	ganization	(S).								
				<u> </u>	(:) la tha a		(+1) Did ++0		(vi) Is	tho				
(i)		of supported	(ii) EIN	(iii) Type of organization (described on lines 1-9	in col. (i) lis	rganization sted in your	organizat		Lorganizátio	on in col	(vii) Amoun		netary
	orga	nization		above or IRC section		document?			(i) organiz U.S	ed in the		sup	port	
				(see instructions))	Yes	No	Yes	No	Yes	No				
					163	140	163	140	163	140				
											_			
											l			

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

Schedule A (Form 990 or 990-EZ) 2013

Schedule A (Form 990 or 990-EZ) 2013 FLORIDA ART EDUCATION ASSOCIATION, INC. 51-0182663 Page 2

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organ-	1					
	ization's benefit and either paid to	I					
	or expended on its behalf	<u> </u>					
3	The value of services or facilities	I					
	furnished by a governmental unit to	1					
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
	Public support. Subtract line 5 from line 4.						
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	<u> </u>					
8	Gross income from interest,	I					
	dividends, payments received on	1					
	securities loans, rents, royalties	I					
	and income from similar sources	I					
9	Net income from unrelated business						
	activities, whether or not the	I					
	business is regularly carried on	I					
10	Other income. Do not include gain						
	or loss from the sale of capital	I					
	assets (Explain in Part IV.)	1					
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instructi	ons)			12	
13	First five years. If the Form 990 is for	the organization's				n 501(c)(3)	
	organization, check this box and stop	here					▶□
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2013 (I	ine 6, column (f) d	ivided by line 11, o	column (f))		14	%
15	Public support percentage from 2012	Schedule A, Part	II, line 14			15	%
16a	33 1/3% support test - 2013. If the o	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this bo	x and
	$\ensuremath{\mathbf{stop}}$ here. The organization qualifies	as a publicly supp	orted organization	١			▶□
b	33 1/3% support test - 2012. If the o	organization did no	ot check a box on	ine 13 or 16a, and	l line 15 is 33 1/3%	or more, check th	nis box
	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes	t - 2013. If the org	janization did not d	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac	ts-and-circumstan	ices" test, check t	nis box and stop I	nere. Explain in Pa	rt IV how the organ	nization
	meets the "facts-and-circumstances"	test. The organiza	ation qualifies as a	publicly supporte	d organization		▶□
b	10% -facts-and-circumstances tes	t - 2012. If the org	anization did not o	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets the				-		·
	organization meets the "facts-and-circ	cumstances" test.	The organization	qualifies as a publ	cly supported orga	anization	▶∐
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17	b, check this box a	and see instruction	s ▶□

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	etion A. Public Support	ciow, picace corri	note i art ii.j					
	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total	
	Gifts, grants, contributions, and	, ,	` ,	,	,	` '		
	membership fees received. (Do not							
	include any "unusual grants.")	56,189.	35,821.	32,920.	39,355.	37,007.	201,292.	
2	Gross receipts from admissions,			•	-	,	•	
	merchandise sold or services per-							
	formed, or facilities furnished in							
	any activity that is related to the organization's tax-exempt purpose	117,920.	127.990.	142,717.	149.252.	137,768.	675,647.	
3	Gross receipts from activities that						,	
Ü	are not an unrelated trade or bus-							
	iness under section 513							
4								
4	Tax revenues levied for the organ-							
	ization's benefit and either paid to							
_	or expended on its behalf							
5	The value of services or facilities							
	furnished by a governmental unit to							
	the organization without charge	154 100	160 011	485 608	100 600	484 885	076 020	
6	Total. Add lines 1 through 5	174,109.	163,811.	1/5,63/.	188,607.	174,775.	876,939.	
7a	Amounts included on lines 1, 2, and						_	
	3 received from disqualified persons						0.	
b	Amounts included on lines 2 and 3 received							
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the							
	amount on line 13 for the year						0.	
c	Add lines 7a and 7b						0.	
8	Public support (Subtract line 7c from line 6.)						876,939.	
	ction B. Total Support							
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total	
9	Amounts from line 6	174,109.	163,811.	175,637.	188,607.	174,775.	(f) Total 876,939.	
	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties and income from similar sources	2,414.	1,198.	312.	190.	2,243.	6,357.	
b	Unrelated business taxable income	,	,			,		
-	(less section 511 taxes) from businesses							
	acquired after June 30, 1975							
,	Add lines 10a and 10b	2,414.	1,198.	312.	190.	2,243.	6,357.	
	Net income from unrelated business			3121		2,2100	0,00,0	
	activities not included in line 10b,							
	whether or not the business is							
12	regularly carried on Other income. Do not include gain							
	or loss from the sale of capital							
40	assets (Explain in Part IV.)	176 522	165,009.	175 0/0	100 707	177,018.	883,296.	
	Total support. (Add lines 9, 10c, 11, and 12.)		-	-	-	-		
14	First five years. If the Form 990 is for	•		·	•	. , . ,	. —	
<u></u>	check this box and stop here	is Compart Da					P	
	ction C. Computation of Publ						99.28 %	
	Public support percentage for 2013 (I					15	00 60	
	Public support percentage from 2012					16	98.69 %	
	ction D. Computation of Inves						70	
	Investment income percentage for 20			e 13, column (f))		17	.72 %	
	Investment income percentage from 2	•				18	1.31 %	
19a	33 1/3% support tests - 2013. If the							
	more than 33 1/3%, check this box a	nd stop here. The	organization quali	fies as a publicly s	supported organiza	ation	►\X	
b	b 33 1/3% support tests - 2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and							
	line 18 is not more than 33 1/3%, che	eck this box and st	t op here. The orga	nization qualifies a	as a publicly supp	orted organization	▶∐	
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check th	nis box and see ins	structions	<u></u> ▶□	

Schedule A	(Form 990 or 99	0-EZ) 2013	FLORID	A ART	EDUCATION	ASSOCIA'	TION,	INC.	51-01826	63 Page 4
Part IV	Supplemen	tal Inforn	nation. Pro	vide the ex	xplanations required	by Part II, line 1	0; Part II, I	ine 17a or	17b; and Part III,	line 12.
	Also complete	this part for	any additiona	al informat	ion. (See instruction	s).				

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

•	Section 501(c)(4), (5), or (6) organiza	tions: Complete Part III.							
Nan	ne of organization			Empl	oyer identification number				
	FLORIDA	ART EDUCATION AS	SOCIATION,	INC.	51-0182663				
Pa	art I-A Complete if the org	ganization is exempt unde	r section 501(c) o	or is a section 527 o	rganization.				
2	Provide a description of the organiz Political expenditures Volunteer hours	·		▶ \$					
Pa	art I-B Complete if the org	ganization is exempt unde	r section 501(c)(3	3).					
1	Enter the amount of any excise tax								
2	Enter the amount of any excise tax	incurred by organization manager	s under section 4955	▶\$					
3	If the organization incurred a section	on 4955 tax, did it file Form 4720 fo	or this year?		Yes No				
4a	a Was a correction made?				Yes No				
b	If "Yes," describe in Part IV.								
Pa	art I-C Complete if the org	ganization is exempt unde	r section 501(c),	<u> </u>	,,,,				
1	Enter the amount directly expended	d by the filing organization for sect	ion 527 exempt functi	on activities > \$					
2	Enter the amount of the filing organ	nization's funds contributed to othe	er organizations for se						
	exempt function activities			▶\$					
3	Total exempt function expenditures		,						
	line 17b								
	Did the filing organization file Form								
5	5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.								
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0				

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

Schedule C (Form 990 or 990-EZ) 2013

Schedule C (Form 990 or 990-EZ) 2013 FLORIDA ART EDUCATION ASSOCIATION, INC. 51-0182663 Page 2 Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 Part II-A (election under section 501(h)). if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN. A Check ► expenses, and share of excess lobbying expenditures). B Check ▶ if the filing organization checked box A and "limited control" provisions apply. (b) Affiliated group (a) Filing Limits on Lobbying Expenditures organization's totals (The term "expenditures" means amounts paid or incurred.) totals 1a Total lobbying expenditures to influence public opinion (grass roots lobbying) 5,691 **b** Total lobbying expenditures to influence a legislative body (direct lobbying) 5,691. c Total lobbying expenditures (add lines 1a and 1b) 166,353. d Other exempt purpose expenditures 172,044. e Total exempt purpose expenditures (add lines 1c and 1d) 34,409. f Lobbying nontaxable amount. Enter the amount from the following table in both columns. If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 20% of the amount on line 1e. Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000. Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000. Over \$17,000,000 \$1,000,000 8,602. g Grassroots nontaxable amount (enter 25% of line 1f) 0 h Subtract line 1g from line 1a. If zero or less, enter -0-0. i Subtract line 1f from line 1c. If zero or less, enter -0j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 Yes reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) Total (or fiscal year beginning in) 39,639. 28,542. 33,924. 34,409. 136,514. 2a Lobbying nontaxable amount **b** Lobbying ceiling amount 204,771. (150% of line 2a, column(e)) 2,700. 4,696. 5,196. 5,691. 18,283. c Total lobbying expenditures 9,910. 7,136. 8,481. 8,602. 34,129. d Grassroots nontaxable amount e Grassroots ceiling amount 51,194. (150% of line 2d, column (e))

Schedule C (Form 990 or 990-EZ) 2013

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2013 FLORIDA ART EDUCATION ASSOCIATION, INC. 51-0182663 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(a	(a)		(b)	
of th	e lobbying activity.	Yes	No	Amo	ount	
1 a	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?					
	Mailings to members, legislators, or the public?					
	Publications, or published or broadcast statements?					
	Grants to other organizations for lobbying purposes?					
	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
	Total. Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
	If "Yes," enter the amount of any tax incurred under section 4912					
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
	t III-A Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6).	ion 501(c)((5), or se	ction		
	56 1(5)(6).			Yes	No	
1	Were substantially all (90% or more) dues received nondeductible by members?		1		110	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?					
3	Did the organization make only includes lobbying expenditures of \$2,000 or less: Did the organization agree to carry over lobbying and political expenditures from the prior year?					
	t III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	d "No," OF	R (b) Par		ne 3, is 	
1 2	Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)		1			
	expenses for which the section 527(f) tax was paid).			ı		
	Current year					
	Carryover from last year					
_	Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues					
3	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex		3			
4	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and			ı		
		political	4	ı		
5	Taxable amount of lobbying and political expenditures (see instructions)		5			
Par			3			
Prov	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group complete this part for any additional information.	p list); Part II-	-A, line 2; a	nd Part II-B	I, line 1.	

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 Open to Public

Inspection

Name of the organization 51-0182663 FLORIDA ART EDUCATION ASSOCIATION, INC.

Employer identification number

Pa	rt I Organizations Maintaining Donor Advis	ed Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lir	ne 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in		ed funds
_	are the organization's property, subject to the organization's	-	
6	Did the organization inform all grantees, donors, and donor		
•	for charitable purposes and not for the benefit of the donor		
Pa	rt II Conservation Easements. Complete if the or		
1	<u> </u>		
•	Preservation of land for public use (e.g., recreation or		orically important land area
	Protection of natural habitat	Preservation of a certif	
	Preservation of open space	i receivanem er a com	The The Strategies
2	Complete lines 2a through 2d if the organization held a qual	lified conservation contribution in the form o	of a conservation easement on the last
_	day of the tax year.	imod deriodi vacioni derici batteri in trio fermi e	or a concervation cacement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		
h			l I
	Number of conservation easements on a certified historic st		
d			
u	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re		
3	year	eleased, extilliguished, of terminated by the	organization during the tax
4	Number of states where property subject to conservation ea	assement is located	
5	Does the organization have a written policy regarding the pe	·	
3	violations, and enforcement of the conservation easements		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) abo		
0			
0	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conserva:		
9			
	include, if applicable, the text of the footnote to the organiza	ation's illiancial statements that describes t	The organization's accounting for
Pai	conservation easements. rt III Organizations Maintaining Collections of	of Art Historical Treasures or Ot	her Similar Assets
ı u	Complete if the organization answered "Yes" to Form		nor on mar Addets.
12	If the organization elected, as permitted under SFAS 116 (A		ent and halance sheet works of art
ıa	historical treasures, or other similar assets held for public ex		
	the text of the footnote to its financial statements that desc		ice of public service, provide, in Fait Alli,
h	If the organization elected, as permitted under SFAS 116 (A		and balance shoot works of art, historical
b	treasures, or other similar assets held for public exhibition,		
	•	education, or research in furtherance or pub	nic service, provide the following amounts
	relating to these items:		▶ Φ
	(i) Revenues included in Form 990, Part VIII, line 1		
^		and the control of th	
2	If the organization received or held works of art, historical truths following amounts required to be reported under SEAS		gairi, provide
_	the following amounts required to be reported under SFAS		•
a	Revenues included in Form 990, Part VIII, line 1		
a	Assets included in Form 990, Part X		▶ \$

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

(a) Description	(b) book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
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) Federa	Il income taxes		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column	(b) must equal Form 990, Part X, col. (B) line 25.)		

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

Schedule D (Form 990) 2013

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization

Employer identification number

FLORIDA ART EDUCATION ASSOCIATION, INC. 51-0182663 FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: INFORMATION TO MEMBERS REGARDING THE ARTS AND CURRENT ISSUES. FORM 990, PART VI, SECTION A, LINE 3: FLORIDA ART EDUCATION ASSOCIATION, INC. USES THE CENTER FOR FINE ARTS EDUCATION, INC. AS A MANAGEMENT COMPANY. FORM 990, PART VI, SECTION A, LINE 6: THE ASSOCIATION IS COMPRISED OF MEMBERS. FORM 990, PART VI, SECTION A, LINE 7A: THE MEMBERS OF THE ASSOCIATION VOTE TO ELECT THE MEMBERS OF THE GOVERNING BOARD. FORM 990, PART VI, SECTION A, LINE 7B: DECISIONS OF THE GOVERNING BOARD ARE AT TIMES SUBJECT TO THE APPROVAL OF THE ASSOCIATION'S MEMBERS. FORM 990, PART VI, SECTION B, LINE 11: THE COMPLETED FORM 990 WILL BE REVIEWED BY THE EXECUTIVE COMMITTEE, REVISED IF NEEDED, THEN REVIEWED BY THE ENTIRE BOARD AND REVISED IF NEEDED BEFORE FILING. FORM 990, PART VI, SECTION B, LINE 12C: THE ASSOCIATION MONITORS CONFLICTS OF INTEREST BASED ON THE

POLICY ADOPTED IN 2010.

Name of the organization FLORIDA ART EDUCATION ASSOCIATION, INC.	Employer identification number 51-0182663
FORM 990, PART VI, SECTION C, LINE 19:	
THE ASSOCIATION'S MAKES ITS GOVERNING DOCUMENTS, CONFLICT	S OF
INTEREST POLICY AND 990 AVAILABLE ON ITS WEBSITE. MINUTES	
MEMBERS VIA THE WEBSITE.	
FORM 990, PART XII, LINE 2C	
THE PROCESS FOR OVERSIGHT OF THE AUDIT AND SELECTION OF A	N
INDEPENDENT ACCOUNTANT HAS NOT CHANGED FROM THE PRIOR YEA	R.
	_