

Return of Organization Exempt From Income Tax

2001

Open to Public Inspection

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

Department of the Treasury
Internal Revenue Service

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

A For the 2001 calendar year, or tax year beginning 07/01, 2001, and ending 06/30/2002

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization CRAFT ALLIANCE	D Employer identification number 43-1022226
	Please use IRS label or print or type See Specific Instructions Number and street (or P O box if mail is not delivered to street address) Room/suite 6640 DELMAR BLVD.	E Telephone number (314) 725-1177
	City or town, state or country and ZIP + 4 ST. LOUIS, MO 63130	F Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)

H and I are not applicable to section 527 organizations

H(a) Is this a group return for affiliates? Yes No

H(b) If "Yes" enter number of affiliates

H(c) Are all affiliates included? Yes No (If "No," attach a list See instructions)

H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

G Web site **HTTP://WWW.CRAFTALLIANCE.ORG/**

J Organization type (check only one) 501(c)(3) (insert no) 4947(a)(1) or 527

K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS but if the organization received a Form 990 Package in the mail it should file a return without financial data. Some states require a complete return.

I Enter 4-digit GEN

M Check if the organization is not required to attach Sch B (Form 990 990-EZ or 990-PF)

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 **1,295,274.**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Specific Instructions on page 16)

Revenue	1 Contributions, gifts, grants and similar amounts received				
	a Direct public support	1a		184,383.	
	b Indirect public support	1b		54,082.	
	c Government contributions (grants)	1c		48,110.	
	d Total (add lines 1a through 1c) (cash \$ 286,575. noncash \$)				1d 286,575.
	2 Program service revenue including government fees and contracts (from Part VII, line 93)				2 376,572.
	3 Membership dues and assessments				3 52,810.
	4 Interest on savings and temporary cash investments				4 8,094.
	5 Dividends and interest from securities				5
	6a Gross rents	6a			
b Less rental expenses	6b				
c Net rental income or (loss) (subtract line 6b from line 6a)				6c	
7 Other investment income (describe)				7	
8a Gross amount from sales of assets other than inventory	(A) Securities		(B) Other		
	8a		54,259.		
	b Less cost or other basis and sales expenses	8b		55,198.	
	c Gain or (loss) (attach schedule)	8c		-939.	
d Net gain or (loss) (combine line 8c, columns (A) and (B))				8d -939.	
9 Special events and activities (attach schedule)	a Gross revenue (not including \$ of contributions reported on line 1a)	9a	97,448		
	b Less direct expenses other than fundraising expenses	9b	42,498.		
	c Net income or (loss) from special events (subtract line 9b from line 9a)				9c 54,950.
10a Gross sales of inventory less returns and allowances	\$TMT 2	10a	419,516.		
	b Less cost of goods sold	\$TMT 3	10b	274,168.	
	c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)				10c 145,348.
11 Other revenue (from Part III, line 103)				11	
12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)				12 923,410.	
Expenses	13 Program expenses (from line 44, column (B))				13 583,464.
	14 Management and general (from line 44, column (C))				14 267,940.
	15 Fundraising (from line 44, column (D))				15 84,166.
	16 Payments to affiliates (attach schedule)				16
	17 Total expenses (add lines 16 and 44, column (A))				17 935,570.
Net Assets	18 Excess or (deficit) for the year (subtract line 17 from line 12)				18 -12,160.
	19 Net assets or fund balances at beginning of year (from line 73, column (A))				19 462,566.
	20 Other changes in net assets or fund balances (attach explanation)				20
	21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)				21 450,406.

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ST. LOUIS, MO

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FILMED DEC 03 02

Part II Statement of Functional Expenses All organizations must complete column (A) Columns (B) (C) and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others (See Specific Instructions on page 21)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____)	22			
23 Specific assistance to individuals (attach schedule)	23			
24 Benefits paid to or for members (attach schedule)	24			
25 Compensation of officers, directors, etc	25 50,452.		50,452.	
26 Other salaries and wages	26 509,313.	337,807.	109,054.	62,452.
27 Pension plan contributions	27 7,786.	5,155.	1,678.	953.
28 Other employee benefits	28			
29 Payroll taxes	29 43,282.	26,121.	12,333.	4,828.
30 Professional fundraising fees	30			
31 Accounting fees	31 23,813.	560.	17,223.	6,030.
32 Legal fees	32			
33 Supplies	33 18,844.		18,844.	
34 Telephone	34 6,092.	5,482.	610.	
35 Postage and shipping	35 14,441.	6,623.	5,743.	2,075.
36 Occupancy	36			
37 Equipment rental and maintenance	37 8,453.	7,608.	845.	
38 Printing and publications	38 14,322.	9,674.	2,504.	2,144.
39 Travel	39			
40 Conferences conventions and meetings	40			
41 Interest	41 11,793.		11,793.	
42 Depreciation depletion etc (attach schedule)	42 37,192.	33,473.	2,975.	744.
43 Other expenses not covered above (itemize) STMT 4	43a 189,787.	150,961.	33,886.	4,940.
b	43b			
c	43c			
d	43d			
e	43e			
44 Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44 935,570.	583,464.	267,940.	84,166.

Joint Costs Check if you are following SOP 98-2
 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ _____ (ii) the amount allocated to Program services \$ _____
 (iii) the amount allocated to Management and general \$ _____, and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See Specific Instructions on page 24)

What is the organization's primary exempt purpose? STMT 5	Program Service Expenses (Required for 501(c)(3) and (4) orgs and 4947(a)(1) trusts but optional for others)
a <u>EDUCATION CENTER - PROVIDES CURRICULUM OF VISUAL ARTS CLASSES AND WORKSHOPS FOR CHILDREN AND ADULTS. APPROXIMATELY 2,122 CLIENTS SERVED.</u> (Grants and allocations \$ _____)	309,643.
b <u>GALLERY - EDUCATIONAL EXHIBITS EXPLORING THE USE OF VARIOUS MATERIALS IN CONTEMPORARY CRAFT AS WELL AS HISTORICAL ANTECEDENTS. APPROXIMATELY 15,000 SERVED.</u> (Grants and allocations \$ _____)	202,757.
c <u>OUTREACH - THIS PROGRAM TOUCHES MANY SCHOOL AGE INDIVIDUALS AS WELL AS INDIVIDUALS WITH VARIOUS CHALLENGES. COURSES AT CRAFT ALLIANCE ARE TAUGHT AT URBAN SCHOOLS AND ON SITE.</u> (Grants and allocations \$ _____)	71,064.
d _____ (Grants and allocations \$ _____)	
e Other program services (attach schedule) (Grants and allocations \$ _____)	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	583,464.

Part IV Balance Sheets (See Specific Instructions on page 24)

Note <i>Where required, attached schedules and amounts within the description column should be for end-of-year amounts only</i>		(A) Beginning of year		(B) End of year
Assets	45 Cash - non-interest-bearing	100.	45	100.
	46 Savings and temporary cash investments	395,003.	46	273,398.
	47a Accounts receivable	47a 11,058.		
	b Less allowance for doubtful accounts	47b	11,816.	47c 11,058.
	48a Pledges receivable	48a 117,650.		
	b Less allowance for doubtful accounts	48b	55,585.	48c 117,650.
	49 Grants receivable		49	
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
	51a Other notes and loans receivable (attach schedule)	51a		
	b Less allowance for doubtful accounts	51b		51c
	52 Inventories for sale or use		69,208.	52 93,785.
	53 Prepaid expenses and deferred charges			53
	54 Investments - securities (attach schedule)	▶ <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54
	55a Investments - land, buildings, and equipment basis	55a 751,578.		
	b Less accumulated depreciation (attach schedule)	55b 463,606.	267,310.	55c 287,972.
56 Investments - other (attach schedule)			56	
57a Land, buildings, and equipment basis	57a			
b Less accumulated depreciation (attach schedule)	57b		57c	
58 Other assets (describe ▶ _____)			58	
59 Total assets (add lines 45 through 58) (must equal line 74)		799,022	59	783,963.
Liabilities	60 Accounts payable and accrued expenses	118,642.	60	54,935.
	61 Grants payable		61	
	62 Deferred revenue	79,731.	62	83,086.
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63	
	64a Tax-exempt bond liabilities (attach schedule)		64a	
	b Mortgages and other notes payable (attach schedule) \$TMT 6	138,083.	64b	195,536.
65 Other liabilities (describe ▶ _____)		65		
66 Total liabilities (add lines 60 through 65)		336,456.	66	333,557.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74			
	67 Unrestricted	18,262.	67	-18,939.
	68 Temporarily restricted	422,179.	68	447,220.
	69 Permanently restricted	22,125.	69	22,125.
	Organizations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 70 through 74			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income or other funds		72	
	73 Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72, column (A) must equal line 19, and column (B) must equal line 21)	462,566.	73	450,406.
	74 Total liabilities and net assets / fund balances (add lines 66 and 73)	799,022.	74	783,963.

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Part VI Other Information (See Specific Instructions on page 27)

	Yes	No
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76	Did the organization engage in any activity not previously reported to the IRS? If "Yes" attach a detailed description of each activity	76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	77		X
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b	N/A	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a		X
b	If "Yes" enter the name of the organization _____ and check whether it is <input type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt			
81a	Enter direct or indirect political expenditure See line 81 instructions	81a	NONE	
b	Did the organization file Form 1120-POL for this year?	81b	N/A	
82a	Did the organization receive donated services or the use of materials equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X	
b	If "Yes," you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III)	82b		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	N/A	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A	
85	501(c)(4) (5), or (6) organizations a Were substantially all dues nondeductible by members?	85a	N/A	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year	85b	N/A	
c	Dues, assessments and similar amounts from members	85c	N/A	
d	Section 162(e) lobbying and political expenditures	85d	N/A	
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A	
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A	
g	Does the organization elect to pay the section 6033(e) tax on the amount in 85f?	85g	N/A	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A	
86	501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12	86a	N/A	
b	Gross receipts, included on line 12 for public use of club facilities	86b	N/A	
87	501(c)(12) orgs Enter a Gross income from members or shareholders	87a	N/A	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87b	N/A	
88	At any time during the year did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88		X
89a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 <u>NONE</u> section 4912 <u>NONE</u> , section 4955 <u>NONE</u>			
b	501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b		X
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			NONE
d	Enter Amount of tax on line 89c, above, reimbursed by the organization			NONE
90a	List the states with which a copy of this return is filed <u>N/A</u>			
b	Number of employees employed in the pay period that includes March 12, 2001 (See instructions)	90b	63	
91	The books are in care of <u>KEVIN BLANSIT</u> Telephone no <u>314-725-1177</u> Located at <u>6640 DELMAR BLVD. ST. LOUIS, MO</u> ZIP + 4 <u>63130</u>			
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year <u>92</u>			N/A

Part VII Analysis of Income-Producing Activities (See Specific Instructions on page 32)

Note Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a TUITION					323,007.
b SPECIAL PROGRAMS					53,565.
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					52,810.
95 Interest on savings and temporary cash investments			14	8,094.	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	-939.	
101 Net income or (loss) from special events			01	54,950.	
102 Gross profit or (loss) from sales of inventory					145,348.
103 Other revenue a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))				62,105.	574,730.
105 Total (add line 104, columns (B), (D), and (E))					636,835.

Note Line 105 plus line 1d Part I should equal the amount on line 12, Part I

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See Specific Instructions on page 32)

Line No	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
▼	STMT 13

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See Specific Instructions on page 33)

(A) Name, address and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See Specific Instructions on page 33)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Note If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

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

Please

[Signature]

11/6/02
Date

Manager

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

OMB No 1545-0047

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

2001

Supplementary Information - (See separate instructions)

Department of the Treasury
Internal Revenue Service

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization

Employer identification number

CRAFT ALLIANCE

43-1022226

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions List each one If there are none, enter "None ")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$50,000	▶ NONE			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions List each one (whether individuals or firms) If there are none, enter "None ")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	▶ NONE	

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

Schedule A (Form 990 or 990-EZ) 2001

Part III Statements About Activities (See page 2 of the instructions)

		Yes	No
1	During the year, has the organization attempted to influence national state, or local legislation, including any attempt to influence public opinion on legislative matter or referendum? If "Yes" enter the total expenses paid or incurred in connection with the lobbying activities ► \$ _____ (Must equal amount on line 38, Part VI-A, or line 1 or Part VI-B) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities		X
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers creators, key employees or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee majority owner or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions)		
a	Sale, exchange, or leasing of property?		X
b	Lending of money or other extension of credit? . . .		X
c	Furnishing of goods, services, or facilities? . . .		X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1 000)?	X	
e	Transfer of any part of its income or assets? . . .		X
3	Does the organization make grants for scholarships, fellowships, student loans, etc ? (See Note below)	X	
4	Do you have a section 403(b) annuity plan for your employees?		X
Note Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments			

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions)

- The organization is not a private foundation because it is (Please check only ONE applicable box)
- 5 A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
 - 6 A school Section 170(b)(1)(A)(ii) (Also complete Part V)
 - 7 A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
 - 8 A Federal state or local government or governmental unit Section 170(b)(1)(A)(v)
 - 9 A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state ► _____
 - 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the Support Schedule in Part IV-A)
 - 11 a An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)
 - 11 b A community trust Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)
 - 12 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 charitable, etc , 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) (Also complete the Support Schedule in Part IV-A)
 - 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))

Provide the following information about the supported organizations (See page 5 of the instructions)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14 An organization organized and operated to test for public safety Section 509(a)(4) (See page 6 of the instructions)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11 or 12) *Use cash method of accounting*

Note You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

Calendar year (or fiscal year beginning in)	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants See line 28)	286,575	158,772	444,079	307,099	1,196,525
16 Membership fees received	52,810	16,480	45,046	50,144	164,480
17 Gross receipts from admissions merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	419,516	154,313	871,049	789,372	2,234,250
18 Gross income from interest dividends amounts received from payments on securities loans (section 512(a)(5)) rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	8,094	10,412	18,230	13,680	50,416
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22	766,995	339,977	1,378,404	1,160,295	3,645,671
24 Line 23 minus line 17	347,479	185,664	507,355	370,923	1,411,421
25 Enter 1% of line 23	7,670	3,400	13,784	11,603	
26 Organizations described on lines 10 or 11	a Enter 2% of amount in column (e), line 24				26a 28,228
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1997 through 2000 exceeded the amount shown in line 26a Do not file this list with your return Enter the total of all these excess amounts					26b 75,316
c Total support for section 509(a)(1) test Enter line 24, column (e)					26c 1,411,421
d Add Amounts from column (e) for lines 18 50,416 19 _____ 22 _____ 26b 75,316					26d 125,732
e Public support (line 26c minus line 26d total)					26e 1,285,689
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 91.0918 %
27 Organizations described on line 12	a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person" prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person" Do not file this list with your return Enter the sum of such amounts for each year				
(2000) _____ (1999) _____ (1998) <u>NOT APPLICABLE</u> (1997) _____					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11, as well as individuals) Do not file this list with your return After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year					
(2000) _____ (1999) _____ (1998) _____ (1997) _____					
c Add Amounts from column (e) for lines 15 _____ 16 _____ 17 _____ 20 _____ 21 _____					27c _____
d Add Line 27a total _____ and line 27b total _____					27d _____
e Public support (line 27c total minus line 27d total)					27e _____
f Total support for section 509(a)(2) test Enter amount on line 23 column (e)					27f _____
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g _____ %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h _____ %
28 Unusual Grants For an organization described in line 10, 11, or 12 that received any unusual grants during 1997 through 2000, prepare a list for your records to show, for each year the name of the contributor the date and amount of the grant and a brief description of the nature of the grant Do not file this list with your return Do not include these grants in line 15					

Part V Private School Questionnaire (See page 7 of the instructions)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30	
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement) ----- ----- -----	31	
32 Does the organization maintain the following		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement) ----- -----	32d	
33 Does the organization discriminate by race in any way with respect to		
a Students' rights or privileges?	33a	
b Admissions policies?	33b	
c Employment of faculty or administrative staff?	33c	
d Scholarships or other financial assistance?	33d	
e Educational policies?	33e	
f Use of facilities?	33f	
g Athletic programs?	33g	
h Other extracurricular activities? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement) ----- ----- -----	33h	
34a Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement	34b	
35 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	35	

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions)

(To be completed **ONLY** by an eligible organization that filed Form 5768) **NOT APPLICABLE**

- Check a if the organization belongs to an affiliated group
- Check b if you checked "a" and "limited control" provisions apply

Limits on Lobbying Expenditures

(The term "expenditures" means amounts paid or incurred)

		(a) Affiliated group totals	(b) To be completed for ALL electing organizations												
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36													
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37													
38	Total lobbying expenditures (add lines 36 and 37)	38													
39	Other exempt purpose expenditures	39													
40	Total exempt purpose expenditures (add lines 38 and 39)	40													
41	Lobbying nontaxable amount Enter the amount from the following table - <table border="0" style="width: 100%; margin-top: 5px;"> <tr> <td style="width: 50%;">If the amount on line 40 is -</td> <td style="width: 50%;">The lobbying nontaxable amount is -</td> </tr> <tr> <td>Not over \$500 000</td> <td>20% of the amount on line 40</td> </tr> <tr> <td>Over \$500 000 but not over \$1,000 000</td> <td>\$100 000 plus 15% of the excess over \$500 000</td> </tr> <tr> <td>Over \$1 000,000 but not over \$1 500 000</td> <td>\$175 000 plus 10% of the excess over \$1 000 000</td> </tr> <tr> <td>Over \$1 500 000 but not over \$17 000 000</td> <td>\$225,000 plus 5% of the excess over \$1 500 000</td> </tr> <tr> <td>Over \$17 000 000</td> <td>\$1 000 000</td> </tr> </table>	If the amount on line 40 is -	The lobbying nontaxable amount is -	Not over \$500 000	20% of the amount on line 40	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	41	
If the amount on line 40 is -	The lobbying nontaxable amount is -														
Not over \$500 000	20% of the amount on line 40														
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														
42	Grassroots nontaxable amount (enter 25% of line 41)	42													
43	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43													
44	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44													

Caution If there is an amount on either line 43 or line 44, you must file Form 4720

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 45 through 50 on page 11 of the instructions)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
45	Lobbying nontaxable amount				
46	Lobbying ceiling amount (150% of line 45(e))				
47	Total lobbying expenditures				
48	Grassroots nontaxable amount				
49	Grassroots ceiling amount (150% of line 48(e))				
50	Grassroots lobbying expenditures				

Part VI-B Lobbying Activity by Nonelecting Public Charities

NOT APPLICABLE

(For reporting only by organizations that did not complete Part VI-A) (See page 12 of the instructions)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes	No	Amount
a Volunteers		X	
b Paid staff or management (Include compensation in expenses reported on lines c through h)		X	
c Media advertisements		X	
d Mailings to members, legislators, or the public		X	
e Publications, or published or broadcast statements		X	
f Grants to other organizations for lobbying purposes		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures or any other means		X	
i Total lobbying expenditures (add lines c through h)			

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

Schedule of Contributors

2001

Supplementary Information for
line 1 of Form 990, 990-EZ and 990-PF (see instructions)

Name of organization

Employer identification number

CRAFT ALLIANCE

43-1022226

Organization type (check one)

Filers of

Section:

Form 990 or 990-EZ

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 box(es) for both the General rule and a Special rule - see instructions)

General Rule -

For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor (Complete Parts I and II)

Special Rules -

For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms (Complete Parts I and II)

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals (Complete Parts I, II, and III)

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc , purposes, but these contributions did not aggregate to more than \$1,000 (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc , purpose Do not complete any of the Parts unless the General rule applies to this organization because it received nonexclusively religious, charitable, etc , contributions of \$5,000 or more during the year) ▶ \$ _____

Caution Organizations that are not covered by the General rule and/or the Special rules do not file Schedule B (Form 990, 990-EZ, or 990-PF) but they **must** check the box in the heading of their Form 990, Form 990-EZ, or on line 1 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization CRAFT ALLIANCE	Employer identification number 43-1022226
---	---

Part I Contributors (See Specific Instructions)

(a) No	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>1</u>	_____ _____ _____	<u>48,110</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u>2</u>	_____ _____ _____	<u>49,082</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u>3</u>	_____ _____ _____	<u>69,383</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u>5</u>	_____ _____ _____	<u>30,000</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u>11</u>	_____ _____ _____	<u>5,000</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u>16</u>	_____ _____ _____	<u>5,000</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

Name of organization

Employer identification number

CRAFT ALLIANCE

43-102226

Part I Contributors (See Specific Instructions)

(a) No	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
19	_____	25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
21	_____	7,250.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
22	_____	5,250.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
24	_____	12,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
25	_____	5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
26	_____	15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

Name of organization

Employer identification number

CRAFT ALLIANCE

43-1022226

Part I Contributors (See Specific Instructions)

(a) No	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
27		5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
28		5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

FORM 990, PART I - SPECIAL FUNDRAISING EVENTS AND ACTIVITIES

DESCRIPTION	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
STUDIO POT SALE	20,473.	14,574.	5,899.
GALA	70,480.	27,924.	42,556.
RAFFLE TICKETS	5,995.		5,995.
EVENT 1 REVENUE	500.		500.
TOTALS	97,448.	42,498.	54,950.

FORM 990, PART I - GROSS SALES LESS RETURNS AND ALLOWANCES

=====

DESCRIPTION	AMOUNT
-----	-----
INVENTORY SALES	419,516.

TOTAL	419,516.
	=====

FORM 990, PART I - COST OF GOODS SOLD

=====

INVENTORY AT BEGINNING OF YEAR	69,208.
PURCHASES	298,745.
SALARIES AND WAGES	
OTHER COSTS	

SUBTOTAL	367,953.
MINUS ENDING INVENTORY	93,785.

COST OF GOODS SOLD	274,168.
	=====

FORM 990, PART II - OTHER EXPENSES

DESCRIPTION	TOTAL	PROGRAM SERVICES	MANAGEMENT AND GENERAL	FUNDRAISING
ADVERTISING	38,392.	38,233.	159.	
DUES AND SUBSCRIPTIONS	483.	141.		342.
CLASS SUPPLIES	41,619.	41,619.		
MISCELLANEOUS	14,608.	2,217.	10,945.	1,446.
UTILITIES	21,875.	19,688.	2,187.	
SPECIAL PROGRAMS & SHOWS	7,224.	7,224.		
INSURANCE	37,032.	25,182.	8,888.	2,962.
GIFT WRAP	4,243.	4,243.		
TRAVEL	2,674.	1,927.	557.	190.
CURATOR	10,487.	10,487.		
REPAIRS AND MAINTENANCE	10,319.		10,319.	
TAXES AND LICENSES	831.		831.	
TOTALS	189,787.	150,961.	33,886.	4,940.

FORM 990, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE

=====

CRAFT ALLIANCE OFFERS CLASSES AND WORKSHOPS DESIGNED FOR ALL AGES AND ABILITIES IN THE VISUAL ARTS MEDIA IN THE ST. LOUIS METROPOLITAN AREA. IN ADDITION, CRAFT ALLIANCE OFFERS VARIOUS OUTREACH EXPERIENCES, BOTH ON AND OFF SITE, TO VARIOUS GROUPS, SUCH AS PLACES FOR PEOPLE AND ITS OWN YOUNG ARTISTS PROGRAM. ADDITIONALLY, THE ORGANIZATION HAS A GALLERY WHICH FEATURES SIX EDUCATIONAL EXHIBITIONS EACH YEAR AND PROVIDES A YEAR-ROUND OUTLET FOR NORTH AMERICAN ARTISTS TO SELL THEIR WORK.

FORM 990, PART IV - MORTGAGES AND OTHER NOTES PAYABLE

=====

LENDER: COMMERCE BANK

BEGINNING BALANCE DUE 138,083.

ENDING BALANCE DUE 195,536.

TOTAL BEGINNING MORTGAGES AND OTHER NOTES PAYABLE 138,083.

=====

TOTAL ENDING MORTGAGES AND OTHER NOTES PAYABLE 195,536.

=====

FORM 990, PART IV-A - OTHER REVENUE ON BOOKS BUT NOT ON RETURN

DESCRIPTION

AMOUNT

COST OF GOODS SOLD INCLUDED IN EXPENSES ON FINANCIAL STATEMENTS BUT NETTED AGAINST SALES ON FORM 990

274,168.

DIRECT FUNDRAISING EXPENSES INCLUDED IN EXPENSES ON FINANCIAL STATEMENTS BUT NETTED AGAINST SPECIAL EVENT REVENUE ON FORM 990

42,498.

TOTAL

316,666.

FORM 990, PART IV-B - OTHER EXPENSES ON BOOKS BUT NOT ON RETURN

DESCRIPTION	AMOUNT
COST OF GOODS SOLD INCLUDED IN EXPENSES ON FINANCIAL STATEMENTS BUT NETTED AGAINST SALES ON FORM 990	274,168.
DIRECT FUNDRAISING EXPENSES INCLUDED IN EXPENSES ON FINANCIAL STATEMENTS BUT NETTED AGAINST SPECIAL EVENT REVENUE ON FORM 990	42,498.
TOTAL	316,666.

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS EXPENSE ACCT AND OTHER ALLOWANCES

TITLE AND TIME DEVOTED TO POSITION

COMPENSATION

NAME AND ADDRESS

EXECUTIVE DIR. 12,668. 231. NONE

CHAIR VARIES

VICE CHAIR VARIES

VICE CHAIR VARIES

SECRETARY VARIES

TREASURER VARIES

BOARD MEMBER VARIES

BOARD MEMBER VARIES

SHARON MCPHERRON 6640 DELMAR BLVD. ST LOUIS, MO 63130

MICHAEL WEISBROD 6640 DELMAR BLVD ST LOUIS, MO 63130

HELEN SEEHERMAN 6640 DELMAR BLVD ST. LOUIS, MO 63130

JO JASPER DEAN 6640 DELMAR ST LOUIS, MO 63130

AUSTIN TAO 6640 DELMAR BLVD ST. LOUIS, MO 63130

DANIEL FERRISS 6640 DELMAR BLVD ST LOUIS, MO 63130

MARLENE ALTMAN 6640 DELMAR BLVD ST. LOUIS, MO 63130

BARRETT BAEBLER 6640 DELMAR BLVD ST. LOUIS, MO 63130

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS

EXPENSE ACCT AND OTHER ALLOWANCES

TITLE AND TIME DEVOTED TO POSITION

COMPENSATION

NAME AND ADDRESS

VICKIE MATHIS DENSON
6640 DELMAR BLVD
ST. LOUIS MO 63130

BOARD MEMBER
VARIES

KIT HEFFERN
6640 DELMAR BLVD
ST. LOUIS, MO 63130

BOARD MEMBER
VARIES

ELIZABETH HILLIKER MD
6640 DELMAR BLVD
ST LOUIS, MO 63130

BOARD MEMBER
VARIES

HARVARD MUHM
6640 DELMAR BLVD
ST. LOUIS, MO 63130

VICE CHAIR
VARIES

VERONICA O'BRIEN
6640 DELMAR BLVD
ST. LOUIS, MO 63130

BOARD MEMBER
VARIES

PATRICIA RICH
6640 DELMAR BLVD
ST. LOUIS, MO 63130

BOARD MEMBER
VARIES

HERBERT SMITH
6640 DELMAR BLVD
ST. LOUIS, MO 63130

BOARD MEMBER
VARIES

CHRISTOPHER THAU
6640 DELMAR BLVD
ST. LOUIS, MO 63130

BOARD MEMBER
VARIES

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
THOMAS TYLER 6640 DELMAR BLVD ST. LOUIS, MO 63130	BOARD MEMBER VARIES			
CATHY FREEMAN WICE 6640 DELMAR BLVD ST. LOUIS, MO 63130	BOARD MEMBER VARIES			
DETER WISNIEWSKI 6640 DELMAR BLVD ST. LOUIS, MO 63130	BOARD MEMBER VARIES			
JEANNE WOLFSON 6640 DELMAR BLVD ST. LOUIS, MO 63130	BOARD MEMBER VARIES			
BURTON A SHATZ 6640 DELMAR BLVD ST. LOUIS, MO 63130	VICE-CHAIR VARIES			
SCHUYLER GOTT ANDREWS 6640 DELMAR BLVD ST. LOUIS, MO 63130	PRESIDENT 40	37,784.	1,572.	NONE
MARVIN J. SCHNEIDER 6640 DELMAR BLVD ST. LOUIS, MO 63130	BOARD MEMBER VARIES			
ELLEN CURLEE 6640 DELMAR BLVD ST. LOUIS, MO 63130	BOARD MEMBER VARIES			

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
ELAINE DILLER 6640 DELMAR BLVD ST. LOUIS, MO 63130	BOARD MEMBER VARIES			
LAURA MEYER 6640 DELMAR BLVD ST. LOUIS, MO 63130	BOARD MEMBER VARIES			
ANNA POLIZZI-KELLER 6640 DELMAR BLVD ST. LOUIS, MO 63130	BOARD MEMBER VARIES			
TAULBY ROACH 6640 DELMAR BLVD ST LOUIS, MO 63130	BOARD MEMBER VARIES			
CARLIN SCANLAN 6640 DELMAR BLVD ST. LOUIS, MO 63130	BOARD MEMBER VARIES			
GRAND TOTALS		50,452.	1,803.	NONE

FORM 990, PART VIII - ACCOMPLISHMENT OF EXEMPT PURPOSES

=====

LINE NO.	EXPLANATION OF HOW EACH ACTIVITY FOR WHICH INCOME IS REPORTED IN COLUMN (E) OF PART VII CONTRIBUTED IMPORTANTLY TO THE ACCOMPLISHMENT OF EXEMPT PURPOSES
---	-----
93A	TUITION FROM THE CURRICULUM OF VISUAL ARTS CLASSES AND WORKSHOPS FOR CHILDREN & ADULTS.
93B	AMOUNTS COLLECTED FOR SPECIFIC PROGRAM ACTIVITIES RELATING TO THE VISUAL ARTS.
94	DUES COLLECTED FROM MEMBERS IN EXCHANGE FOR THE VARIOUS BENEFITS OF MEMBERSHIP.
102	EXHIBITIONS ALLOW THE PUBLIC TO VIEW EXCEPTIONAL CONTEMPORARY CRAFTS BY LOCAL, NATIONAL AND INTERNATIONAL ARTISTS. LECTURES AND EDUCATIONAL ARTICLES ABOUT CRAFT PROCESSES ARE FREQUENTLY INCLUDED IN THE EXHIBITIONS. SALES OF ART WORK ENCOURAGE PERSONAL APPRECIATION & PARTICIPATION IN THE ARTS RELATED TO MISSION OF THE CRAFT ALLIANCE.

SCHEDULE A, PART III - EXPLANATION FOR LINE 2D

=====

SEE FORM 990, PART V.

SCHEDULE A, PART III - EXPLANATION FOR LINE 4

=====

SCHOLARSHIPS ARE AWARDED FOR CLASSES AND WORKSHOPS BASED ON FINANCIAL
NEED.

Sales of Business Property
 (Also Involuntary Conversions and Recapture Amounts
 Under Sections 179 and 280F(b)(2))

▶ Attach to your tax return ▶ See separate instructions

Name(s) shown on return CRAFT ALLIANCE	Identifying number 43-1022226
--	---

1 Enter the gross proceeds from sales or exchanges reported to you for 2001 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 (see instructions) **1**

Part I Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft - Most Property Held More Than 1 Year (See instructions)

(a) Description of property	(b) Date acquired (mo day yr)	(c) Date sold (mo day yr)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or other basis, plus improvements and expense of sale	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
2 SEE STATEMENT 1						- 939.

3 Gain, if any, from Form 4684, line 39	3
4 Section 1231 gain from installment sales from Form 6252, line 26 or 37	4
5 Section 1231 gain or (loss) from like-kind exchanges from Form 8824	5
6 Gain, if any, from line 32, from other than casualty or theft	6
7 Combine lines 2 through 6 Enter the gain or (loss) here and on the appropriate line as follows Partnerships (except electing large partnerships) Report the gain or (loss) following the instructions for Form 1065 Schedule K, line 6 Skip lines 8, 9, 11, and 12 below S corporations Report the gain or (loss) following the instructions for Form 1120S, Schedule K lines 5 and 6 Skip lines 8, 9, 11, and 12 below, unless line 7 is a gain and the S corporation is subject to the capital gains tax. All others If line 7 is zero or a loss enter the amount from line 7 on line 11 below and skip lines 8 and 9 If line 7 is a gain and you did not have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on Schedule D and skip lines 8, 9, 11, and 12 below	7 align="right"> - 939.
8 Nonrecaptured net section 1231 losses from prior years (see instructions)	8
9 Subtract line 8 from line 7 If zero or less, enter -0- Also enter on the appropriate line as follows (see instructions) S corporations Enter any gain from line 9 on Schedule D (Form 1120S), line 15 and skip lines 11 and 12 below All others If line 9 is zero enter the gain from line 7 on line 12 below If line 9 is more than zero, enter the amount from line 8 on line 12 below, and enter the gain from line 9 as a long-term capital gain on Schedule D	9

Part II Ordinary Gains and Losses

10 Ordinary gains and losses not included on lines 11 through 17 (include property held 1 year or less)	

11 Loss, if any, from line 7	11 (939)
12 Gain, if any, from line 7 or amount from line 8, if applicable	12
13 Gain, if any, from line 31	13
14 Net gain or (loss) from Form 4684, lines 31 and 38a	14
15 Ordinary gain from installment sales from Form 6252, line 25 or 36	15
16 Ordinary gain or (loss) from like-kind exchanges from Form 8824	16
17 Recapture of section 179 expense deduction for partners and S corporation shareholders from property dispositions by partnerships and S corporations (see instructions)	17
18 Combine lines 10 through 17 Enter the gain or (loss) here and on the appropriate line as follows a For all except individual returns Enter the gain or (loss) from line 18 on the return being filed b For individual returns (1) If the loss on line 11 includes a loss from Form 4684, line 35 column (b)(ii), enter that part of the loss here Enter the part of the loss from income-producing property on Schedule A (Form 1040), line 27, and the part of the loss from property used as an employee on Schedule A (Form 1040), line 22 Identify as from "Form 4797, line 18b(1)" See instructions (2) Redetermine the gain or (loss) on line 18 excluding the loss, if any on line 18b(1) Enter here and on Form 1040, line 14	18 align="right"> - 939.
	18b(1)
	18b(2)

Part III Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255

19 (a) Description of section 1245 1250 1252 1254 or 1255 property		(b) Date acquired (mo day yr)	(c) Date sold (mo day yr)		
A					
B					
C					
D					
These columns relate to the properties on lines 19A through 19D		Property A	Property B	Property C	Property D
20	Gross sales price (Note See line 1 before completing)	20			
21	Cost or other basis plus expense of sale	21			
22	Depreciation (or depletion) allowed or allowable	22			
23	Adjusted basis Subtract line 22 from line 21	23			
24	Total gain Subtract line 23 from line 20	24			
25 If section 1245 property					
a	Depreciation allowed or allowable from line 22	25a			
b	Enter the smaller of line 24 or 25a	25b			
26 If section 1250 property if straight line depreciation was used enter 0 on line 26g except for a corporation subject to section 291					
a	Additional depreciation after 1975 (see instructions)	26a			
b	Applicable percentage multiplied by the smaller of line 24 or line 26a (see instructions)	26b			
c	Subtract line 26a from line 24 if residential rental property or line 24 is not more than line 26a skip lines 26d and 26e	26c			
d	Additional depreciation after 1969 and before 1976	26d			
e	Enter the smaller of line 26c or 26d	26e			
f	Section 291 amount (corporations only)	26f			
g	Add lines 26b 26e and 26f	26g			
27 If section 1252 property Skip this section if you did not dispose of farmland or if this form is being completed for a partnership (other than an electing large partnership)					
a	Soil water and land clearing expenses	27a			
b	Line 27a multiplied by applicable percent (see instructions)	27b			
c	Enter the smaller of line 24 or 27b	27c			
28 If section 1254 property					
a	Intangible drilling and development costs expenditures for development of mines and other natural deposits and mining exploration costs (see instructions)	28a			
b	Enter the smaller of line 24 or 28a	28b			
29 If section 1255 property					
a	Applicable percentage of payments excluded from income under section 126 (see instructions)	29a			
b	Enter the smaller of line 24 or 29a (see instructions)	29b			

Summary of Part III Gains Complete property columns A through D through line 29b before going to line 30

30	Total gains for all properties Add property columns A through D line 24	30	
31	Add property columns A through D lines 25b 26g 27c 28b and 29b Enter here and on line 13	31	
32	Subtract line 31 from line 30 Enter the portion from casualty or theft on Form 4684 line 33 Enter the portion from other than casualty or theft on Form 4797 line 6	32	

Part IV Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to 50% or Less
(See instructions)

	(a) Section 179	(b) Section 280F(b)(2)
33	Section 179 expense deduction or depreciation allowable in prior years	33
34	Recomputed depreciation See instructions	34
35	Recapture amount Subtract line 34 from line 33 See the instructions for where to report	35

FEDERAL FOOTNOTES

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FORM 990 PART IV, 55B

LAND	35,462
BUILDINGS AND IMPROVEMENTS	509,803
EQUIPMENT	206,313
SUBTOTAL	<u>751,578</u>
LESS:ACCUMULATED DEPRECIATION	463,606
TOTAL	<u>287,972</u>

FEDERAL FOOTNOTES

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FORM 990, PART II, LINE 42:

EQUIPMENT - 5 & 10 YR SL, VAR. ACQ. DATES	10,309
BUILDING AND IMPROVEMENTS - VAR. LIVES, SL, VAR. ACQ. DATES	26,883
	<u>37,192</u>