

Return of Organization Exempt From Income Tax

2006

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)

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

Department of the Treasury
Internal Revenue Service

A For the 2006 calendar year, or tax year beginning 07/01, 2006, and ending 06/30/2007

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	Please use IRS label or print or type See Specific Instructions	C Name of organization CRAFT ALLIANCE Number and street (or P O box if mail is not delivered to street address) Room/suite 6640 DELMAR BLVD. City or town, state or country, and ZIP + 4 ST. LOUIS, MO 63130	D Employer identification number 43-1022226 E Telephone number (314) 725-1177 F Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)
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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? (If "No," attach a list See instructions) Yes No

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

G Website: 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 is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

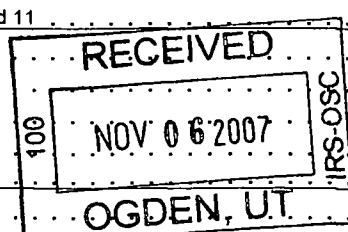
I Group Exemption Number

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 **1,876,630.**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions)

	Description	Sub-column	Amount
Revenue	1 Contributions, gifts, grants, and similar amounts received		
	a Contributions to donor advised funds	1a	
	b Direct public support (not included on line 1a)	1b	658,655.
	c Indirect public support (not included on line 1a)	1c	123,053.
	d Government contributions (grants) (not included on line 1a)	1d	
	e Total (add lines 1a through 1d) (cash \$ <u>781,708.</u> noncash \$ <u> </u>)	1e	781,708.
	2 Program service revenue including government fees and contracts (from Part VII, line 93)	2	413,820.
	3 Membership dues and assessments	3	52,805.
	4 Interest on savings and temporary cash investments	4	1,288.
	5 Dividends and interest from securities	5	
	6 a 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 <input type="checkbox"/>)	7		
	8 a Gross amount from sales of assets other than inventory	(A) Securities <input type="checkbox"/> (B) Other <input type="checkbox"/>	
	b Less cost or other basis and sales expenses	8a	
	c Gain or (loss) (attach schedule)	8b	
	d Net gain or (loss) Combine line 8c, columns (A) and (B)	8c	
	9 Special events and activities (attach schedule) If any amount is from gaming, check here <input type="checkbox"/>		
	a Gross revenue (not including \$ <u> </u> of contributions reported on line 1b)	9a	165,443.
	b Less direct expenses other than fundraising expenses	9b	63,571.
	c Net income or (loss) from special events Subtract line 9b from line 9a	9c	101,872.
	10 a Gross sales of inventory, less returns and allowances	10a	455,435.
	b Less cost of goods sold	10b	256,837.
	c Gross profit or (loss) from sales of inventory (attach schedule) Subtract line 10b from line 10a	10c	198,598.
11 Other revenue (from Part VII, line 103)	11	6,131.	
12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12	1,556,222.	
Expenses	13 Program services (from line 44, column (B))	13	858,171.
	14 Management and general (from line 44, column (C))	14	108,909.
	15 Fundraising (from line 44, column (D))	15	175,037.
	16 Payments to affiliates (attach schedule)	16	
	17 Total expenses. Add lines 16 and 44, column (A)	17	1,142,117.
Net Assets	18 Excess or (deficit) for the year Subtract line 17 from line 12	18	414,105.
	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19	210,448.
	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	624,553.



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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 the instructions)

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
22a Grants paid from donor advised funds (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>				
22b Other grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>				
23 Specific assistance to individuals (attach schedule)				
24 Benefits paid to or for members (attach schedule)				
25a Compensation of current officers, directors, key employees, etc listed in Part V-A (attach schedule)	123,500.	67,500.	21,000.	STMT 4 35,000.
b Compensation of former officers, directors, key employees, etc listed in Part V-B (attach schedule)				
c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)				
26 Salaries and wages of employees not included on lines 25a, b, and c	546,684.	430,815.	18,879.	96,990.
27 Pension plan contributions not included on lines 25a, b, and c	246.		246.	
28 Employee benefits not included on lines 25a - 27				
29 Payroll taxes				
30 Professional fundraising fees				
31 Accounting fees				
32 Legal fees				
33 Supplies	13,793.	9,545.	2,850.	1,398.
34 Telephone				
35 Postage and shipping	38,905.	30,556.	234.	8,115.
36 Occupancy				
37 Equipment rental and maintenance	16,224.	8,688.	1,890.	5,646.
38 Printing and publications	48,995.	39,238.	435.	9,322.
39 Travel	8,032.	5,431.	1,676.	925.
40 Conferences, conventions, and meetings				
41 Interest	31,387.	8,212.	23,175.	
42 Depreciation, depletion, etc (attach schedule)	68,883.	57,402.	11,481.	
43 Other expenses not covered above (itemize)				
a STMT 5	245,468.	200,784.	27,043.	17,641.
b				
c				
d				
e				
f				
g				
44 Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13-15).	1,142,117.	858,171.	108,909.	175,037.

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 the instructions.)

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.

What is the organization's primary exempt purpose? ▶SEE STATEMENT 6 All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	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 2,250 CLIENTS SERVED.</u> (Grants and allocations \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	424,122.
b <u>GALLERY - EDUCATIONAL EXHIBITS EXPLORING THE USE OF VARIOUS MATERIALS IN CONTEMPORARY CRAFT AS WELL AS HISTORICAL ANTECEDENTS. APPROXIMATELY 200 ARTISTS SERVED</u> (Grants and allocations \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	164,734.
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 \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	135,188.
d <u>EXHIBITION GALLERY - THIS PROGRAM PROVIDES INSPIRATION AND EDUCATION IN FINE CONTEMPORARY CRAFT ART THROUGH EXHIBITION OF WORK BY LEADING AND EMERGING CRAFT ARTISTS FROM THE ST LOUIS REGION AS WELL AS FROM NATIONAL AND INTERNATIONAL ARTISTS. OVER 40,000 ANNUAL VISITORS</u> (Grants and allocations \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	125,978.
e Other program services (attach schedule) SEE STATEMENT 7 (Grants and allocations \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	8,149.
f Total of Program Service Expenses (should equal line 44, column (B), Program services) ▶	858,171.

Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only

		(A) Beginning of year	(B) End of year
Assets	45 Cash - non-interest-bearing	88	45 63
	46 Savings and temporary cash investments	260,355	46 172,474
	47a Accounts receivable	47a 5,653	
	b Less allowance for doubtful accounts	47b 1,289	47c 5,653
	48a Pledges receivable	48a 539,652	
	b Less allowance for doubtful accounts	48b 121,069	48c 539,652
	49 Grants receivable		49
	50a Receivables from current and former officers, directors, trustees, and key employees (attach schedule)		50a
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)		50b
	51a Other notes and loans receivable (attach schedule)	51a	
	b Less allowance for doubtful accounts	51b	51c
	52 Inventories for sale or use	81,179	52 82,532
	53 Prepaid expenses and deferred charges	10,611	53 27,094
	54a Investments - publicly-traded securities	STMT. 8	54a
	b Investments - other securities (attach schedule)	54b	
55a Investments - land, buildings, and equipment basis	55a		
b Less accumulated depreciation (attach schedule)	55b	55c	
56 Investments - other (attach schedule)		56	
57a Land, buildings, and equipment basis	57a 1,091,223		
b Less accumulated depreciation (attach schedule)	57b 769,585	57c 288,486	
58 Other assets, including program-related investments (describe)		58	
59 Total assets (must equal line 74) Add lines 45 through 58	763,077	59 1,149,106	
Liabilities	60 Accounts payable and accrued expenses	58,177	60 76,711
	61 Grants payable		61
	62 Deferred revenue	86,819	62 107,819
	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)	407,633	64b 340,023
	65 Other liabilities (describe)		65
66 Total liabilities. Add lines 60 through 65	552,629	66 524,553	
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	-85,199	67 -28,123
	68 Temporarily restricted	273,522	68 630,551
	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))	210,448	73 624,553
	74 Total liabilities and net assets/fund balances. Add lines 66 and 73	763,077	74 1,149,106

Part V-A Current Officers, Directors, Trustees, and Key Employees (continued)

- 75a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings 24
b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s)
c Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization". If "Yes," attach a statement that includes the information described in the instructions
d Does the organization have a written conflict of interest policy?

Table with 3 columns: Question label, Yes, No. Rows 75b, 75c, 75d with 'X' marks in the No column.

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

Table with 5 columns: (A) Name and address, (B) Loans and Advances, (C) Compensation (if not paid, enter -0-), (D) Contributions to employee benefit plans & deferred compensation plans, (E) Expense account and other allowances. Row 1 contains -0- in columns B, C, D, and E.

Part VI Other Information (See the instructions.)

- 76 Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change
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
78a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?
b If "Yes," has it filed a tax return on Form 990-T for this year?
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement
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?
b If "Yes," enter the name of the organization and check whether it is exempt or nonexempt
81a Enter direct and indirect political expenditures (See line 81 instructions). NONE
b Did the organization file Form 1120-POL for this year?

Table with 3 columns: Question label, Yes, No. Rows 76, 77, 78a, 78b, 79, 80a, 81a, 81b with 'X' marks in the No column.

Part VI Other Information (continued)

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? 82b X
83a Did the organization comply with the public inspection requirements for returns and exemption applications? 83b X
84a Did the organization solicit any contributions or gifts that 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? 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 on line 85f? 85g N/A
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 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
88b 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 88a X
b At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI 88b X
89a 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 NONE, section 4912 NONE, section 4955 NONE NONE
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
e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? 89e X
f All organizations Did the organization acquire a direct or indirect interest in any applicable insurance contract? 89f X
g For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 89g X
90a List the states with which a copy of this return is filed NONE REQUIRED
b Number of employees employed in the pay period that includes March 12, 2006 (See instructions) 90b 57
91a The books are in care of ROBERT LEWIS Telephone no 314-725-1177
Located at 6640 DELMAR BLVD. ST. LOUIS, MO ZIP + 4 63130
b 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)? 91b X
If "Yes," enter the name of the foreign country
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts

Part VI Other Information (continued)

Yes No

c At any time during the calendar year, did the organization maintain an office outside of the United States? 91c Yes No

If "Yes," enter the name of the foreign country ▶

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here ▶

and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 92 N/A

Part VII Analysis of Income-Producing Activities (See the instructions.)

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 PROGRAM TUITION					344,815.
b SPECIAL PROGRAMS					69,005.
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					52,805.
95 Interest on savings and temporary cash investments			14	1,288.	
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					
101 Net income or (loss) from special events			01	101,872.	
102 Gross profit or (loss) from sales of inventory					198,598.
103 Other revenue a					
b OTHER REVENUE			01	6,131.	
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))				109,291.	665,223.
105 Total (add line 104, columns (B), (D), and (E))					774,514.

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

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

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)
17	STMT 17

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(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 the instructions.)

(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).

Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13).

106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity	Yes	No
		X

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	-----			
b	-----			
c	-----			
Totals				

107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity	Yes	No
		X

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	-----			
b	-----			
c	-----			
Totals				

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?	Yes	No
		X

Please Sign Here

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

Signature of officer *Robert E Lewis* Date 12908 2007
 Type or print name and title Robert E Lewis Finance Manager

Paid Preparer's Use Only

Preparer's signature *[Signature]* Date 10-24-07 Check if self-employed Preparer's SSN or PTIN (See Gen Inst X) P00736240
 Firm's name (or yours if self-employed), address, and ZIP + 4 RUBINBROWN LLP EIN 43-0765316
ONE NORTH BRENTWOOD Phone no 314-290-3300
SAINT LOUIS, MO 63105

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

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

OMB No 1545-0047

2006

Department of the Treasury
Internal Revenue Service

Supplementary Information - (See separate instructions.)
▶ **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 2 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
SEE STATEMENT 18				
Total number of other employees paid over \$50,000 . . . ▶		NONE		

Part II-A 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

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

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

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 a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities \$ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B).

1 X

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

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?

2a X

b Lending of money or other extension of credit?

2b X

c Furnishing of goods, services, or facilities?

2c X

d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? STMT 19

2d X

e Transfer of any part of its income or assets?

2e X

3a Did the organization make grants for scholarships, fellowships, student loans, etc? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments) STMT 20

3a X

b Did the organization have a section 403(b) annuity plan for its employees?

3b X

c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement

3c X

d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?

3d X

4a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g If "No," complete lines 4f and 4g

4a X

b Did the organization make any taxable distributions under section 4966?

4b X

c Did the organization make a distribution to a donor, donor advisor, or related person?

4c X

d Enter the total number of donor advised funds owned at the end of the tax year

e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year

f Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the rights to provide advice on the distribution or investment of amounts in such funds or accounts

NONE

g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year

NONE

Part IV Reason for Non-Private Foundation Status (See pages 4 through 7 of the instructions.)

I certify that 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 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 otherwise meets the requirements of section 509(a)(3) Check the box that describes the type of supporting organization
 - Type I
 - Type II
 - Type III - Functionally Integrated
 - Type III - Other

Provide the following information about the supported organizations. (See page 7 of the instructions)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
Total					▶

- 14 An organization organized and operated to test for public safety Section 509(a)(4) (See page 7 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) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants See line 28)	202,315.	505,324.	157,417.	313,407.	1,178,463.
16 Membership fees received	50,150.	65,111.	45,940.	55,766.	216,967.
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	840,949.	491,383.	532,230.	567,171.	2,431,733.
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	3,722.	1,697.	1,123.	2,423.	8,965.
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	STMT 21 98,629.	62,698.	73,557.	43,851.	278,735.
23 Total of lines 15 through 22	1,195,765.	1,126,213.	810,267.	982,618.	4,114,863.
24 Line 23 minus line 17.	354,816.	634,830.	278,037.	415,447.	1,683,130.
25 Enter 1% of line 23.	11,958.	11,262.	8,103.	9,826.	
26 Organizations described on lines 10 or 11.	a Enter 2% of amount in column (e), line 24				26a 33,663.
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 2002 through 2005 exceeded the amount shown in line 26a Do not file this list with your return Enter the total of all these excess amounts					26b 222,280.
c Total support for section 509(a)(1) test Enter line 24, column (e)					26c 1,683,130.
d Add Amounts from column (e) for lines 18 8,965. 19 22 278,735. 26b 222,280.					26d 509,980.
e Public support (line 26c minus line 26d total)					26e 1,173,150.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 69.7005 %
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	NOT APPLICABLE				
(2005) _____ (2004) _____ (2003) _____ (2002) _____					
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 11b, 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	(2005) _____ (2004) _____ (2003) _____ (2002) _____				
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 from 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 2002 through 2005, 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 9 of the instructions.) **NOT APPLICABLE**
 (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?	32d	
If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement) ----- -----		
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?	33h	
If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement) ----- -----		
34 a 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 10 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 - If the amount on line 40 is - The lobbying nontaxable amount is -		
	Not over \$500,000 20% of the amount on line 40	41	
	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 13 of the instructions)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(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 13 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			
b Paid staff or management (Include compensation in expenses reported on lines c through h)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
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

FORM 990, PART I - SPECIAL FUNDRAISING EVENTS AND ACTIVITIES

DESCRIPTION	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
STUDENT POTTERY SALE	18,880.		18,880.
GALA	146,223.	63,485.	82,738.
OTHER SPECIAL EVENTS	340.	86.	254.
TOTALS	165,443.	63,571.	101,872.

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

DESCRIPTION	AMOUNT
INVENTORY SALES	455,435.
TOTAL	455,435.

FORM 990, PART I - COST OF GOODS SOLD

DESCRIPTION	BEGINNING INVENTORY	PURCHASES	SALARIES AND WAGES	OTHER COSTS	MINUS: ENDING INVENTORY	COST OF GOODS SOLD
INVENTORY SALES	81,179.			258,190.	82,532.	256,837.
TOTALS	81,179.			258,190.	82,532.	256,837.

FORM 990, PART II, LINE 25A - CURRENT OFFICER COMPENSATION SCHEDULE
=====

CURRENT OFFICER NAME -----	PROGRAM SERVICES -----	MANAGEMENT AND GENERAL -----	FUNDRAISING -----
EILEEN KISTNER MCMCLOUGHLIN COMPENSATION:	14,000.	21,000.	35,000.
LUANNE RIMEL COMPENSATION:	53,500.		
TOTALS	67,500.	21,000.	35,000.

FORM 990, PART II - OTHER EXPENSES

DESCRIPTION	TOTAL	PROGRAM SERVICES	MANAGEMENT AND GENERAL	FUNDRAISING
ADVERTISING	23,473.	18,603.	84.	4,786.
CLASS SUPPLIES	28,541.	28,541.		
MISCELLANEOUS	12,955.	7,190.	2,593.	3,172.
UTILITIES	29,180.	23,998.	4,195.	987.
SPECIAL PROGRAMS & SHOWS	17,871.	17,871.		
INSURANCE	16,842.	12,102.	4,284.	456.
CURATOR	14,136.	14,136.		
REPAIRS AND MAINTENANCE	17,043.	15,678.	1,315.	50.
PROFESSIONAL SERVICES	44,256.	22,469.	14,572.	7,215.
PROCESSING FEES	22,995.	22,020.		975.
SCHOLARSHIP EXPENSE	18,176.	18,176.		
TOTALS	245,468.	200,784.	27,043.	17,641.

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 III - OTHER PROGRAM SERVICES (LINE E)

DESCRIPTION	GRANTS AND ALLOCATIONS	EXPENSES
GRAND CENTER		8,149.
TOTALS		8,149.

FORM 990, PART IV - PREPAID EXPENSES AND DEFERRED CHARGES

=====

DESCRIPTION	ENDING BOOK VALUE
-----	-----
PREPAIDS	27,094.
TOTALS	----- 27,094. =====

FORM 990, PART IV - MORTGAGES AND OTHER NOTES PAYABLE
=====

LENDER: ENTERPRISE BANK
 ORIGINAL AMOUNT: 275,000.
 INTEREST RATE: 5.900000
 DATE OF NOTE: 01/09/2004
 MATURITY DATE: 01/09/2007
 REPAYMENT TERMS: MONTHLY PAYMENTS OF \$1,967
 SECURITY PROVIDED: DEED OF TRUST ON REAL ESTATE AND ALL OTHER ASSETS
 PURPOSE OF LOAN: OPERATIONS

BEGINNING BALANCE DUE 257,558.
 ENDING BALANCE DUE 249,125.

LENDER: ENTERPRISE BANK
 ORIGINAL AMOUNT: 100,000.
 INTEREST RATE: 4.500000
 DATE OF NOTE: 01/09/2004
 MATURITY DATE: 10/08/2005
 REPAYMENT TERMS: MONTHLY PAYMENTS EQUAL TO THE INTEREST ACCRUED
 SECURITY PROVIDED: DEED OF TRUST ON REAL ESTATE
 PURPOSE OF LOAN: OPERATIONS

BEGINNING BALANCE DUE 70,049.
 ENDING BALANCE DUE 10,840.

LENDER: ENTERPRISE BANK
 ORIGINAL AMOUNT: 120,000.
 INTEREST RATE: 4.500000
 DATE OF NOTE: 01/09/2004
 MATURITY DATE: 10/08/2005
 REPAYMENT TERMS: MONTHLY PAYMENTS EQUAL TO THE INTEREST ACCRUED
 SECURITY PROVIDED: DEED OF TRUST ON REAL ESTATE
 PURPOSE OF LOAN: INVENTORY

BEGINNING BALANCE DUE 80,026.
 ENDING BALANCE DUE 80,058.

TOTAL BEGINNING MORTGAGES AND OTHER NOTES PAYABLE 407,633.
 =====

TOTAL ENDING MORTGAGES AND OTHER NOTES PAYABLE 340,023.
 =====

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	256,837.
DIRECT FUNDRAISING EXPENSES INCLUDED IN EXPENSES ON FINANCIAL STATEMENTS BUT NETTED AGAINST SPECIAL EVENT REVENUE ON FORM 990	63,571.
TOTAL	----- 320,408. =====

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	256,837.
DIRECT FUNDRAISING EXPENSES INCLUDED IN EXPENSES ON FINANCIAL STATEMENTS BUT NETTED AGAINST SPECIAL EVENT REVENUE ON FORM 990	63,571.
TOTAL	----- 320,408. =====

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
EILEEN KISTNER MCLOUGHLIN 6640 DELMAR BLVD. ST. LOUIS, MO 63130	EXECUTIVE DIRECTOR 40.00	70,000.	NONE	NONE
MICHAEL WEISBROD 6640 DELMAR BLVD. ST. LOUIS, MO 63130	BOARD MEMBER 0.50	NONE	NONE	NONE
HELEN SEEHERMAN 6640 DELMAR BLVD. ST. LOUIS, MO 63130	EXHIBITIONS CHAIR 0.50	NONE	NONE	NONE
LYNNE ANDERSON 6640 DELMAR BLVD. ST. LOUIS, MO 63130	BOARD MEMBER 0.50	NONE	NONE	NONE
LINDA HALL 6640 DELMAR BLVD. ST. LOUIS, MO 63130	BOARD MEMBER 0.50	NONE	NONE	NONE
NOEL LEICHT 6640 DELMAR BLVD. ST. LOUIS, MO 63130	COMMUNICATIONS CHAIR 0.50	NONE	NONE	NONE
KEVIN CHAPMAN	BOARD MEMBER 0.50	NONE	NONE	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
6640 DELMAR BLVD. ST. LOUIS, MO 63130				
SHEILA BURKETT 6640 DELMAR BLVD. ST. LOUIS, MO 63130	TECHNOLOGY CHAIR 0.50	NONE	NONE	NONE
PATRICIA RICH 6640 DELMAR BLVD. ST. LOUIS, MO 63130	DEVELOPMENT CHAIR 0.50	NONE	NONE	NONE
HERBERT SMITH 6640 DELMAR BLVD. ST. LOUIS, MO 63130	FACILITIES CHAIR 0.50	NONE	NONE	NONE
JOSEF GLYNIAS 6640 DELMAR BLVD. ST. LOUIS, MO 63130	BOARD MEMBER 0.50	NONE	NONE	NONE
JEANNE WOLFSON 6640 DELMAR BLVD. ST. LOUIS, MO 63130	BOARD MEMBER 0.50	NONE	NONE	NONE
MARVIN J. SCHNEIDER 6640 DELMAR BLVD. ST. LOUIS, MO 63130	BOARD MEMBER 0.50	NONE	NONE	NONE

CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS

EXPENSE ACCT AND OTHER ALLOWANCES

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS
EXPENSE ACCT AND OTHER ALLOWANCES

COMPENSATION

TITLE AND TIME DEVOTED TO POSITION

NAME AND ADDRESS

NONE

NONE

NONE

PROGRAMMING CHAIR
0.50

ELAINE DILLER
6640 DELMAR BLVD.
ST. LOUIS, MO 63130

NONE

NONE

NONE

BOARD MEMBER
0.50

MARY P. HEGER
6640 DELMAR BLVD.
ST. LOUIS, MO 63130

NONE

NONE

NONE

SECRETARY
0.50

CARLIN SCANLAN
6640 DELMAR BLVD.
ST. LOUIS, MO 63130

NONE

NONE

NONE

TREASURER
0.50

LEE RODGERS
6640 DELMAR BLVD.
ST. LOUIS, MO 63130

NONE

NONE

NONE

BOARD MEMBER
0.50

JULIUS HUNTER
6640 DELMAR BLVD.
ST. LOUIS, MO 63130

NONE

NONE

NONE

CHAIRMAN
0.50

SARAH SMITH
6640 DELMAR BLVD.
ST. LOUIS, MO 63130

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
DAVID OTT 6640 DELMAR BLVD. ST. LOUIS, MO 63130	BOARD MEMBER 0.50	NONE	NONE	NONE
MELANIE DILEO 6640 DELMAR BLVD. ST. LOUIS, MO 63130	BOARD MEMBER 0.50	NONE	NONE	NONE
ANN LIPTON 6640 DELMAR BLVD. ST. LOUIS, MO 63130	BOARD MEMBER 0.50	NONE	NONE	NONE
MARYANN SRENCO 6640 DELMAR BLVD. ST. LOUIS, MO 63130	BOARD MEMBER 0.50	NONE	NONE	NONE
KIKU OBATA 6640 DELMAR BLVD. ST. LOUIS, MO 63130	BOARD MEMBER 0.50	NONE	NONE	NONE
KIMBERLY MACLEAN 6640 DELMAR BLVD. ST. LOUIS, MO 63130	BOARD MEMBER 0.50	NONE	NONE	NONE
CAL NICOLSON	BOARD MEMBER 0.50	NONE	NONE	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
6640 DELMAR BLVD. ST. LOUIS, MO 63130				
LUANNE RIMEL 6640 DELMAR BLVD. ST. LOUIS, MO 63130	EDUCATION DIRECTOR 0.50	53,500.	NONE	NONE
GRAND TOTALS		123,500.	NONE	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 WHICH IS RELATED TO THE MISSION OF THE CRAFT ALLIANCE

SCHEDULE A, PART I - COMPENSATION OF THE FIVE HIGHEST PAID EMPLOYEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCOUNT
LUANNE RIMEL 6640 DELMAR BLVD ST. LOUIS, MO 63130	EDUCATION DIRECTOR 40.00	53,500.	NONE	NONE
	TOTAL COMPENSATION	53,500.	NONE	NONE

SCHEDULE A, PART III - EXPLANATION FOR LINE 2D

=====

SEE FORM 990, PART V.

SCHEDULE A, PART III - EXPLANATION FOR LINE 3A

=====

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

SCHEDULE A, PART IV-A - OTHER INCOME

DESCRIPTION	2005	2004	2003	2002	TOTAL
FUNDRAISING INCOME	90,117.	62,698.	73,557.	43,851.	270,223.
OTHER REVENUS	8,512.				8,512.
TOTALS	98,629.	62,698.	73,557.	43,851.	278,735.

FEDERAL FOOTNOTES

FORM 990 PART IV, 57B

LAND	35,462
BUILDINGS AND IMPROVEMENTS	748,678
EQUIPMENT	281,640
CONSTRUCTION IN PROCESS	16,326
FURNITURE & FIXTURES	9,118

SUBTOTAL	1,091,224
LESS: ACCUM DEPRECIATION	(769,586)

TOTAL	321,638
	=====

FEDERAL FOOTNOTES

FORM 990, PART II, LINE 42

EQUIPMENT - 5 & 10 YR SL, VAR. ACQ. DATES	18,420
BUILDING AND IMPROVEMENTS - VAR. LIVES, SL, VAR. ACQ. DATES	50,463
	<u>68,883</u>