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Form 990

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No. 1545-0047

2007

Open to Public Inspection

A For the 2007 calendar year, or tax year beginning 10/01/07, and ending 9/30/08

B Check if applicable

Address change

Name change

Initial return

Termination

Amended return

Application pending

Please use IRS label or print or type. See Specific Instructions

C Name of organization

POLK ARTS ALLIANCE, INC.

Number and street (or P O box if mail is not delivered to street address)

P.O. BOX 727

D Employer identification number
30-0264417E Telephone number
863-804-0494F Accounting method. Cash
 Accrual Other (specify)

City or town, state or country, and ZIP + 4

BARTOW FL 33831

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

G Website: WWW.POLKARTSALLIANCE.ORG

J Organization type

(check only one) ► 501(c) (3) ◀ (insert no) 4947(a)(1) or 527K 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

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ► 134,127

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

I Group Exemption Number ►

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

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

1 Contributions, gifts, grants, and similar amounts received	1a		
a Contributions to donor advised funds	1b	37,567	
b Direct public support (not included on line 1a)	1c		
c Indirect public support (not included on line 1a)	1d	54,800	
e Total (add lines 1a through 1d) (cash \$ 92,367 noncash \$)	1e	92,367	
2 Program service revenue including government fees and contracts (from Part VII, line 93)	2		
3 Membership dues and assessments	3	7,993	
4 Interest on savings and temporary cash investments	4		
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			
7 Other investment income (describe ►)	7		
8a Gross amount from sales of assets other than inventory	(A) Securities	(B) Other	
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"/>	SEE WORKSHEET		
a Gross revenue (not including \$ 23,950 of contributions reported on line 1b)	9a	3,835	
b Less direct expenses other than fundraising expenses	9b	13,495	
c Net income or (loss) from special events Subtract line 9b from line 9a	9c	-9,660	
10a Gross sales of inventory, less returns and allowances	10a		
b Less cost of goods sold	10b		
c Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a			
11 Other revenue (from Part VII, line 103)			
12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11			
13 Program services (from line 44, column (B))	11	29,932	
14 Management and general (from line 44, column (C))	12	120,632	
15 Fundraising (from line 44, column (D))	13	65,070	
16 Payments to affiliates (attach schedule)	14	38,401	
17 Total expenses. Add lines 16 and 44, column (A)	15		
18 Excess or (deficit) for the year Subtract line 17 from line 12	16		
19 Net assets or fund balances at beginning of year (from line 73, column (A))	17	103,471	
20 Other changes in net assets or fund balances (attach explanation)	18	17,161	
21 Net assets or fund balances at end of year Combine lines 18, 19, and 20	19	4,054	
	20		
	21	21,215	

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions
DAA

Form 990 (2007)

EPT 10/12

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 \$ _____ non-cash \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	22a			
22b Other grants and allocations (attach schedule) (cash \$ _____ non-cash \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	22b			
23 Specific assistance to individuals (attach schedule)	23			
24 Benefits paid to or for members (attach schedule)	24			
25a Compensation of current officers, directors, key employees, etc. listed in Part V-A SEE STATEMENT 2	25a	39,080	19,540	19,540
b Compensation of former officers, directors, key employees, etc. listed in Part V-B	25b			
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)	25c			
26 Salaries and wages of employees not included on lines 25a, b, and c	26			
27 Pension plan contributions not included on lines 25a, b, and c	27			
28 Employee benefits not included on lines 25a – 27	28			
29 Payroll taxes	29	6,601	3,301	3,300
30 Professional fundraising fees	30			
31 Accounting fees	31			
32 Legal fees	32			
33 Supplies	33	2,347		2,347
34 Telephone	34	3,293	1,647	1,646
35 Postage and shipping	35	1,333	667	666
36 Occupancy	36	103		103
37 Equipment rental and maintenance	37			
38 Printing and publications	38	78	78	
39 Travel	39	3,506		3,506
40 Conferences, conventions, and meetings	40	1,550		1,550
41 Interest	41			
42 Depreciation, depletion, etc. (attach schedule)	42			
43 Other expenses not covered above (itemize).	43a	45,580	39,837	5,743
a SEE STATEMENT 3	43b			
b	43c			
c	43d			
d	43e			
e	43f			
f	43g			
44 Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	103,471	65,070	38,401
				0

 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 4**

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 COMMUNITY ARTS RECOGNITION PROGRAM - RECOGNIZES THE ACHIEVEMENTS OF FINE ARTS EDUCATORS IN POLK COUNTY; ARTS MAGAZINE - DELIVERS INFORMATION ABOUT CULTURAL EVENTS AVAILABLE FOR ALL OF POLK COUNTY AND THE SURROUNDING AREAS.

(Grants and allocations \$) If this amount includes foreign grants, check here ► 65,070

b

(Grants and allocations \$) If this amount includes foreign grants, check here ►

c

(Grants and allocations \$) If this amount includes foreign grants, check here ►

d

(Grants and allocations \$) If this amount includes foreign grants, check here ►

e Other program services (attach schedule)

(Grants and allocations \$) If this amount includes foreign grants, check here ►

f **Total of Program Service Expenses** (should equal line 44, column (B), Program services) ► 65,070

Form 990 (2007)

Part IV Balance Sheets (See the instructions.)

		(A) Beginning of year		(B) End of year
	Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only			
	45 Cash—non-interest-bearing	7,855	45	21,215
	46 Savings and temporary cash investments		46	
	47a Accounts receivable	47a		
	b Less: allowance for doubtful accounts	47b		47c
	48a Pledges receivable	48a		
	b Less: allowance for doubtful accounts	48b		48c
	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			52
	53 Prepaid expenses and deferred charges			53
	54a Investments—publicly-traded securities	► <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54a
	b Investments—other securities (attach schedule)	► <input type="checkbox"/> Cost <input type="checkbox"/> FMV		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		
	b Less accumulated depreciation (attach schedule)	57b		57c
	58 Other assets, including program-related investments (describe ►)			58
	59 Total assets (must equal line 74) Add lines 45 through 58	7,855	59	21,215
	60 Accounts payable and accrued expenses	3,801	60	
	61 Grants payable			61
	62 Deferred revenue			62
	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)			64b
	65 Other liabilities (describe ►)			65
	66 Total liabilities . Add lines 60 through 65	3,801	66	0
	Organizations that follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74			
	67 Unrestricted	4,054	67	21,215
	68 Temporarily restricted		68	
	69 Permanently restricted		69	
	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)	4,054	73	21,215
	74 Total liabilities and net assets/fund balances . Add lines 66 and 73	7,855	74	21,215

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.) **N/A**

- a** Total revenue, gains, and other support per audited financial statements
- b** Amounts included on line **a** but not on Part I, line 12
 - 1** Net unrealized gains on investments
 - 2** Donated services and use of facilities
 - 3** Recoveries of prior year grants
 - 4** Other (specify)

Add lines **b1** through **b4**

- c Subtract line b from line a
- d Amounts included on Part I, line 12, but not on line a:
 - 1 Investment expenses not included on Part I, line 6b
 - 2 Other (specify)

Add lines d_1 and d_2

e Total revenue (Part I, line 12) Add lines c and d

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return N/A

- a** Total expenses and losses per audited financial statements
- b** Amounts included on line a but not Part I, line 17
 - 1** Donated services and use of facilities
 - 2** Prior year adjustments reported on Part I, line 20
 - 3** Losses reported on Part I, line 20
 - 4** Other (specify)

Add lines b1 through b4

- c Subtract line b from line a
- d Amounts included on Part I, line 17, but not on line a:
 - 1 Investment expenses not included on Part I, line 6b
 - 2 Other (specify)

Add lines d_1 and d_2

e **Total expenses** (Part I, line 17) Add lines c and d

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
SEE STATEMENT 5				

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

Yes No

75a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings ► 17

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?

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.)

Part VI Other Information (See the instructions.)

Yes No

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 ►

81a Enter direct and indirect political expenditures (See line 81 instructions)

b Did the organization file **Form 1120-POL** for this year?

and check whether it is exempt nonexempt

and check whether it is exempt or nonexempt

81a Enter direct and indirect political expenditures (See line 81 instructions) 81a **0**
b Did the organization file Form 1120-POL for this year? 81b **X**

Part VI Other Information (continued)

		Yes	No
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	<input checked="" type="checkbox"/>
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	<input checked="" type="checkbox"/>
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	N/A	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	<input checked="" type="checkbox"/>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	N/A	
85a	501(c)(4), (5), or (6) Were substantially all dues nondeductible by members?	85a	<input checked="" type="checkbox"/>
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	N/A	
c	Dues, assessments, and similar amounts from members	85c	
d	Section 162(e) lobbying and political expenditures	85d	
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	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?	N/A	
86	501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12	86a	
b	Gross receipts, included on line 12, for public use of club facilities	86b	
87	501(c)(12) orgs Enter a Gross income from members or shareholders	87a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87b	
88a	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	<input checked="" type="checkbox"/>
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	<input checked="" type="checkbox"/>
89a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 ► 0 , section 4912 ► 0 , section 4955 ► 0	89a	
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	<input checked="" type="checkbox"/>
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	89c	0
d	Enter Amount of tax on line 89c, above, reimbursed by the organization	89d	0
e	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e	<input checked="" type="checkbox"/>
f	All organizations Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f	<input checked="" type="checkbox"/>
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	<input checked="" type="checkbox"/>
90a	List the states with which a copy of this return is filed ► NONE	90b	1
b	Number of employees employed in the pay period that includes March 12, 2007 (See instructions)		
91a	The books are in care of ► MISCHELLE ANDERSON 1350 E. MAIN STREET Located at ► BARTOW, FL	Telephone no	► 863-804-0494
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)? 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	ZIP + 4	► 33830
91b		Yes	No

Part VI Other Information (continued)

c At any time during the calendar year, did the organization maintain an office outside of the United States? Yes No
If "Yes," enter the name of the foreign country ►

91c

X

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

□

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

Note: Enter gross amounts unless otherwise indicated

93 Program service revenue

- a _____
- b _____
- c _____
- d _____
- e _____

	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				
b				
c				
d				
e				
f Medicare/Medicaid payments				
g Fees and contracts from government agencies				
94 Membership dues and assessments				7,993
95 Interest on savings and temporary cash investments				
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			1	-9,660
102 Gross profit or (loss) from sales of inventory				
103 Other revenue a				
b MISCELLANEOUS REVENUES			1	822
c ADVERTISING REVENUES				
d				
e				
104 Subtotal (add columns (B), (D), and (E))	0	-8,838		37,103
105 Total (add line 104, columns (B), (D), and (E))				► 28,265

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)
	SEE STATEMENT 6

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
N/A	%			
	%			
	%			
	%			

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)

<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No

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 ID Number	(C) Description of transfer	(D) Amount of transfer
a			
b			
c			
Totals			

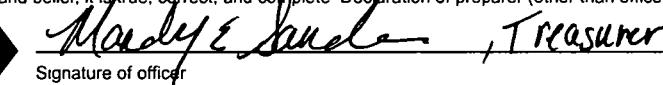
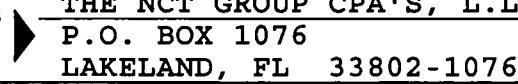
107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity

Yes	No
	X

(A) Name, address, of each controlled entity	(B) Employer ID 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

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			
	 MANDY SANDERS		Date <u>9/15/10</u>	Preparer's SSN or PTIN (See Gen Instr X) <u>P00735552</u>
Paid Preparer's Use Only	Preparer's signature 	Date <u>9/15/10</u>	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN (See Gen Instr X) <u>P00735552</u>
	Firm's name (or yours if self-employed), address, and ZIP + 4  <u>THE NCT GROUP CPA'S, L.L.P.</u> <u>P.O. BOX 1076</u> <u>LAKELAND, FL 33802-1076</u>	EIN <u>59-1500378</u>	Phone no <u>863-683-6783</u>	

SCHEDULE A
(Form 990 or 990-EZ)

 Department of the Treasury
 Internal Revenue Service

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

2007
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

POLK ARTS ALLIANCE, INC.
 Employer identification number
30-0264417
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 empl benefit plans & deferred comp	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$50,000	►			

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	►	

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	►	

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

Schedule A (Form 990 or 990-EZ) 2007

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)?

SEE PART V-A, FORM 990

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)

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

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

4c

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 right to provide advice on the distribution or investment of amounts in such funds or accounts

► _____ 0

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

► _____ 0

Part IV Reason for Non-Private Foundation Status (See pages 4 through 8 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)

11a 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)

11b 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 otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization.

Type I

Type 1

Type III-Functionally Integrated

Type III-Other

Provide the following information about the supported organizations. (See page 8 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
Total				►

14 An organization organized and operated to test for public safety Section 509(a)(4) (See page 8 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) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	81,555	73,172	19,501		174,228
16 Membership fees received	2,805	3,070	1,495		7,370
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					0
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975					0
19 Net income from unrelated business activities not included in line 18					0
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					0
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					0
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets STMT 7	15,073	1,942	11,725		28,740
23 Total of lines 15 through 22	99,433	78,184	32,721		210,338
24 Line 23 minus line 17	99,433	78,184	32,721		210,338
25 Enter 1% of line 23	994	782	327		
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24				► 26a	4,207
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 2003 through 2006 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts				► 26b	
c Total support for section 509(a)(1) test. Enter line 24, column (e)				► 26c	210,338
d Add Amounts from column (e) for lines 18 _____ 19 _____ 22 28,740 26b _____				► 26d	28,740
e Public support (line 26c minus line 26d total)				► 26e	181,598
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))				► 26f	86.3363%
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					N/A
(2006) (2005) (2004) (2003)					
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					N/A
(2006) (2005) (2004) (2003)					
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 2003 through 2006, 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.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		N/A	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)			
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?	34b		
	If you answered "Yes" to either 34a or b, please explain using an attached statement			
35	Does the organization certify that it has complied with the applicable requirements of sections 401 through 405 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 11 of the instructions.)
(To be completed ONLY by an eligible organization that filed Form 5768) **N/A**

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)			
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 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	
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.)

Calendar year (or fiscal year beginning in) ►	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(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

(For reporting only by organizations that did not complete Part VI-A) (See page 14 of the instructions.) **N/A**

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

- 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.

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 14 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a Transfers from the reporting organization to a noncharitable exempt organization of

- (i) Cash
- (ii) Other assets

- b Other transactions**
 - (i) Sales or exchanges of assets with a noncharitable exempt organization
 - (ii) Purchases of assets from a noncharitable exempt organization
 - (iii) Rental of facilities, equipment, or other assets
 - (iv) Reimbursement arrangements
 - (v) Loans or loan guarantees
 - (vi) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

	Yes	No
51a(i)	X	
a(ii)	X	
b(i)	X	
b(ii)	X	
b(iii)	X	
b(iv)	X	
b(v)	X	
b(vi)	X	
c	X	

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

► Yes No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Form 990		Special Events Schedule			2007
		For calendar year 2007, or tax year beginning		10/01/07	, and ending
				9/30/08	
Name			Employer Identification Number		
POLK ARTS ALLIANCE, INC.			30-0264417		
	(A)	(B)	(C)	Others	Total
Gross receipts	27,785	0	0	0	27,785
Less contributions	23,950	0	0	0	23,950
Gross revenue	3,835	0	0	0	3,835
Less direct expenses	13,495	0	0	0	13,495
Net income (loss)	-9,660	0	0	0	-9,660

L007776. Polk Arts Alliance, Inc.
30-0264417
FYE: 9/30/2008

Federal Statements

Statement 3 - Form 990, Part II, Line 43 - Other Functional Expenses

Description	Total Expenses	Program Service	Mgt & General	Fund-Raising
EXPENSES	\$ 664	\$ 664	\$	\$
COMM ARTS RECOG PROGRAM	664	664		
GRANT & CONTRACT EXPENSES	504		504	
PROFESSIONAL FEES	210		210	
DUES & SUBSCRIPTIONS	1,021		1,021	
STAFF DEVELOPMENT	2,390		2,390	
WEB HOSTING	677		677	
ADVERTISING	445		445	
MISCELLANEOUS EXPENSES	426		426	
LICENSE	70		70	
ARTIFACTS MAGAZINE EXPENSES	39,173	39,173		
TOTAL	\$ 45,580	\$ 39,837	\$ 5,743	\$ 0

L007776. Polk Arts Alliance, Inc.
30-0264417
FYE: 9/30/2008

Federal Statements

Statement 4 - Form 990, Part III - Organization's Primary Exempt Purpose

Description

TO DEVELOP, COORDINATE AND PROMOTE ARTS ORGANIZATIONS AND INDIVIDUAL ARTISTS.

L007776 Polk Arts Alliance, Inc.
30-0264417
FYE: 9/30/2008

Federal Statements

Statement 5 - Form 990, Part V-A - List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
ANDERSON, MISCHELLE P.O. BOX 727 BARTOW FL 33831	EXEC DIR	40	39,080	0	0
BENTLEY, SUE 3 CASA LOMA WAY LAKELAND FL 33813	PAST PRES	VAR	0	0	0
CUNNINGHAM, LORI P.O. BOX 391 BARTOW FL 33831	DIRECTOR	VAR	0	0	0
DAVIES, JOAN P.O. BOX 9005 BARTOW FL 33831	DIRECTOR	VAR	0	0	0
ENGLISH, BOB P.O. BOX 9005 BARTOW FL 33831	EX-OFFICIO	VAR	0	0	0
HOLDEN, DR. EILEEN 999 AVENUE H, NE WINTER HAVEN FL 33881	DIRECTOR	VAR	0	0	0
HOYT, NANCY P.O. BOX 832 LAKE WALES FL 33859-0832	DIRECTOR	VAR	0	0	0
KENDRICK, JARVIS 1090 WEDGEWOOD ESTATES BLVD. LAKELAND FL 33809	TREASURER	VAR	0	0	0
LAPAN, MIKE 701 W. LIME STREET LAKELAND FL 33815	DIRECTOR	VAR	0	0	0

Federal Statements

Statement 5 - Form 990, Part V-A - List of Officers, Directors, Trustees, and Key Employees (continued)

Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
	DIRECTOR	VAR		0	0
MAYHALL, LEE 111 LAKE HOLLINGSWORTH DRIVE LAKELAND FL 33801	EX-OFFICIO	VAR	0	0	0
MCKINZIE, DR. GAIL 2641 VERANDAH VUE DRIVE LAKELAND FL 33813	PRESIDENT	VAR	0	0	0
PATTON, JANE P.O. BOX 986 HAINES CITY FL 33845-0986	DIRECTOR	VAR	0	0	0
PFIEFFER, TRISH 800 W. MAIN STREET BARTOW FL 33830	VICE PRES	VAR	0	0	0
ROSS, CINDY 607 LAKE MIRIAM DRIVE LAKELAND FL 33813-2150	PAST PRES	VAR	0	0	0
STATOM, DR. GABRIEL 1006 CAMPBELL AVENUE LAKE WALES FL 33853	DIRECTOR	VAR	0	0	0
STETSON, DANIEL 800 E. PALMETTO STREET LAKELAND FL 33801	DIRECTOR	VAR	0	0	0
TANNER, DEANNA RHODES 6 BROGDEN COURT WINTER HAVEN FL 33880	DIRECTOR	VAR	0	0	0
WILSON, KERRY P.O. DRAWER 7608 WINTER HAVEN FL 33883	DIRECTOR	VAR	0	0	0

L007776. Polk Arts Alliance, Inc.
30-0264417
FYE: 9/30/2008

Federal Statements

Statement 6 - Form 990, Part VIII - Relationship of Activities

Line No.	Description
94	DUES COLLECTED TO DEVELOP, COORDINATE AND PROMOTE ARTS ORGANIZATIONS AND INDIVIDUAL ARTISTS.
103C	ADVERTISING REVENUE FROM ARTS ORGANIZATIONS TO PROMOTE VARIOUS ARTISTIC EVENTS. SINCE THE ADVERTISING IS SUBSTANTIALLY RELATED TO THE EXEMPT PURPOSE OF THIS ORGANIZATION IT IS NOT UNRELATED BUSINESS INCOME.

L007776. Polk Arts Alliance, Inc.
30-0264417
FYE: 9/30/2008

Federal Statements

Statement 7 - Schedule A, Part IV-A, Line 22 - Other Income

Description	2006	2005	2004	2003
	\$ 15,073	\$ 1,942	\$ 11,725	\$ _____
TOTAL	<u>\$ 15,073</u>	<u>\$ 1,942</u>	<u>\$ 11,725</u>	<u>\$ 0</u>

L007776 Polk Arts Alliance, Inc.
30-0264417
FYE: 9/30/2008

Federal Statements

Statement 2 - Form 990, Part II, Line 25a - Compensation of Current Officers

Name	Program Services	Management & General	Fundraising
EXPENSES	\$ 19,540	\$ 19,540	\$ 0
MISCHELLE ANDERSON COMPENSATION			
TOTAL	\$ 19,540	\$ 19,540	\$ 0

L007776. Polk Arts Alliance, Inc.
30-0264417
FYE: 9/30/2008

Federal Statements

Statement 1 - Form 990, Part I, Line 3 - Membership Dues and Assessments

Description	Amount
MEMBERSHIP DUES	\$ 7,993
TOTAL	\$ <u>7,993</u>