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DLN: 93493134055140

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

2008

Open to Public Inspection

A Fo	rthe 2	2008 ca	lendar yea	r, or tax year beginni	ng 07-01-2008	and ending 06-30-2	2009		D Employer is	lentification number					
		plicable	Please	C Name of organization FUND FOR THE ARTS I	NC										
_	Address change use IRS label or Doing Business As								61-04796 E Telephone r						
_	ne chan	_	print or type. See						(502) 582						
_	ıal retur		Specific Instruc-	Number and street (or 623 West Main Street	PO box if mail is	not delivered to street a	ddress) R	oom/suite		ots \$ 9,928,956					
Ter	mınatıoı	n	tions.												
☐ Am	ended r	eturn		City or town, state or of Louisville, KY 40202	country, and ZIP +	4									
M App	lication	pending													
				ne and address of Pri	ncıpal Officer		H(a		s a group retur	n for					
			Allan C 623 We	est Main Street				affilia	tes?	⊤Yes ▼ No					
				lle, KY 40202	· •	_	— н(і	b) Are al	l affiliates includ	ded?					
I Ta	x-exem	pt status	 ✓ 501(c)) (3) - ((insert no)	4947(a)(1) or	527				t See instructions)					
J W	eb site	e: 🕨 www	w fundforthe	earts com			H(e	c) Grou	p Exemption N	umber ►					
К Тур	e of org	anızatıon	Corporat	ion trust association	n		L	Year of Fo	rmation 1949	1 State of legal domicile KY					
Pa	rt I	Sumi	marv												
				e organization's miss	ıon or most sıg	nıfıcant actıvıtıes									
9				_		_		-							
ĕ		Vision Statement Together thorugh the Arts we create a great American City We generate and facilitate support We lead innovation, inspire excellence and promote effective resource utilization. We build bridges and community connections													
Ē	2	Check this box T if the organization discontinued its operations or disposed of more than 25% of its assets													
Governance			,	nembers of the gover						62					
26			_	ident voting members						60					
Activities				nployees (Part V, line	_		,			16					
₩.	6	Total nu	umber of vo	lunteers (estimate if	necessary) .				6	3,000					
¥	7a Total gross unrelated business revenue from Part VIII, line 12, column (C) .)		7a	0					
	ь	Net unr	elated busi	ness taxable income	from Form 990	-T, line 34			7b	0					
								Pric	or Year	Current Year					
ē	8			d grants (Part VIII, lı	•		•		9,734,066	8,424,529					
nue.	9			ervice revenue (Part VIII, line 2g)					91,038	0					
Raven	10 11			art VIII, column			· -		4,416	48,875					
	12		al revenue—add lines 8 through 11 (must equal Part VIII, column (A), line						7,410	23,703					
		12)							9,829,520	8,503,189					
	13			ar amounts paid (Part					7,957,277	7,129,471					
	14			or for members (Part I			. ₋			0					
\$	15	10)	es, other co	ompensation, employe	ee benefits (Pai	rt IX, column (A), line	es 5-		991,405	970,071					
@	16a	Profes	sıonal fund	raising fees (Part IX,	column (A), lin	e 11e)			0	0					
Expenses	ь	(Total fo	undraising ex	penses, Part IX, column ([D), line 25 <u>949,636</u>)									
_	17	Other	expenses ((Part IX, column (A),	lınes 11a–11d	, 11f-24f)			803,542	780,089					
	18	Total	expenses—	add lines 13–17 (mu	st equal Part I	X, line 25, column (A	.))		9,752,224	8,879,631					
	19	Reven	ue less exp	penses Subtract line	18 from line 12	2			77,296	-376,442					
ର ଜୁନ		_						Beginni	ng of Year	End of Year					
esse Base	20		-	rt X, line 16)					9,897,422	9,166,339					
Net Assets or Fund Balances	21			Part X, line 26)					5,953,933	5,616,985					
	22			d balances Subtract	line 21 from lir	ne 20			3,943,489	3,549,354					
Pal	t II		ature Blo		e evamined this re	turn including accompan	vina schoo	lules and s	tatements and to	the best of my knowledge					
		and beli	ef, it is true, o	correct, and complete De	claration of prepare	er (other than officer) is t	based on a	all informat	ion of which prepa	arer has any knowledge					
Plea		N							-05-12						
Sign Here		Signa	ature of office	er				Date							
			Cowen Presi or print nam	ident and CEO ie and title											
	Ī	F	<u> </u>			Date	Check	ıf	Preparer's DTIM	(See Gen Inst)					
Paid		Preparer signature	re s				self-		r reparer 5 PTIN	(See Sell That)					
Prepa	arer's	Firm's no	ame (or yours	s k			empol	yeu 🗗 📗							
Use (- 1	ıf self-er	nployed),	`)					_ EIN ▶						
		address,	and ZIP + 4	•					Phone no 🕨						
Mav 1	he IRS	L S discus	ss this retu	rn with the preparer s	hown above? (9	See instructions) .				Yes No					

Part III Statement of Program Service Accomplishments (See the instructions.)

1 See A	Briefly describe the organization's mission dditional Data Table
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	If "Yes," describe these new services on Schedule O Did the organization cease conducting or make significant changes in how it conducts any program services?
4	If "Yes," describe these changes on Schedule O Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported
4a	(Code) (Expenses \$ 5,325,316 including grants of \$ 5,276,655) (Revenue \$ 0) The Fund for the Arts is one of the largest direct funders for each of 15 tax-exempt "member" arts organizations which together represent a significant portion of the arts experiences available in the Metro Louisville community. Awards are made through an annual "allocation process" which includes a review by an Allocation Committee including Board members and members of the "Next" group of young professionals and Fund staff. Information reviewed as part of the process includes a summary of each organization's accomplishments, challenges, operating plans and audited financial statements.
4b	(Code) (Expenses \$ 1,388,958 including grants of \$ 1,363,958) (Revenue \$ 0) The Fund for the Arts works closely with various community organizations and individuals to accept, award and monitor "partnership contributions" which are donor directed through the Fund to specific Fund for the Arts members as well as other community arts organizations. This program provides additional funding in support of the arts community.
4c	(Code) (Expenses \$ 319,460 including grants of \$ 295,465) (Revenue \$ 0) The Fund sponsors the Teachers Arts Grants program "TAG" which awards funding in the range of \$200 - \$1,000 to subsidize arts event tickets, bus transportation of in school residencies to facilitate arts opportunities for children in the community. Schools with a higher percentage of Title 1 students are given funding priority. Schools from a five-county region participated in this program.
	(Code) (Expenses \$ 650,970 including grants of \$ 193,393) (Revenue \$ 0) Other programs conducted and grants made include Arts Showcase, 60th Anniversary Celebration held in conjunction with Louisville Ballet and Kentucky Opera, support of ArtSpace, and miscellaneous community arts grants including Gheens Great Expectations Concert Series
4d	Other program services (Describe in Schedule O) (Expenses \$ 650,970 including grants of \$ 193,393) (Revenue \$ 0)
46	Total program service expenses \$ 7.684.704 Must equal Part IX Time 25. column (B)

Part IV	Checklist of	Required	Schedules
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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		No
5	Section $501(c)(4)$, $501(c)(5)$, and $501(c)(6)$ organizations. Is the organization subject to the section $6033(e)$ notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII .	12	Yes	
13	Is the organization a school as described in section $170(b)(1)(A)(II)$? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		No
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 on Part IX, column (A), line $2?$ If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25	24a		No
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section $501(c)(3)$ and $501(c)(4)$ organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I			No
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No

Part IV Checklist of Required Schedules (Continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part			
	<i>IV</i>	28a		No
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b	Yes	
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV.	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		No
36	501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		Νο
37	Did the organization conduct more than 5 percent of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Νο

Pa	rt V	Statements Regarding Other IRS Filings and Tax Complianc	е				
						Yes	No
1a	Enter	the number reported in Box 3 of Form 1096, Annual Summary and Transmittal					
		5. Information Returns . Enter -0- if not applicable					
			1a	13			
ь	Enter	the number of Forms W-2G included in line 1a Enter -0- if not applicable					
			1b	0			
c		he organization comply with backup withholding rules for reportable payments to	o ven	dors and reportable			
	_	ng (gambling) winnings to prize winners?			1c	Yes	
2a		the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax</i> the number of employees reported by this					
	returr		2a	16			
ь	Ifatl	ı least one ıs reported ın 2a, dıd the organızatıon file all required federal employm	nent t	ax returns?			
	Not e:	If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this	s retur	rn.	2b	Yes	
3а		he organization have unrelated business gross income of \$1,000 or more during	g the	year covered by this	_		
		n ²	• •		3a		No
		es," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Sch</i> e			3b		
4a		ly time during the calendar year, did the organization have an interest in, or a si a financial account in a foreign country (such as a bank account, securities acc					
		unt)?		, or other infalleral	4a		No
ь	Tf"∨o	es," enter the name of the foreign country					
		he instructions for exceptions and filing requirements for Form TD F 90-22.1, <i>Re</i>	port o	f Foreign Bank and			
	Financ	cial Accounts.	•	_			
5a	Was t	the organization a party to a prohibited tax shelter transaction at any time durir	ng the	tax year?	5a		No
ь	Dıd a	ny taxable party notify the organization that it was or is a party to a prohibited	tax sh	nelter transaction?	5b		Νο
_	If "Ye	es," to 5a or 5b, did the organization file Form 8886-T, <i>Disclo</i> s <i>ure by Tax-Exemp</i> a	t Entit	v Regarding Prohibited			
Ī		helter Transaction?	•	· · ·	5c		
6a	Did th	he organization solicit any contributions that were not tax deductible?			6a		No
ь	If "Ye	es," did the organization include with every solicitation an express statement th	at su	ch contributions or gifts			
	were	not tax deductible?			6b		
7	Organ	nizations that may receive deductible contributions under section 170(c).					
а		he organization provide goods or services in exchange for any quid pro quo conf	trıbutı	on of \$75 or	7a		No
		7		10		1	I
		es," did the organization notify the donor of the value of the goods or services pi			7b		
С		he organization sell, exchange, or otherwise dispose of tangible personal propei orm 8282?		-	7c		No
d		es," indicate the number of Forms 8282 filed during the year	7d				
_	11 10	is, marcute the number of forms of of med during the fed.	7.4				
е		he organization, during the year, receive any funds, directly or indirectly, to pay					
		fit contract?			7e		No
f	Did th	he organization, during the year, pay premiums, directly or indirectly, on a perso	onal b	enefit contract?	7f		No
g	For al	ll contributions of qualified intellectual property, did the organization file Form 8	3899	as required?	7g		No
h		ontributions of cars, boats, airplanes, and other vehicles, did the organization fi	ıle a F	orm 1098-C as	7h		N. a
	•	red?			/n		N o
8		on 501(c)(3) and other sponsoring organizations maintaining donor advised funds a orting organizations. Did the supporting organization, or a fund maintained by a s					
	exces	ss business holdings at any time during the		,	8		
		·					
9		on 501(c)(3) and other sponsoring organizations maintaining donor advised funds.					
а		he organization make any taxable distributions under section 4966?			9a		
Ь	Did th	he organization make a distribution to a donor, donor advisor, or related person	? .		9b		
10	Sectio	on 501(c)(7) organizations. Enter		1			
		tion fees and capital contributions included on Part VIII, line 12	10a				
b		s receipts, included on Form 990, Part VIII, line 12, for public use of club	10b				
	facılıt	ties					
11	Secti	on 501(c)(12) organizations Enter					
а	Gross	s income from members or shareholders					
			11a				
b		s income from other sources (Do not net amounts due or paid to other sources	441				
	agaın	st amounts due or received from them)..........[11b				
12a	Sectio	on 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in	lieu	of Form 1041?	12a		
b	If "Ye	es," enter the amount of tax-exempt interest received or accrued during the					
	year		12b	I			1

8

10

Section A. Governing Body and Management

No

Νo

Νo

Νo

Νo

Νo

Yes

Yes

Yes

3

4

5

6

7a

7Ь

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, describe the circumstance

	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below	, desc	ribe the circumstan	ces,
	processes, or changes in Schedule O. See instructions.			
а	Enter the number of voting members of the governing body	1a		6

b	Enter the number of voting members that are independent	1b		60
	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?			

Did the organization delegate control over management duties customarily performed by or under the direct
supervision of officers, directors or trustees, or key employees to a management company or other person?
Did the comment of th

Did the organization make any filed?	significant changes to i	ts organizational documents	since the prior Form 990 was

Did the organization become aware during the year of a	mat	eria	ıl dı	vers	sion	of t	he o	orga	nıza	atio	n's a	asse	ets?	•	
Does the organization have members or stockholders?					•										

												_	_			_			_	-		_	_	-	-	-	
Does the organiza	tior	n ha	ve	men	nbei	rs, s	toc	kho	ldei	s, c	or ot	her	per	son	s wh	o m	nay	elec	ton	e o	r m	ore	me	mbe	rs	of th	e
governing body?		•					•																•				

Ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? •	
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following	

e organization contemporaneously document the meetings	held or written actions undertaken during the	
y the following		
vorning hody?		

1	the governing body?			•										•		•						
)	each committee with	autl	horit	cy t	o ac	t or	n be	half	of t	he o	gove	ernii	ng b	ody	?							

9a	Does the organization have local chapters, branches, or affiliates?													
Ь	If "Yes," does the organization have written policies and procedures	go	vern	ıng	the	act	ıvıtı	es	ofsı	uch	cha	pte	rs,	

affiliates, and branches to ensure their operations are consistent with those of the organization?		
Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organization	atio	ns
must describe in Cabadula O the process if any the organization uses to review the Form 000		

	must describe in Schedule O the process, if any, the organization uses to review the Form 990
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached a
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O

8a	Yes	
8b	Yes	
9a		Νο
9b		
10	Yes	
11		No

Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13 \cdot .	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
а	The organization's CEO, Executive Director, or top management official?	15a	Yes	
b	Other officers or key employees of the organization?	15b	Yes	
	Describe the process in Schedule O			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Νο
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
		1 -00		I

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed KY
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply
- Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization

Monica Beckmann 623 West Main St Louisville, KY 40202 (502) 582-0122

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

Check this box if the organization did not compensate any officer, director, trustee or key employee

- * List all of the organization's **current** officers, directors, trustees (whether individuals or organizations) and key employees regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- * List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- * List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- * List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

The check this box in the organization and i	, 211	Posit	(C) chec	:k al				(E)	(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Chrector	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
							-			

Part VII Continued

				(tion that a			all			(E)		(F)	
	(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	am co org	Estima nount of ompens from t anizati relate rganiza	other ation he on and
											<u> </u>		
	Total							<u> </u>	416,968		0		89,241
2	Total number of individuals (includi		a) wno	recei	vea	moi	e thar	1 ֆ Т	UU.UUU IN reportabi	e			
	compensation from the organization	I F -2											
	compensation from the organization	I F -2										Ves	No.
3	Did the organization list any forme on line 1a? If "Yes," complete Sched	officer, direc						/ee,	or highest compens	ated employee	3	Yes	No No
3	Did the organization list any forme on line 1a? <i>If "Yes," complete Schede</i> For any individual listed online 1a, organization and related organization	officer, direcule J for such	<i>individi</i> reporta	<i>ial</i> . ble c	omp	ens	ation	vee, • and	or highest compens	n from the	3		No No
4	Did the organization list any forme i on line 1a? <i>If</i> " <i>Yes,"</i> complete Schede For any individual listed online 1a, organization and related organization	officer, directured in the such in the sum of the sum o	reporta nan \$15	<i>Jal</i> . ble c 50,00	omp 07.	ens If "Y	ation 'es," co	ee, • and omp	or highest compens other compensation lete Schedule J for su	n from the	3	Yes	
	Did the organization list any forme on line 1a? <i>If "Yes," complete Schede</i> For any individual listed online 1a, organization and related organization	officer, directively and officer of the sum	reportanan \$15	ble conso	omp 0?.	ens If "Y	ation 'es," co • •	ee, and omp	or highest compens other compensation lete Schedule J for su	n from the			
4 5	Did the organization list any forme on line 1a? If "Yes," complete Schede For any individual listed online 1a, organization and related organization individual	officer, directive of the sum of	reportanan \$15	ble conso	omp 0?.	ens If "Y	ation 'es," co • •	ee, and omp	or highest compens other compensation lete Schedule J for su	n from the	4		No
4 5	Did the organization list any former on line 1a? If "Yes," complete Schede For any individual listed online 1a, organization and related organization individual	officer, directle of the sum of t	reportanan \$15 in the composition of the compositi	ble c 0,00 ensa	omp 0? tion	ens If "Y fro	ation /es," co many erson	and unro	or highest compens other compensation lete Schedule J for su elated organization	from the	4		No
4 5	Did the organization list any former on line 1a? If "Yes," complete Scheduler For any individual listed online 1a, organization and related organization individual	officer, directle of the sum of t	reportanan \$15 ue comp Schedulo	ble c 0,00 ensa	omp 0? tion	ens If "Y fro	ation /es," co many erson	and unro	or highest compens other compensation lete Schedule J for su office organization sthat received more	from the	5		No
4 5	Did the organization list any former on line 1a? If "Yes," complete Scheduler For any individual listed online 1a, organization and related organization individual	officer, directly and the sum of	reportanan \$15 ue comp Schedulo	ble c 0,00 ensa	omp 0? tion	ens If "Y fro	ation /es," co many erson	and unro	or highest compens other compensation lete Schedule J for su office organization sthat received more	from the sch	5	Yes (C	No
4 5	Did the organization list any former on line 1a? If "Yes," complete Scheduler For any individual listed online 1a, organization and related organization individual	officer, directly and the sum of	reportanan \$15 ue comp Schedulo	ble c 0,00 ensa	omp 0? tion	ens If "Y fro	ation /es," co many erson	and unro	or highest compens other compensation lete Schedule J for su office organization sthat received more	from the sch	5	Yes (C	No

Part Statement of Revenue VIII

					(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
0 (0	1a	Federated cam	paigns 1a	0				311
2 1 2 1	Id		-					
<u>₹</u> 7	Ь	Membership du	ies 1 b	0				
"≜	С	Fundraising eve	ents 1c	0				
2 E	d	Polated organia	zations 1d					
<u>≽≅</u>	u	_						
<u> </u>	е	Government grants	s (contributions) 1e	250,520				
5 ल	f	All other contribution	ons, gifts, grants, and 1f	8,174,009	İ			
5 92		sımılar amounts no	ot included above					
≘형	g		butions included in					
Ĕ TO		lines 1a-1f \$ _	128,704					
contributions, gitts, grants and other similar amounts	h	Total (Add line	s 1a-1f)	🟲	8,424,529			
				Business Code				
œ.	_			Busiliess Code				
Ĭ	2a							
a A	b							
Œ.	с		_					
92								
<u>7-</u>	d							
<u>م</u> ة	е							
E	f	All other program	em carvica revenue					
\$	•	An other progra	am service revenue					
Program Serwde Revenue	g	Total. Add lines	s 2a-2f	b ¢				
_	9	0	3 Zu Zi					
	3	Investment inc	ome (ıncludıng dıvıden	ds, interest				
		other similar ar	mounts)		54,695	25,088	0	29,607
	4		stment of tax-exempt bond		0	0	0	0
					0	0	0	
	5	Royalties	<u> </u>		Ü	U	U	0
			(ı) Real	(II) Personal				
	6a	Gross Rents	69,638	0				
	b	Less rental	40,853	0				
	_	expenses	,					
	c	Rental income	28,785	0				
	d	or (loss)	me or (loss)	<u> </u>	28,785	0	0	28,785
	u	Net Telltal IIICo			20,703		9	20,703
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of	1,379,094	0				
		assets other						
		than inventory		_				
	b	Less cost or other basis and	1,384,914	0				
		sales expenses						
	c	Gain or (loss)	-5,820	0				
	d	Net gain or (los	s)		-5,820	0	0	-5,820
	8a		rom fundraising					
	ou	events (not inc						
		\$						
ψ			reported on line 1c)					
=		See Part IV, lin	ne 18					
 5			G if total exceeds					
Other Revenue		\$15,000	a	0				
-	b	Less direct ex	penses b					
<u></u>	с	Net income or ((loss) from fundraising	events 📂				
5	9a		rom gaming activities	-				
	Ja	See part IV, lin						
			ule G ıf total exceeds					
		<i>\$15,000</i>						
			а					
	ь	Less directev	penses b					
	c		(loss) from gaming acti	vities				
				, ities				
	10a	Gross sales of						
		returns and allo						
			а					
	b	Less cost of g	oods sold b					
	С	Net income or ((loss) from sales of inv	entory 🟲				
		Miscellaneous	s Revenue	Business Code				
	11a							
	b							
	c							
					1,000	1,000	0	0
	d	All other reven	ue		1,000	1,000		
	e	Total. Add lines	s 11a-11d	\$				
				1,000				
	12		Add lines 1h, 2g, 3, 4,	5,6d,7d,8c,	8,503,189	26,088	0	52,572
		9c 10c and 1		■	l l			ı ,

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).							
Do ı	not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses		
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	7,129,471	7,129,471				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22						
3	Grants and other assistance to governments, organizations and individuals outside the U.S. See Part IV, lines 15 and 16						
4	Benefits paid to or for members						
5	Compensation of current officers, directors, trustees, and key employees	346,830	173,415	34,683	138,732		
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$						
7	Other salaries and wages	507,672	84,493		346,092		
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	27,717	4,412	4,963	18,342		
9	Other employee benefits	41,885	5,071	6,366	30,448		
10	Payroll taxes	45,967	11,433	6,802	27,732		
11	Fees for services (non-employees)						
а	Management	60,000	24,000	30,000	6,000		
b	Legal	14,381		14,381			
c	Accounting	17,550		17,550			
d	Lobbying						
e	Professional fundraising See Part IV, line 17						
f	Investment management fees						
g	Other	30,420	17,000	100	13,320		
12	Advertising and promotion	63,361	53,858		9,503		
13	Office expenses	160,749	43,318	22,831	94,600		
14	Information technology	44,618	10,329	8,272	26,017		
15	Royalties						
16	Occupancy	61,279	14,074	11,754	35,451		
17	Travel	46,678	12,581	5,528	28,569		
18	Payments of travel or entertainment expenses for any Federal, state or local public officials						
19	Conferences, conventions and meetings						
20	Interest						
21	Payments to affiliates						
22	Depreciation, depletion, and amortization	5,222	1,209	968	3,045		
23	Insurance	20,422	4,728	3,786	11,908		
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)						
а	Special Programs (less Promotion Reported in Line 12	48,354	48,354	0	0		
b	Campaign Events, Incentives, Printing, Etc	161,166	7,480	0	153,686		
c	Publications	34,268	34,268	0			
d	Miscellaneous	11,621	5,210	220	6,191		
f	All other expenses						
25	Total functional expenses. Add lines 1 through 24f	8,879,631	7,684,704	245,291	949,636		
26	Joint Costs. Check if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and						
	fundraising solicitation	62741	52,807	0	9,934		

Part X	Balance	Shoot
	Balance	Sneer

					(A) Beginning of year			3) fyear
	1	Cash—non-interest-bearing			0	1	Liid 0	0
	2	Savings and temporary cash investments			1,753,268	2		1,771,105
	3	Pledges and grants receivable, net			5,097,009	\vdash		4,593,367
	4	Accounts receivable, net			1,915	- +		9,287
	5	Receivables from current and former officers, directors, trustees			.,,,,,			-,
		other related parties			0	5		0
	6	Receivables from other disqualified persons (as defined under se persons described in section 4958(c)(3)(B) Complete Part II of S			0	└ ~		0
	7	Notes and loans receivable, net			531,410	7		477,217
	8	Inventories for sale or use			0	8		0
Ę.	9	Prepaid expenses and deferred charges	s and deferred charges					
Assets	10a	Land, buildings, and equipment cost basis	10a	1,705,269				
•	b	Lace accumulated depreciation Complete Part VI of	IUa	1,700,200				
	В	Less accumulated depreciation <i>Complete Part VI of Schedule D</i>	10b	963,471				741,798
	11	Investments—publicly traded securities	•		1,745,828	\vdash		1,551,895
	12	Investments—other securities See Part IV, line 11 <i>Complete Pa Schedule D</i>	0	12		0		
	13	Investments—program-related See Part IV, line 11 Complete Part IV, lin		13				
	14	Intangible assets		14		0		
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule D	7,457	15		2,265		
	16	Total assets. Add lines 1 through 15 (must equal line 34)			9,897,422	16		9,166,339
	17	Accounts payable and accrued expenses			301,043	17		267,227
	18	Grants payable	5,652,890	18		5,349,758		
	19	Deferred revenue	0	19		0		
	20	Tax-exempt bond liabilities	0	20		0		
or or	21	Escrow account liability Complete Part IV of Schedule D		21				
Liabilities	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified						
Ţ.		persons Complete Part II of Schedule L		•	0	22		0
_	23	Secured mortgages and notes payable to unrelated third parties		-	0	\vdash		0
	24	Unsecured notes and loans payable				24		
	25	Other liabilities Complete Part X of Schedule D			0	25		0
	26	Total liabilities. Add lines 17 through 25		5,953,933	26		5,616,985	
		Organizations that follow SFAS 117, check here ► ✓ and compl	ete lin	es 27				
φ		through 29, and lines 33 and 34.	C.C	C3 2,				
auc	27	Unrestricted net assets			3,149,329	27		2,950,665
Balance	28	Temporarily restricted net assets			494,160	28		298,689
=	29	Permanently restricted net assets			300,000	29		300,000
Fund		Organizations that do not follow SFAS 117, check here 🕨 🦵 and	lete					
ō	30	lines 30 through 34.				30		
ets		Capital stock or trust principal, or current funds				 		
Assets or	31	Paid-in or capital surplus, or land, building or equipment fund				31		
	32	Retained earnings, endowment, accumulated income, or other ful	105		2.042.400	32		2 540 25 1
Net	33	Total net assets or fund balances			3,943,489	33		3,549,354
	34	Total liabilities and net assets/fund balances			9,897,422	34		9,166,339
Pa	rt XI	Financial Statements and Reporting						
							Yes	No

ParitXI	Financial	Statements	and Reporting

1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
С	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		Νο
b	If "Yes," did the organization undergo the required audit or audits?	3b		

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493134055140

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1)nonexempt charitable trusts. Attach to Form 990 or Form 990-EZ. See separate instructions.

Open to Public Inspection

-UND	FOR IF	TE ARTS INC						6.1	-0479626	5	
Pa	rt I	Reason	for Public C	harity Status (to be co	mpleted	by all or	ganizatio				
				ation because it is (Please		-			211001000	,	
1	Г			nurches, or association of ch					(A)(i).		
2	Г	A school de	escribed in Sec i	ion 170(b)(1)(A)(ii). (Attac	h Schedu	ıle E)					
3	Γ	A hospital	or a cooperativ	e hospital service organizati	on descril	bed in Sec	tion 170(b	o)(1)(A)(i	ii). (Attac	h Schedu	le H)
4	Γ	A medical i	research organi	zation operated in conjunction	on with a l	hospital d	escribed ii	n Section	170(b)(1)	(A)(iii). E	nter the
		hospital's i	name, city, and	state							
5	Γ	An organiza	atıon operated f	or the benefit of a college or	universit	y owned o	r operated	by a gove	ernmental	unıt desc	rıbed ın
		Section 17	D(b)(1)(A)(iv).	(Complete Part II)							
6	Γ	A federal, s	tate, or local g	overnment or governmental	unıt descr	rıbed ın Se	ct ion 170((b)(1)(A)	(v).		
7	<u>~</u>	An organiza	ation that norm	ally receives a substantial p	art of its s	support fro	om a govei	rnmental ı	ınıt or fron	n the gene	eral public
		described i	n Sect ion 170(l	o)(1)(A)(vi) (Complete Par	tII)						
8	Γ	A commun	ty trust describ	ed in Section 170(b)(1)(A)	(vi) (Com	nplete Par	tII)				
9	Γ	An organiza	ation that norm	ally receives (1) more than	331/3% 0	of its supp	ort from co	ontribution	ıs, membe	rship fees	s, and gross
		-		ated to its exempt functions	-		•		•		
				estment income and unrelate						() from bu	sinesses
	_		•	on after June 30, 1975 See					•		_
10	<u> </u>	=	=	and operated exclusively to	-		= -				•
11	ı			and operated exclusively for orted organizations describe							
				type of supporting organizations						Section 5	OS(a)(S). Check
		а Г⊤	ype I b	Type II c	Type III	- Function	nally Integ	grated	d	Гтуре	III - Other
e	Γ	•		rtıfy that the organızatıon ıs			•			•	•
				agers and other than one or	more publ	licly suppo	orted orga	nızatıons (described	ın sectior	n 509(a)(1) or
f		section 50		d a written determination fro	m the IRS	S that it is	a Type I.	Type II o	r Type III	supportir	na organization.
		check this					, , ,	. , , ,	, p		.у стуш <u>.</u>
g		_		as the organization accepted	d any gift	or contrib	utıon from	any of the	<u></u>		
		following person		r indirectly controls, either a	alone or to	naether wi	th nersons	describe	d in (ii)		Yes No
			·-	ng body of the the supported		-	en persons	describe	u III (II)	11g	
			· -	erson described in (i) above	-					11g(
			•	ty of a person described in (bove?				11g(
h				nation about the organizatio			supports				
			-	•	_						
	(i) Na	ame of	(ii) EIN	(iii) Type of organization	(iv) I	s the	(v) Did y	ou notify	(vi) I	s the	(vii) A mount of
Supported (described on lines 1-9 organization in Organization above or IRC section col (i) listed in							the orga			ation in	support?
	Organ	lization		above or IRC section (See Instructions))		verning	supp	i) of your	In the	rganized US?	
document?											
					Yes	No	Yes	No	Yes	No]
				ı	ı	1	1	i	1	1	1

Total

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

	Complete only if you clied	keu the box of	11 lille 5, 7, 01	o or Part 1.)				
	iblic Support		(1) 2005	() 2006	(N 2 2 2 7 1		2000	/63 T + 1
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
1	Gifts, grants, contributions, and	7,297,214	8,303,307	11,254,217	9,734,066		8,424,529	45,013,333
	membership fees received (Do not include any "unusual grants")	,,257,214	0,505,507	11,254,217	3,734,000		0,424,323	45,015,555
2	Tax revenues levied for the organization's							
2	benefit and either paid to or expended on	o	0	0				0
	its behalf							
3	The value of services or facilities							
_	furnished by a governmental unit to the	0	0	0				0
	organization without charge							
4	Total. Add line 1-3	7,297,214	8,303,307	11,254,217	9,734,066		8,424,529	45,013,333
5	The portion of total contribution by each							
	person (other than a government unit or							
	publicly supported organization) included							4,104,982
	on line 1 that exceed 2% of the amount							, ,
	shown on line 11, column							
_	(f)							
6	Public Support subtract line 5 from line 4							40,908,351
	otal Support	() 2004	(1) 2005	() 2006	/ N 2007		2000	/6\ T
	endar year (or fiscal year beginning in)	(a) 2004 7,297,214	(b) 2005 139,187	(c) 2006 11,254,217	(d) 2007 9,734,066	(e)	2 0 0 8 8,424,529	(f) Total 45,013,333
7	A mounts from line 4	7,297,214	139,107	11,234,217	9,734,000		0,424,329	45,015,555
8	Gross income from interest, dividends,							
	payments received on securities loans,	91,314	139,187	193,216	147,854	124,333		695,904
	rents, royalties and income from similar sources							
9	Net income from unrelated business							
,	activities, whether or not the business is	o	О	О	0	О		0
	regularly carried on							
10	Other income Do not include gain or loss							
	from the sale of capital assets (Explain in	21	10,390	0	4,416		1,000	15,827
	Part IV)							
11	Total Support (Add lines 7 through 10)							45,725,064
12	Gross receipts from related activities, etc	(See instruction	s)			12		
13	First Five Years. If the Form 990 is for the	organızatıon's fır	rst, second, thir	d, fourth, or fifth	tax year as a 5	01(c)(3)	
	organization, check this box and stop here	J		, ,	,	. , ,		▶ ┌
Co	mputation of Public Support Perc	entage						
14	Public Support Percentage for 2008 (line 6	column (f) dıvıd	ed by line 11 co	olumn (f))		14		89.466 %
15	Public Support Percentage for 2007 Sched	ule A , Part IV - A	, line 26f			15		85.45 %
162	33 1/3% Test - 2008. If the organization did			and line 14 is 33	1/3% or more		this hov	
104	and stop here. The organization qualifies as				1/5/0 01 111016,	CHECK	tills box	▶ ▽
ь	33 1/3% Test - 2007. If the organization di		-		.5 is 33 1/3% o	r more	. check thi	•
_	box and stop here. The organization qualified			,	, - · · ·		,	▶□
17a	10% Facts and Circumstances Test - 2008.				3, 16a, or 16b a	nd line	e 14 is 10'	% or
	more, and if the organization meets the "fac	ts and circumst	ances" test, ch	eck this box and	stop here. Exp	laın ın	Part IV ho	
	organization meets the "facts and circumst							► □
ь	10% Facts and Circumstances Test - 2007.							
	more, and if the organization meets the "fac							
40	the organization meets the "facts and circu							►
18	Private Foundation. If the organization did	not check the bo	ox on line 13, 16	oa, 160, 1/a or	1/D, check this	рох а	na see	▶ □
	instructions							-

Pa	Support Schedule for On (Complete only if you ched				(2)		
	ction A. Public Support		_	,			
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
2	merchandise sold or services performed,						
	or facilities furnished in any activity that						
	is related to the organization's tax-						
	exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business under						
	section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
_	organization without charge						
6	Total Add lines 1-5						
7a	A mounts included on lines 1, 2, and 3						
	received from disqualified persons Amounts included on lines 2 and 3						
D	received from other than disqualified						
	persons that exceed the greater of 1% of						
	the total of lines 9, 10c, 11, and 12 for						
	the year or \$5,000						
С	Total of lines 7a and 7b						
8	Public Support (Substract line 7c from						
_	line 6)						
То	tal Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	A mounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar						
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after 30 June, 1975		+				
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly						
	carried on						
12	Other income Do not include gain or loss						
	from the sale of capital assets						
	(Explain in Part IV)						
13	Total Support (Add lines 9, 10c, 11 and						
	12)						
14	First Five Years If the Form 990 is for the	organızatıon's fı	rst, second, thir	d, fourth, or fifth	ntax year as a 5	01(c)(3) organı	zation,
	check this box and stop here						▶ □
	manufaction of Dublic Compact Days						
15	mputation of Public Support Perc Public Support Percentage for 2008 (line		dod by line 12 o	olumn (fl)		T 4= T	
			•	.orumm (1))		15	
16	Public Support Percentage for 2007 Sche	dule A , Part IV -	A, line 27g			16	
		D					
Co	mputation of Investment Income Investment Income Percentage for 2008 (ne 13 column /f	<u> </u>	17	
				-	"	17	
ΤQ	Investment Income Percentage from 2007	ocnequie A , Pa	TLIV-A, IINE 2/	H		18	

19a 33 1/3% Tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line

17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **33 1/3% Tests - 2007.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2008

▶□

Part IV

Supplemental Information. Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions)

Facts and Circumstances Test

Part II, line 10 - Miscellaneous Income

Schedule A (Form 990 or 990-EZ) 2008

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Name of the organization **Employer identification number** FUND FOR THE ARTS INC 61-0479626 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate Contributions to (during year) 3 Aggregate Grants from (during year) Aggregate value at end of year

Did the organization inform all donors and donor advisors in writing that the assets held in donor advised ┌ No funds are the organization's property, subject to the organization's exclusive legal control?

Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit?

Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

Pur	rpose(s) of conservation easements neig by the organization (chec	кан	that apply)
\sqcap	Preservation of land for public use (e g , recreation or pleasure)	\sqcap	Preservation of an historically importantly land area
Γ	Protection of natural habitat	Γ	Preservation of certified historic structure
Г	Preservation of open space		

Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

Total number of conservation easements h Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a)

Held at the End of the Year 2a 2b 2с 2d

d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the taxable year 🕨

- Number of states where property subject to conservation easement is located
- Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds?

- Staff or volunteer hours devoted to monitoring, inspecting and enforcing easements during the year 🕨
- 7 A mount of expenses incurred in monitoring, inspecting, and enforcing easements during the year 🕨 \$
- Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)?

☐ Yes

In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

Revenues included in Form 990, Part VIII, line 1

► \$

Assets included in Form 990, Part X

Cat No 52283D

For Paperwork Reduction Act Notice, see the Intructions for Form 990

Schedule D (Form 990) 2008

Par	TITL Organizations Maintaining Collections of	of Art, His	stori	<u>cal Treasu</u>	res, or Other	· Similar Asse	ts (co	ntınued)
3	Using the organization's accession and other records, che items (check all that apply)	ck any of th	he foll	owing that are	a significant us	e of its collection	า	
а	Public exhibition	d	Γ	Loan or exch	nange programs			
b	Scholarly research	е	Г	Other				
c	Preservation for future generations							
4	Provide a description of the organization's collections and Part XIV	explain ho	w the	further the o	rganızatıon's ex	empt purpose in		
5	During the year, did the organization solicit or receive dor assets to be sold to raise funds rather than to be maintain						Yes	┌ No
Pai	t IV Trust, Escrow and Custodial Arrangeme				nızatıon answe	ered "Yes" to Fo	orm 9	90,
	Part IV, line 9, or reported an amount on Fo	•						
1a	Is the organization an agent, trustee, custodian or other ii included on Form 990, Part X?	•	forc	ontributions o	rotherassets n		Yes	☐ No
b	If "Yes," explain why in Part XIV and complete the followi	ng table						
						A mou	ınt	
с	Beginning balance				1c			
d	Additions during the year				1d			
e	Distributions during the year				1e			
f	Ending balance				1f			
2a	Did the organization include an amount on Form 990, Part	X, line 21?	•			Г	Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV							
Pa	rt V Endowment Funds. Complete if the organi		Swere D)Prior			: IV, line 10. Three Years Back (e	\ Four V	aare Back
1a		39,193	7)[10]	rear (c)rw	o rears back [(u)	ilice reals back (e)i oui it	ears back
	Contributions	0						
c		96,752						
d		379,588						
e	Other expenditures for facilities	0						
	and programs							
f	Talling Craft Conference of the Conference of th	23,342						
g	zna or year barance i i i i i i i	39,511						
2	Provide the estimated percentage of the year end balance	held as						
а	Board designated or quasi-endowment 🕨 14 %							
b	Permanent endowment 🕨 986%							
c	Term endowment ► 0 %							
3a	Are there endowment funds not in the possession of the o organization by	rganızatıon	that a	re held and a	dmınıstered for t	he	Yes	Late
	(i) unrelated organizations					3a(i)	Yes	No
	(ii) related organizations					3a(ii)	Yes	
b	If "Yes" to 3a(II), are the related organizations listed as re					3b		İ
4	Describe in Part XIV the intended uses of the organization	n's endowm	ent fu	nds				
Pai	t VI Investments—Land, Buildings, and Equi	ipment. S	<u>See F</u>	orm 990, Pa	rt X, line 10.	I		
	Description of investment			Cost or other (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Bo	ook value
1a	Land			0	0			0
b	Buildings			0	1,347,081	687,488		659,593
c	Leasehold improvements			0	0	0		0
d	Equipment			0	317,188	261,177		56,011
e	Other			0	41,000	14,806		26,194

741,798

Part VII Investments—Other Securities. See	Form 990, Part X, line 1	.2.	
(a) Description of security or cateory (including name of security)	(b)Book value	(c) Metho	d of valuation year market value
Financial derivatives and other financial products	0		
Closely-held equity interests	0		
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	0		
Part VIII Investments—Program Related. Se	e Form 990, Part X, line		
(a) Description of investment type	(b) Book value		d of valuation year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, II	ne 15.		
(a) Descri			(b) Book value
O ther Assets			2,265
Total. (Column (b) should equal Form 990, Part X, col.(B) line	15)		2,265
Part X Other Liabilities. See Form 990, Part X			2,200
(a) Description of Liability	(b) A mount		
Federal Income Taxes	0	1	
		-	
		†	
		-	
		†	
		1	
		1	
		1	
		1	
		-	
		-	
Table (Calcard (b) should 15 200 5 11 15 15 15 15 15 15 15 15 15 15 15 1		-	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	0	1	

	tal Reconcination of Change in Net Assets from Form 990 to Financial Statemen	113	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	8,503,189
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	8,879,631
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-376,442
4	Net unrealized gains (losses) on investments	4	-17,693
5	Donated services and use of facilities	5	0
6	Investment expenses	6	0
7	Prior period adjustments	7	0
8	Other (Describe in Part XIV)	8	0
9	Total adjustments (net) Add lines 4 - 8	9	-17,693
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-394,135
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	7,092,753
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d 0		
e	Add lines 2a through 2d	2e	-17,693
3	Subtract line 2e from line 1	3	7,110,446
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 0		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	1,392,743
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	8,503,189
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	Return
1	Total expenses and losses per audited financial statements	1	7,486,888
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
C	Losses reported on Form 990, Part IX, line 25		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	7,486,888
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 0		
b	Other (Describe in Part XIV)		
С	Add lines 4a and 4b	4c	1,392,743
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	8,879,631

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part XIV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Ident if ier	Return Reference	Explanation
SchD_P05_S00_L04	Schedule D, Part V, Line 4	The purpose of the Bingham Endowment (balance \$4,968,816) is to provide funds to the Fund for the Arts to support its mission of supporting the arts community of Metro Louisville The purpose of the Whittenberg Endowment (balance \$70,695) is to provide funding for a scholarship to assist pre-college to college age students in pursuing advanced studies in the arts, towards a career in the performing arts
SchD_P12_S00_L04b	Schedule D, Part XII, Line 4b	Part XII, Line 4b Partnership Gifts of \$1,363,958 and reclassification of net rental income of \$28,785
SchD_P13_S00_L04b	Schedule D, Part XIII, Line 4b	Part XIII, Line 4b Partnership Grants of \$1,363,958 and reclassification of net rental income of \$28,785

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Grants and Other Assistance to Organizations,

OMB No 1545-0047

2008

DLN: 93493134055140

Department of the Treasury Internal Revenue Service

Schedule I

(Form 990)

Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. Attach to Form 990.

Governments and Individuals in the U.S.

Open to Public **Inspection**

Name of the organization						Employer identi	ication number
FUND FOR THE ARTS INC						61-0479626	
Part I General Infor	mation on Gra	nts and Assistance	е			•	
the selection criteria use	General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	▼ Yes □ I					
Form 990, Part Part IV and Sch	IV, line 21 for a edule I-1 if add	ny recipient that rece itional space is	eived more than \$5,0	00. Check this box	if no one recipient rec	eived more than \$5,	
_	(b) EIN		' '	cash	(book, FMV, appraisal,	'•'	(h) Purpose of grant or assistance
See Additional Data Table							
							28
							•

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line	22.
	Use Schedule I-1 (Form 990) if additional space is needed.	

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. See Additional Data Table

See Additional Data Table	-	
Ident if ier	Return Reference	Explanation
SchI_P01_S00_L02	Schedule I, Part I, Line 2	Fund for the Arts awards the most significant portion of its grants to preselected "member" organizations which adhere to stated requirements for continued membership. Each organization is part of an annual "allocation process" which includes a review by Fund staff and an Allocation Committee including Board members and members of the "Next" group of young professionals. Information reviewed includes a summary of the organization's accomplishments, challenges, operating plans and audited financial statements. Grants made under the "partnership grant" program are only made to qualifying section 501 (c)(3) organizations with periodic reporting required where restrictions may apply. Many of these grants are also made to the "member" organizations. Grants made pursuant to the Teacher Arts Grants program are made to qualifying schools and must be used for purchase of art services. Monitoring is done through contact with the arts groups providing the services and follow-up with teachers. All other grants are made based upon specific requests and are made only to other Section 501(c)(3) organizations. Appropriate follow-up, if any, is determined based on size of grant, purpose and knowledge of organization.

Software ID: 08000095

Software Version: v1.00

EIN: 61-0479626

Name: FUND FOR THE ARTS INC

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Actors Theatre of Louisville 316 West Main Louisville, KY 40202	61-0645030	501(c)(3)	1,230,146	0			General Support
Kentucky Museum of Art and Craft715 West Main Louisville, KY 40202	61-0985312	501(c)(3)	153,440	0			General Support
Kentucky Opera323 West Broadway Suite 601 Louisville, KY 40202	61-6013111	501(c)(3)	734,287	0			General Support
Kentucky Shakespeare Festival1317 S 4th St Louisville,KY 40202	61-6036654	501(c)(3)	118,654	0			General Support
Louisville Bach Society4607 Hanford Lane Louisville, KY 40207	61-0705342	501(c)(3)	47,468				General Support
Louisville Ballet315 East Main Louisville,KY 40202	61-6033779	501(c)(3)	1,004,775	0			General Support
Louisville Orchestra323 West Broadway Louisville, KY 40202	61-6000384	501(c)(3)	2,005,611	0			General Support
Louisville Theatrical Association620 West Main Louisville, KY 40202	61-6000383	501(c)(3)	98,551	0			General Support
Louisville Visual Art Association3005 Upper River Road Louisville, KY 40207	61-0492348	501(c)(3)	60,541	0			General Support
Louisville Youth Choir3105 Lexington Road Louisville, KY 40206	61-6058143	501(c)(3)	47,095	0			General Support

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Louisville Youth OrchestraPO Box 997 Louisville,KY 40201	61-0597184	501(c)(3)	74,782	0			General Support
Music Theatre Louisville 323 West Broadway 7th Flr Louisville, KY 40202	61-1138603	501(c)(3)	194,258	0			General Support
Stage One Louisville Professional Children's Theatre323 West Broadway Louisvlle, KY 40202	61-0466715	501(c)(3)	320,655	0			General Support
Walden Theatre1123 Payne Street Louisville, KY 40204	61-0902722	501(c)(3)	51,862	0			General Support
West Louisville Performing Arts Academy 623 West Main Louisville, KY 40202	61-1181511	501(c)(3)	73,559	0			General Support
FFTA Properties623 West Main Lousivlle, KY 40202	31-1497554	501(c)(3)	353,317	0			General Support and Property Renovation
A mericans for the ArtsPO Box 91261 Washington, DC 20090	52-1996467	501(c)(3)	5,547	0			Costs for Louisville Presentation
Blue Apple PlayersPO Box 4261 Lousiville, KY 40204	61-1103965	501(c)(3)	36,152	0			General Support
Kentucky Shakespeare Festival1387 S 4th Street Louisville, KY 40208	61-6036654	501(c)(3)	20,000	0			Capacity Building
River City Drum Corp 3308 Chauncey Avenue Louisville, KY 40211	55-0820407	501(c)(3)	25,208	0			General Support

Form 990,Schedule I,	Part II, Grar	its and Other As	sistance to Gov	ernments and O	rganizations in '	the United States	\$
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The Kentucky Center for the Arts501 West Main Louisville, KY 40202	61-0973376	Gov	115,525	0			Gheens Great Expectations Series and General Support
Louisville Orchestra323 West Broadway Louisville, KY 40202	61-6000384	501(c)(3)	25,000	0			School Orchestra Grant
Archdiocese of Louisville 212 East College Street Louisville, KY 40201	61-0447247	501(c)(3)	6,476	0			Teacher Arts Grants
Bullitt County Schools 1040 Hwy 44 East Shepherdsville, KY 40165	61-6001357	Gov	12,063	0			Teacher Art Grants
Greater Clark County Schools2112 Utica- Sellersburg Road Jeffersonville,IN 47130	35-1151414	Gov	8,192	0			Teacher Art Grants
Jefferson County Public Schools3332 Newburg Road Louisville, KY 40218	61-6001316	Gov	230,663	0			Teacher Art Grants
Oldham County Schools PO Box 216 Buckner, KY 40010	61-6001306	Gov	5,788	0			Teacher Art Grants
Shelby County Schools 1155 West Main St Shelbyville, KY 40065	61-6001356	Gov	9,720	0			Teacher Art Grants

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Part I Questions Regarding Compensation

As Filed Data -

DLN: 93493134055140

OMB No 1545-0047

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

2008

Open to Public Inspection

Name of the organization FUND FOR THE ARTS INC

Schedule J

Department of the Treasury

Internal Revenue Service

(Form 990)

Employer identification number

61-0479626

					Yes	Νo
1a	Check the appropriate box(es) if the organization provided Part VII, Section A, line 1a Complete Part III					
	First class or charter travel	Ė	Housing allowance or residence for personal use			
	Travel for companions	Ė	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Ė	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If line 1a is checked, did the organization follow a wr provision of all the expenses described above? If "N	•		1b		
2	Did the organization require substantiation prior to re officers, directors, trustees, and the CEO/Executive			2		
3	Indicate which, if any, of the following the organization organization organization organization.					
	✓ Compensation committee	굣	Written employment contract			
	Independent compensation consultant	Г	Compensation survey or study			
	Form 990 of other organizations	<u> </u>	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, F	art VII	, Section A , line 1a			
а	Receive a severance payment or change of control p	ayment	7	4a		Νo
b	Participate in, or receive payment from, a supplemen	ntal none	qualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-ba	ased cor	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pro	ovide th	e applicable amounts for each item in Part III			
	501(c)(3) and 501(c)(4) organizations only must co	mplete l	lines 5-8.			
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	lıne 1a,	did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	lıne 1a,	did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in form 990, Part VII, Section A, payments not described in lines 5 and 6? If "Yes," d	,	· · · · · · · · · · · · · · · · · · ·	7	Yes	
8	Were any amounts reported in Form 990, Part VII, p subject to the initial contract exception described in in Part III					

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name			W-2 and/or 1099-MIS		(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	incentive compensation	(iii) Other compensation				990 01 FOIIII 990-EZ
Mr Allan Cowen	(ı) (ıı)	211,298 0	35,400 0	26,577 0	49,737 0	23,194 0	346,206 0	155,697
Barbara S Smith	(ı) (ıı)	140,463 0	0	3,230 0	11,183 0	5,127 0	160,003	82,357 0
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2008

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Ret urn Ref erence	Explanat ion
SchJ_P01_S00_L03	Schedule J, Part I, Line 3	The Fund for the Arts Compensation Committee includes a Chair of the Committee, the Fund for the Arts Board Chair, the Chair of the Finance Committee, the Campaign Chair and a member at large Members of the Committee review the terms of the CEO's employment agreement, compensation data developed from the review of other Form 990's and a summary of the year's accomplishments Actions related to CEO and other executive compensation are discussed and voted upon by the Compensation Committee Meeting minutes are recorded Recommendations are then taken to the organization's Executive Committee for final review and approval
SchJ_P01_S00_L04	Schedule J, Part I, Line 4	The Fund has nonqualified deferred compensation plans for the benefit of the Fund's CEO, Allan Cowen The amount allocated to the CEO is 6 7% of salary/bonus pursuant to an employment agreement The amount for 2008 was \$18,727 In addition, the Fund made additional contributions to the plans of \$6,875 during 2008 to provide for a shortfall in retirement benefits resulting from the operational mechanics of a new 401(k) plan
SchJ_P01_S00_L07	Schedule J, Part I, Line 7	Pursuant to the employment contract, in addition to a base salary the Fund's CEO, Allan Cowen receives a bonus of up to 15% of the agreed upon salary base for the applicable year based on performance criteria. The Compensation Committee reviews the applicable information and determines the recommended bonus amount which is then presented to and approved by the Fund's Executive Committee subject to final campaign results. The total bonus amount paid during 2008 was \$35,400
SchJ_P02_S00_L00	Schedule J, Part II	Column F reflects amounts reported in Columns B - E that were previously reported in the prior Form 990 but due to a change in reporting requirments are being included again in this Form 990 Amounts represent approximately 1/2 year of total compensation which was previously reported in prior Form 990
_		
•		

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As Filed Data -

DLN: 93493134055140

OMB No 1545-0047

Schedule L

(Form 990 or 990-EZ)

Transactions with Interested Persons ► Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38b or 40b.

					Er	mploy	er ide	ent if ica	tion n	umber	
					6:	1 <u>-047</u>	962	6			
Part I									Z, Part	V , line	40b
1										(c) Corrected?	
	(a) Hume of disquame		(u) Des		or transe	ac tion				Yes	No
	To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part (a) Name of disqualified person (b) Description of transaction Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization To be completed by organizations that answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line	$\frac{1}{2}$									
									#		
				sons duri	ng the y	ear ui	_	\$			
3 Ent	er the amount of tax, if any, on li	ne 2, above, reimburs	sed by the organization .				•	\$			
Part II				IV, line 2	26, or Fo	orm 9	90-E	Z, Part	V, line	a 38a	
(a) N	(a) Name of interested person and	from the	1	(d)Balance due		default?		A ppr			rıtten ment?
		To From				Yes	No	+	1	Yes	No
				<u> </u>							
				 				—	—	 	<u> </u>
		 		+				+	+	┼	├
		+		+				+	+	+	
		+		+				+	+-	+	
Total .			> \$.1							<u> </u>
Part III	I Grants or Assistance B	Benefitting Inter	ested Persons	990. Part	t IV, lın	ne 27	-				
(h)		(b) Relationsh	nıp between ınterested pe					nt or ty	pe of a	assista	nce
				-+							

Part IV Business Transactions Involving Interested Persons

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?		
	organization			Yes	No	
Ms Deborah L Moessner	Board Member		Compensation of Family Member for Employment		No	
Ms Marlene M Grissom	Board Member		Compensation of Family Member for Employment		No	

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493134055140

OMB No 1545-0047

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30.

Non-Cash Contributions

Attach to Form 990

Open to Public Inspection

Name of the organization FUND FOR THE ARTS INC

Employer identification number

61-0479626

Pa	rt I Types of Property							
		(a) Check If applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of de reven	etermi	nıng	
1	Art-Works of art	прр						
	Art—Historical treasures .							
3	Art—Fractional interests .							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .	Х	15	49,463	Sales Proceeds			
10	Securities—Closely held stock							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous .							
13	Qualified conservation contribution (historic structures)							
14	Qualified conservation contribution (other)							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxıdermy							
22	Historical artifacts							
	Scientific specimens							
	Archeological artifacts	·						
	Other (describe							
Spac	ertising/Promotion ce	l x	2	79,241	 FMV			
•	Other (describe)			,				
	Other (describe)							
29	Number of Forms 8283 receive	d by the org	anization during the tax yea	ar for contributions for				
	which the organization complet Acknowledgement				29			0
_							Yes	No
30a	During the year, did the organize hold for at						 	
	least three years from the date for the entire holding period?				evenihr harhozez	_		No
						30a		NO
31	If "Yes", describe the arranger Does the organization have a g			review of any non-standard	contributions?	31		No
	-	,		•				
32a	Does the organization hire or u	•	<u>-</u>	, , , , ,	non-cash	32a		No
b	If "Yes", describe in Part II							
	If the organization did not repo checked, describe in Part II	rt revenues	ın Column (c) for a type of p	property for which Column (a	a) is			

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.									
Identifier	ReturnReference	Explanation							
240111111	Notal III Colored	Explanation							
	1	1							

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047

Open to Public
Inspection

Name of the organization FUND FOR THE ARTS INC

Employer identification number

61-0479626

ldentifier	Return Reference	Explanation
F990_P06_S0A_L01a	Form 990, Part VI, Section A, Line 1a	Pursuant to the Bylaws, for FY2009 the Board appointed an Executive Committee consisting of 22 Voting Members. There were also three ex-officio members of the Executive Committee who also serve as ex-officio members of the Board. Under the Bylaws, when the Board is not in session, the Executive Cmmittee has and may exercise all of the authority of the Board with the exception of (a) elect or appoint Directors, (b) elect or appoint officers, (c) approve any annual allocation among Assisted Organizations of funds raised in the annual fund-raising campaign or otherwise controlled and distributable by the Fund, (g) adopt a plan of merger or consolidation with another entity, (h)authorize the sale, lease, exchange or mortgage of all, or substantially all of the property and assets of the Fund, (i) authorize the voluntary dissolution of the Fund, or adopt a plan of distributions of the assets of the Fund or (j) amend, alter or repeal any resolution of the Board

ldentifier	Return Reference	Explanation
F990_P06_S0A_L02	Form 990, Part VI, Section A, Line 2	Did any officer, director, trustee or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee? Board Secretary, Jonathan D. Goldberg and Board Member James Goldberg - family relationship, Board Member, James S. Welch Jr and Board Member, Rusty Cheuvront, Jr - business relationship,

	ldentifier	Return Reference	Explanation
F	990_P06_S0A_L03	Form 990, Part VI, Section A, Line 3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustee, or key employees to a management company or other person? The Chief Financial Officer position is contracted to Diane Cornwell, an independent contractor. She is paid \$60,000 and provided parking to oversee the complete financial function including the annual allocation process, with a dual reporting relationship to the Fund Board and CEO.

ldentifier	Return Reference	Explanation
F990_P06_S0A_L10	Form 990, Part VI, Section A, Line 10	Description of the process for reviewing the organization's Form 990. A committee consisting of the organization's Board Chair, CEO, Chair of Finance Committee, Chair of Compensation Committee and at least two members of the Finance Committee review a draft of the Form 990. The review includes a meeting with the CFO (preparer) to discuss questions/observations prior to finalizing the return. The finalized return is electronically provided to all Board members approximately one wieek before it is filed with the IRS.

ldentifier	Return Reference	Explanation
F990_P06_S0B_L12c	Form 990, Part VI, Section B, Line 12c	Conflict of Interest (COI) Policy/Enforcement Annually, the Fund for the Arts provides a copy of its Conflict of Interest Policy to all directors and officers. Directors and officers are required to read and comply with the Policy which requires, at a minimum, annual disclosure of outside activities and relationships which can then be used by the organization's management in its ongoing monitoring of potential conflicts. In addition, the COI Policy requires that a director or officer provide full disclosure of any conflict or perceived conflict as defined in the COI Policy and recuse themselves from participation in the decision-making or vote regarding the affected transaction.

ldentifier	Return Reference	Explanation
F990_P06_S0B_L15	Form 990, Part VI, Section B, Line 15	Process for determining compensation of top management official, other officers or key employees. Each May, the Fund for the Arts Compensation Committee reviews the compensation arrangements for the CEO. They also review the CEO's recommendations regarding compensation for the Executive Vice. President and CFO. The Committee then approves the compensation arrangements relating to the Executive Vice President and CFO and develops a recommendation for the CEO compensation which is made to the organization's Executive Committee for final approval. The Compensation Committee is composed entirely of independent members, uses comparability data and contemporaneously documents the deliberation and decisions reached. The compensation arrangement is approved in advance for the upcoming fiscal year period of July 1 thru June 30. The meeting was held on May 22, 2009 to review compensation arrangements for the period July 1, 2009 thru June 30, 2010.

ldentifier	Return Reference	Explanation
F990_P06_S0C_L19	Form 990, Part VI, Section C, Line 19	Public Availability of Information The conflict of interest policy and the most current audited financial statements are available on the Fund for the Arts' website. Articles of Incorporation are on file with the KY Secretary of State. Bylaw's are not normally provided.

Identification of Disregarded Entities

DLN: 93493134055140

OMB No 1545-0047

2008

Open to Public Inspection

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Part I

Related Organizations and Unrelated Partnerships

Attach to Form 990. To be completed by organizations that answerd "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37. ► See separate instructions.

Name of the organization FUND FOR THE ARTS INC

Employer identification number

61-0479626

(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)		(D) Total income		(E) End-of-year assets		(F) Direct controlling entity		
Part II Identification of Related Tax-Exempt Organ	nizations									
(A) Name, address, and EIN of related organization	(B) Primary activity	Leg or	(C) Legal domicile (stat or foreign country)		e (D) Exempt Code section		(E) Public chanty stat (if section 501(c		(F) Direct controlling entity	
FFTA Properties Inc 623 West Main Lousville, KY40202 31-1497554	BrownTheatre/ArtsSpace/Fifth T Conference Center	hırd	кү		501(c)(3)		9		N/A	

(A) Name, address, and EIN of related organization		(B) nary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	incom	(E) Predominant income(related, investment, unrelated)		(F) e of total income	(G) Share of end-of- year assets	(H Disprop allocat	l) ortionate tions?	(I) Code V—UBI amount on Box 20 of K-1	Gene mana part	agıng
										Yes	No		Yes	No
Part IV Identification of R	Related	l Organizations	Taxable as	a Corporation	ı or Tr	ust								
(A) Name, address, and EIN of related organ		(B) Primary activity		(C) Legal domicile (state or foreign country)		(D) Direct contro	olling	(E) Type of entity (C corp, S corp or trust)	(F) Share of total income	end	(G) hare of l-of-yea assets	(H) Percentage r ownership		

(6)

No

No No No

No No No No

No

No No No

No

No No

Part V	Transactions	with	Related	Organizations
--------	--------------	------	---------	----------------------

Par	rt V Transactions with Related Organizations			
	Note. Complete line 1 if any entity is listed in Parts II, III or IV		Y	'es
1 Du	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a	Y	'es
b	Gift, grant, or capital contribution to other organization(s)	1b	Y	'es
c	Gift, grant, or capital contribution from other organization(s)	1 c		
d	Loans or loan guarantees to or for other organization(s)	1d		
e	Loans or loan guarantees by other organization(s)	1e		
f	Sale of assets to other organization(s)	1 f		
g	Purchase of assets from other organization(s)	1 g		
h	Exchange of assets	1h		
i	Lease of facilities, equipment, or other assets to other organization(s)	1i		
j	Lease of facilities, equipment, or other assets from other organization(s)	1j		
k	Performance of services or membership or fundraising solicitations for other organization(s)	1k	Y	'es
1	Performance of services or membership or fundraising solicitations by other organization(s)	11		
m	Sharing of facilities, equipment, mailing lists, or other assets	1m	n	
n	Sharing of paid employees	1n		
0	Reimbursement paid to other organization for expenses	10		
р	Reimbursement paid by other organization for expenses	1р	Y	'es
q	O ther transfer of cash or property to other organization(s)	1 q		
r	O ther transfer of cash or property from other organization(s)	1r		

	(A) Name of other organization(s)	Transaction type(a-r)	(C) Amount Involved
(1)	FFTA Properties Inc	a-ı	23,400
(2)	FFTA Properties Inc	b	353,317
(3)	FFTA Properties Inc	k	0
(4)	FFTA Properties Inc	р	3,000
(5)			

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

Part VI Unrelated Organizations Taxable as a Partnership

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

									_	
(A) Name, address, and EIN of entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Are all partners section 501(c)(3) organization:	s?	(E) Share of end-of-year assets	(F) Disproprtionate allocations?		(G) Code V—UBI amount on Box 20 of K-1	(H) General o managing partner?)
			Yes	No		Yes	No		Yes	No
			•	•		•		Sabadula	D / Form	

Software ID: Software Version:

EIN: 61-0479626

Name: FUND FOR THE ARTS INC

Form 990, Part VII - Section Aaa

Form 990, Part VII - Section Aaa											
		Posi t	(C tion (hat a	ched		I			(E)	(F)	
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations	
Mr Terry W Tyler , Board Member	1 00	Х						0	0	0	
Ms Jacqueline D Griffin , Board Member	50	Х						0	0	0	
Mr Gregory Heitzman , Board Member	50	Х						0	0	0	
Ms Deborah L Moessner , Board Member	50	Χ						0	0	0	
Mr Arthur L Gleason , Board Member	50	Х						0	0	0	
Mr Sean O'Leary , Board Member	10	Х						0	0	0	
Mr Robert L Shircliff , 2009 Campaign Chair	4 00	Х						0	0	0	
Mr Thomas P Monahan , Board Member	50	Х						0	0	0	
Mr Robert P Adelberg , Board Member	50	Х						0	0	0	
Mr P Richard Anderson Jr , Chairman	4 00	Х		Х				0	0	0	
Ms Norma Oberst , CoChair Allocations Committees	2 00	Х						0	0	0	
Mr Owsley Brown II , Board Member	1 00	Х						0	0	0	
Mr Craig D Grant , Board Member	1 00	Х						0	0	0	
Mr Steven E Trager , Board Member	50	Х						0	0	0	
Mr Benjamin Richmond , Board Member	50	Х						0	0	0	
Mr William B Yarmuth , Board Member	20	Х						0	0	0	
Mr Franklın H Farrıs , Board Member	50	Х						0	0	0	
Mr C Edward Glasscock , Board Member	1 00	Χ						0	0	0	
Mrs Martha Dunbar Hall , Board Member	50	Χ						0	0	0	
Mr Philip R McHugh , Vice Board Chair and Chair Nominating Commitee	2 00	Х		х				0	0	0	
Mr Jonathan D Goldberg , Secretary	1 00	X		Х				0	0	0	
Mr Bill Lamb , Board Member	50	Χ						0	0	0	
Mr David K Karem , Board Member	50	Χ						0	0	0	
Mr Frank B Hower III , Board Member	50	Χ						0	0	0	
Mr Tonii Rizzo , Board Member	50	X						0	0	0	
Ms Joanna Travis , Board Member	20	Χ						0	0	0	
Mr James R Allen , Board Member	1 00	Χ						0	0	0	
Mr Sam Corbett , Co-Chair Allocations Committees	2 00	Х						0	0	0	
Mr Mark F Wheeler , Board Member	50	Χ						0	0	0	
Ms Lynn Pendergrass , Board Member	10	Χ						0	0	0	

Form 990, Part VII - Section Aaa											
		Posit t	(C tion (hat a	chec		I			(E)	(F)	
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Kej emplojee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations	
Mr James R Rucker , Board Member	10	Х						0	0	0	
Mr John N Voyles , Board Member	50	Х						0	0	0	
Ms Shirley Willihnganz , Board Member	50	Х						0	0	0	
Mr David Klein , Board Member	10	X						0	0	0	
Mr William Hollander , Board Member	50	Х						0	0	0	
Ms Angela Leet , Board Member	50	Х						0	0	0	
Mr James Clay Smith , Board Member	20	Х						0	0	0	
Mr Dennis Heishman , Board Member	50	X						0	0	0	
Dr Susan Galandıuk , Board Member	50	X						0	0	0	
Mr J Stephen Barger , Board Member	50	Х						0	0	0	
Mr Jonathan D Blum , Board Member	1 00	X						0	0	0	
Mr David H Brooks , Board Member	50	X						0	0	0	
Mr Charles F Clephas , Board Member	10	Х						0	0	0	
Mr John H Hawkins Jr , Treasurer	2 00	X		Х				0	0	0	
Ms Carol W Hebel , Board Member	50	Х						0	0	0	
Mr Carl M Thomas , Vice Board Chair and Chair Compensation Committee	2 00	×		х				0	0	0	
Mr Ronald J Murphy , Chair Elect, Board Member	1 50	X						0	0	0	
Mr Kevın Boyle , Board Member	0 00	X						0	0	0	
Mr Harold Butler , Co-Chair Allocations Committee	2 00	X						0	0	0	
Mr James S Goldberg , Board Member	50	X						0	0	0	
Mrs Joan Whittenberg , Board Member	50	Х						0	0	0	
Ms Marlene M Grissom , Board Member	1 00	Х						0	0	0	
Mr Rick K Guillaume , Board Member	50	Х						0	0	0	
Mr David P Calzi , Board Member	2 00	Х						0	0	0	
Mr Robert G Bader , Board Member	50	Х						0	0	0	
Mr Wesley Beckner , Board Member	50	Х						0	0	0	
Ms Joan A Coleman , Board Member	10	Х						0	0	0	
Mr J Daniel Rivers , Board Member	50	Х						0	0	0	
Mr Sheldon Berman , Board Member	20	Х						0	0	0	
Mr Rusty Cheuvront , Chair 60th Anniversary Celebration	3 00	Х						0	0	0	

Form 990, Part VII - Section Aaa

i orini 990, Part VII - Section Ada											
		Posit t	(C tion (hat a	chec		I			(E)	(F)	
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee		Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations	
Mr Arnold Garson , Board Member	50	X						0	0	0	
Mr Charles D Maisch , Board Member	50	X						0	0	0	
Mr Jeffrey A McKenzie , Board Member	50	X						0	0	0	
Dr Anthony L Newberry PhD , Board Member	50	Х						0	0	0	
Mr Thomas T Noland Jr , Board Member	1 00	X						0	0	0	
Mr Joseph A Pusaterı , Board Member	50	Х						0	0	0	
Ms Mary Pat Regan , Board Member	50	Х						0	0	0	
Mr James S Welch Jr , Board Member	1 00	Х						0	0	0	
Ms Melissa A Wasson Howell , Board Member	10	X						0	0	0	
Ms Tracy Williams , Board Member	10	Х						0	0	0	
Mr Allan Cowen , Exec Director/CEO	60 00			Χ	Х			273,275	0	72,931	
Barbara S Smith , Executive Vice President	50 00					×		143,693	0	16,310	

Form 990, Part III, Line 1 - Briefly describe the organization's mission:

The mission of the Fund for the Arts is to foster excellence in the arts as a primary means of improving the quality of life, education of children and furthering the economic development of the Metro Louisville community. It increases revenues for the arts and encourages efficient community resource utilization to enable our community to become the preeminent regional arts center in the United States.