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-Form 990

MAIL THIS ORIGINAL

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)

2008

OMB No 1545 0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

_	_				0.701		0./21		~~				
	F	or the	2008 calend	lar year, o	or tax year beginning 9/01	, 2008, and ending		, 20					
В	С	heck if a	pplicable	Diana a			D Emplo	yer Identification	n Number				
	ĺ	Addre	ess change	Please use IRS label	ARTS AND HUMANITIES COUNC	IL OF	72-	0860898					
	Ī	Name	e change	or print or type	SOUTHWEST LOUISIANA, INC.		E Teleph	one number					
	ŀ	_	return	See specific	P.O. BOX 1437		(33	7) 439-2	7787				
	ŀ	-		Instruc-	LAKE CHARLES, LA 70602		1,55	(887) 183 2787					
	-	┥	ination	tions				F76	C C O				
	ļ	- Amer	nded return		<u> </u>		G Gross		576,				
	L	Appli	cation pending		and address of principal officer CHUCK EHLE		H(a) Is this a group retu		Yes	X No			
					AS C ABOVE		H(b) Are all affiliates inc If 'No,' attach a list		Yes	∐ No			
I		Tax-e	xempt statu	s X 501	(c) (3) ◄ (insert no) 4947	(a)(1) or 527	ii 770, allacii a iio.	(Sua momadio)	,				
J		Webs	ite: ► Ww	W.ARTS	SANDHUMANITIESSWLA.ORG		H(c) Group exemption r	number -					
ĸ		Type of	organization	X Corpora		L Year of Formation	''' '' ''	State of legal do	micile LA				
	21	t I	Summ		allon Trasi Trascelation Office	= roar or rounali	<u> </u>	state of legal ao	miche 22				
	1				ganization's mission or most significant act	value DDOMOTE 7	ADTC TH COLL	UMPCT I	OTITCTAN	.T.7\			
	ŀ	, 6	neny descri	ne me ori	garlization's mission or most significant act	INITIES. TROMOTE A	<u> 花 7.2 </u>	<u>.umeət T</u>	OOTSTW	N u – –			
ပ္		_											
.UTU Activities & Governance		_			. – – – – – – – – – – – – – – – – – – –								
Je 1					· ,,, 								
é			heck this bo		if the organization discontinued its operation		e than 25% of its a	1 - 1		1 2			
•ઇ					bers of the governing body (Part VI, line 1			3		13 11			
es					nt voting members of the governing body (F	art vi, line ib)		4					
ວັ	ŀ			•	yees (Part V, line 2a)			5		3			
ZU IU Activ	ŀ				eers (estimate if necessary)	1 (0)		6		0			
7			_		ousiness revenue from Part VIII, line 12, co	olumn (C)		7a		0.			
>	+	b N	et unrelated	business	s taxable income from Form 990-T, line 34			7Ь		0.			
.77							Prior Year	(Current Ye	ar			
. AN		8 C	ontributions	and gran	its (Part VIII, line 1h)		261,	755.	348,	661.			
Įž		9 P	rogram sen	rice reven	ue (Part VIII, line 2g)	70,	727.	69,	180.				
		10 In	vestment ir	ncome (Pa	art VIII, column (A), lines 3, 4, and 7d)		437.		336.				
긲ᄣ					III, column (A), lines 5, 6d, 8c, 9c, 10c, and	d 11e)		737.	52,	478.			
ž					nes 8 through 11 (must equal Part VIII, col	·	334,	182.	470,				
Z_					ounts paid (Part IX, column (A), lines 1-3)		 						
<u> </u>					members (Part IX, dolumn (A) [1] [1] [2] [4]								
SCANNEU Rev	- 1				1 10-0	75 (-02	0.7	751				
					nsation, employee benefits_(Part-IX,-colum	75,5		87,	751.				
Expenses		16a P	rofessional	fundraisir	2,5	537.							
ĝ	-	ЬΤ	otal fundrais	sing exper	ng fees (Part IX, column (A), line 11e) 5 2 nses (Part IX, column (D), line 25) >	010 Ö Ø13,179.		ŧ					
ű					IX, column (A), lines 1 12 11 11 11 11 11 11 11 11 11 11 11 1		305,0	185	423	371.			
	ł				nes 13-17 (must equal Part (X), Column (A)	11725	383,2		511,				
	1					, mne Zo)							
_	1	19 R	evenue less	expense	s Subtract line 18 from line 12		-49,0	132.	-40,	<u>467.</u>			
6	5						Beginning of Y	'ear	End of Yea	ar			
100		20 T	otal assets	(Part X, li	ne 16)		57,3	307.	63,	079.			
8.0	9	21 T	otal liabilitie	s (Part X	, line 26)		29,0	026.	75,	263.			
Net Assets or Find Balancor	[22 N	at accate o	fund hal	ances, Subtract line 21 from line 20		28,2		-12,				
	Щ.	22 \ t		ure Blo			20,2	.01.	14,	104.			
	aı	L II		1 6									
			Under penaltic true, correct,	es of positive	, I declare that I have examined this eturn including accerning to Declaration of premarer (other han officer) is based or	companying schedules and state and state	tements, and to the bester has any knowledge	t of pty knowledge	ge and belief,	ıt ıs			
			Z_{i}	1/	01/1/1/		4 0	/ /					
Si	igı	n		mu	Malla		<u> </u>	12/1	0				
Н	er	е	Signature	of officer			Date	/					
			► CHUC	K EHLE	RS		PRESIDENT	•					
				rigit name ar									
_				. (L.		Date	Ob t - d	Preparer's	s identifying ni	umber			
Pa	ء: _^	4	•	$\mathcal{R}\mathcal{R}$	It I tare Sent - (172	Check if self	(seė instr	s identifying ni uctions)				
Pi			Preparer's	► TEC	THE TANGETHAN	-11- de	employed >	LI					
		er's	signature	LES	TER LANGLEY JR.			P0028	88300				
U:			Firm's name (or LAN	GLEY, WILLIAMS & CO., LLC								
O.			yours if self employed),	▶ 205	W. COLLEGE ST.		EIN ► 7	12-08474	43				
	- • •	,	address, and ZIP + 4		E CHARLES, LA 70605		Phone no	(0.0.0.)					
•					E CHARLES, LA 70003		Phone no	(331) 41	, 202,				
		the IR:			with the preparer shown above? (see instru	uctions)	Phone no		Yes	No			

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Form	990 (2008) ARTS AND HUMANITIES COUNCIL OF 72	-0860898		Page 2
Pai	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
1	Briefly describe the organization's mission:			
	PROMOTE ARTS IN SOUTHWEST LOUISIANA			
2	Did the organization undertake any significant program services during the year which were not listed on the prior			
	Form 990 or 990-EZ?	Ye	s X	No
	If 'Yes,' describe these new services on Schedule O		(E)	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	∐ Ye	s X	No
A	If 'Yes,' describe these changes on Schedule O Describe the exempt purpose achievements for each of the organization's three largest program services by expen	ses Section 50°	1(c)(3)	
7	and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocation	ns to others, the	total	
	expenses, and revenue, if any, for each program service reported			
48	(Code:) (Expenses \$ 64,165. including grants of \$) (Revenience ARTS CAMP HELD EVERY SUMMER TO PROMOTE AN INCREASE IN LOCAL POTENTIAL		ARTI) :TTV
	TO CREATE AND RECOGNIZE ART	T MILLOID		
41	o (Code:) (Expenses \$ 261,091. including grants of \$) (Reveni)
	GRANTS ARE PROVIDED LOCALLY FOR VARIOUS ARTISTS AND ART PROSPECTS. T		<u>SCRII</u>	BED_
	AS "REGRANTS" PROGRAM. IT INVOLVES LOCAL AND STATE GOVERNMENT GRANTS	<u>.</u>		
				-
4	: (Code) (Expenses \$ 118,467. including grants of \$) (Reven	ıe Ŝ		```
-	VARIOUS SPECIAL PROJECTS TO PROMOTE THE ARTS LOCALLY.	<u>-</u>		
				·
		-		
	4 Other program conuces (Describe in Schedula ())			
4	d Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$)	
4	e Total program service expenses ► \$ 443,723. (Must equal Part IX, Line 25, column (B))			

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		X
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		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, 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		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25° If 'Yes,' complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	Х	
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		x
13	Is the organization a school described in section $170(b)(1)(A)(ii)$? If 'Yes,' complete Schedule E	13		X
14 a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		Х
Ŀ	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	14Ь		х
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		Х
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		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I	17		Х
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	X	
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		X
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	ļ	X
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		X
23	Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete Schedule J	23		Х
24 a	a 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, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K. If 'No, 'go to question 25	24a		X
b	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		
c	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		χ_
ŧ	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		Х
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		Х
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		Х
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Form 990 (2008) ARTS AND HUMANITIES COUNCIL OF
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.			
•	a 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)? <i>If 'Yes,' complete Schedule L, Part IV</i>	28a		Х
I	b Have a family member who had a direct or indirect business relationship with the organization? If 'Yes,' complete Schedule L, Part IV	28b		Х
•	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	28 c	Х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		_X
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		Х
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		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R. Part VI	37		Х
BAZ		Form	990 (2008)

TEEA0104L 12/18/08

Statements Regarding Other IRS Filings and Tax Compliance Part V Yes No 1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U S 1a 0 Information Returns. Enter -0- if not applicable 0 b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 1 c (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the 3 calendar year ending with or within the year covered by this return 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b X Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by X this return 3a b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O 3Ь 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account) Х 4a **b** If 'Yes,' enter the name of the foreign country. See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Х 5a Х 5b b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5c Х 6a 6a Did the organization solicit any contributions that were not tax deductible? b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not 6b 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization provide goods or services in exchange for any guid pro quo contribution of more than \$75? 7a Х **b** If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7 b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file 7с Х Form 8282? d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 e Х f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f Х g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7g Х h For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 7h Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9a 9b **b** Did the organization make any distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter 11 a a Gross income from other members or shareholders. **b** Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11_b

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Form 990 (2008)

12a

12b

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year

Section A. Governing Body and Management

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 2-7b below, and for a 'No' response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O See instructions		Yes	No						
18	a Enter the number of voting members of the governing body 1a 13									
1	b Enter the number of voting members that are independent 11									
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? SEE SCHEDULE O	2	Х							
3	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?	3		х						
4	Did the organization make any significant changes to its organizational documents	4		Х						
	since the prior Form 990 was filed?									
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Х						
6		6		X						
	· · · · · · · · · · · · · · · · · · ·									
	a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a 7b		X						
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?										
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following.										
	a The governing body?	8a 8b		X						
b Each committee with authority to act on behalf of the governing body?										
9:	a Does the organization have local chapters, branches, or affiliates?	9a		_X						
b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?										
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990 SEE SCHEDULE O	10		X						
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	11		х						
Sec	ction B. Policies									
			Yes	No						
12	a Does the organization have a written conflict of interest policy? If 'No,' go to line 13	12a	X							
I	b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		х						
•	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		Х						
13	Does the organization have a written whistleblower policy?	13		Х						
14	Does the organization have a written document retention and destruction policy?	14		Х						
	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.									
	a The organization's CEO, Executive Director, or top management official?	15a		Х						
	b Other officers of key employees of the organization?	15b		Х						
	Describe the process in Schedule O. (see instructions)			**********						
16	a 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		Х						
	, ,									
	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								
Sec	ction C. Disclosures									
17	List the states with which a copy of this Form 990 is required to be filed ► NONE									
18	inspection. Indicate how you make these available. Check all that apply.	lable 1	or pul	olic						
	X Own website									
19	Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy statements available to the public. SEE SCHEDULE O	y, and	finan	cial						
	State the name, physical address, and telephone number of the person who possesses the books and records of the organ ARTS AND HUMANITIES COUNCIL 809 KIRBY STREET, SUITE 202 LAKE CHARLES LA 70			7) 4						
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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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), 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) or more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if the organization did no	t compens	sate an	ıy of	ffice	r, dı	rector	, tru	stee, or key employee) .	
(A)	(B)			(((D)	(E)	(F)
Name and Title	Average hours	I	tion (check	all t	hat app	ly)	Reportable	Reportable	Estimated
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W 2/1099 MISC)	compensation from related organizations (W 2/1099 MISC)	amount of other compensation from the organization and related organizations
KAYSIE BOLTON]									
2ND VP	1			Χ				0.	0.	0.
KING BOLTON										
BOARD MEMBER	1							0.	0.	0.
SALLY CAPPEL										
SECRETARY	1			Χ				0.	0.	0.
JENIFER ENTERANTE CUMMINGS		[
BOARD MEMBER	1							0.	0.	0.
CHUCK EHLERS										
PRESIDENT	1			X				0.	0.	0.
PAULA MOSCA GILLARD										
BOARD MEMBER	1							0.	0.	0.
PEGGY GRIFFITH									į	
BOARD MEMBER	1							0.	0.	0.
NOMICA GUILLORY										
BOARD MEMBER	1							0.	0.	0.
DANIEL IEYOUB										
BOARD MEMBER	1							0.	0.	0.
ANGIE MANNING ISTRE										
BOARD MEMBER	1							0.	0.	0.
GRAY LITTLE									į	
BOARD MEMBER	1							0.	0.	0.
JASON_MARTINEZ										
TREASURER	1			Χ				0.	0.	0.
NANCY_SANNER										
BOARD MEMBER	1							0.	0.	0.
MINDY_SCHWARZAUER										
BOARD MEMBER	1							0.	0.	0.
JULIE SPEIGHTS										
BOARD MEMBER	1							0.	0.	0.
BURT TIETJE										
1ST VP	1]	Х				0.	0.	0.
AMANDA WHITE										
BOARD MEMBER	1							0.	0.	0.
BAA		Т	EEAC	107∟	04	/24/09				Form 990 (2008)

Name and Title Average hours per week variety of the week latter apply and the week variety of the week v	n
	0.
1b Total ► 38, 201. 0.	0.
2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ► 0	
Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual 3 3	Х
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual	Х
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If 'Yes,' complete Schedule J for such person 5	Х
Section B. Independent Contractors	
1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization	
(A) Name and business address (B) Description of Services Compensation	<u></u>
2 Total number of independent contractors (including those in 1) who received more than \$100,000 in	

Pa	rt V	III Statement of Re	evenue			,			
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	b b	Federated campaigns Membership dues Fundraising events Related organizations		1a 1b 1c					
	f	Government grants (contributions) all other contributions, gifts, granular amounts not included	grants, and above	1 e	348,661.				
CONT	-	Noncash contribus included in Total. Add lines 1a-1f	ins la-lf	\$_	•	348,661.			***************************************
					Business Code				
PROGRAM SERVICE REVENUE		MEMBERSHIP DUES &	ASSESSME	NTS	711190	575.	575.		
CE R		ARTS CAMP				68,605.	68,605.		
ERVI	c d								
AM S	e								
OGR/	f	All other program service							
PR	g	Total. Add lines 2a-2f			>	69,180.			
		Investment income (incl other similar amounts)	_		>	336.			336.
	4 5	Income from investmen Royalties	t of tax-exe	empt b	ona proceeas				
	•	Noyames	(i) Rea	al	(II) Personal				
	6a	Gross Rents							
		Less rental expenses							
		Rental income or (loss)			L				
	d	Net rental income or (lo			▶				
	7a	Gross amount from sales of assets other than inventory	(i) Secur	ities	(II) Other				
		Less cost or other basis and sales expenses							
		Gain or (loss) Net gain or (loss)			>				
4UE	8a	Gross income from fund (not including \$	draising ev	ents					
OTHER REVEN		of contributions reported	d on line 1	c)					
ER F		See Part IV, line 18		a					
다		Less direct expenses Net income or (loss) fro	m fundrais	b b		40,625.			40,625.
		• •		•	ens	40,023.			40,023.
	эа	Gross income from gam See Part IV, line 19	iing activiti	es a					
		Less direct expenses		b					
	С	Net income or (loss) fro	m gaming	activiti	es >				
	10 a	Gross sales of inventory and allowances	y, less retu	rns a					
		Less, cost of goods sold		b					
	С	Net income or (loss) fro		inven					
	11 2	MISCELLANEOUS	ue	+	Business Code	11,853.	11,853.		
	Ь					11,000.	11,033.		
	ч С	All other revenue							
		Total. Add lines 11a-11d	d d	L,	•	11,853.			
	12	Total Revenue. Add line 10c, and 11e		3, 4, 5,	6d, 7d, 8c, 9c,	470,655.	81,033.	0.	40,961.

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).

	not include amounts reported on lines 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				,
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	38,201.	24,831.	10,314.	3,056.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	42,545.	27,654.	11,487.	3,404.
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	42,343.	27,034.	11,407.	3,404.
9	Other employee benefits.				
10	Payroll taxes	7,005.	4,553.	1,891.	561.
11	Fees for services (non-employees)				
ā	n Management				
t	L egal				
(Accounting	8,469.	5,505.	2,287.	677.
	Lobbying				
	Prof fundraising svcs See Part IV, In 17				
	Investment management fees				
	Other	10,000.	6,500.	2,700.	800.
	Advertising and promotion	30,595.	19,887.	8,261.	2,447.
13	Office expenses	4,249.	2,762.	1,147.	340.
14	Information technology				
15	Royalties	6,144.	2 004	1 (50	401
16 17	Occupancy Travel	447.	3,994. 291.	1,659. 121.	491. 35.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	447.	291.	121.	
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23 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)	7,136.	4,638.	1,927.	571.
a	REGRANTS	261,091.	261,091.		
ŀ	ARTS CAMP	64,165.	64,165.		
•	EQUIPMENT RENTAL & MAINTENANCE	6,701.	4,356.	1,809.	536.
C	I INTERNET & WEBSITE	6,285.		6,285.	
•	MISCELLANEOUS	6,056.	6,056.		
	All other expenses	12,033.	7,440.	4,332.	261.
	Total functional expenses Add lines 1 through 24f	511,122.	443,723.	54,220.	13,179.
26	Joint Costs. Check here ► 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				
BAA					Form 990 (2008)

					(A) Beginning of year		(B) End of yea	r
	1	Cash - non-interest-bearing			57,307.	1	62,	661.
	2	Savings and temporary cash investments		<u> </u>	<u> </u>	2		<u> </u>
	3	Pledges and grants receivable, net				3		
	4	Accounts receivable, net				4		
	5	Receivables from current and former officers, directors or other related parties. Complete Part II of Schedule	s, truste	es, key employees,		5		
	6	Receivables from other disqualified persons (as define		r section 4958(f)(1))				
	_	and persons described in section 4958(c)(3)(B). Comp				6		
Ą	7	Notes and loans receivable, net	icte i u	The or ochedule 2		7		
Ş	8	Inventories for sale or use		ŀ		8		
ASSETS	9	Prepaid expenses and deferred charges		ţ		9		
3		Land, buildings, and equipment cost basis	10 a	24,115.		ļ - -		
		Less accumulated depreciation Complete Part VI of	100	21/1101				
		Schedule D	10 ь	23,697.		10c		418.
	11	Investments — publicly-traded securities	105	20,051.		11	·	
	12	Investments – other securities See Part IV, line 11		ŀ		12		
	13	Investments – program-related. See Part IV, line 11				13		
	14	Intangible assets				14		
	15	Other assets See Part IV, line 11				15		
	16	Total assets. Add lines 1 through 15 (must equal line 3	34)		57,307.	16	63.	079.
	17	Accounts payable and accrued expenses			2,599.	17		201.
	18	Grants payable			24,304.	18		264.
	19	Deferred revenue			2,123.	19		798.
Ļ	20	Tax-exempt bond liabilities	······	20				
LIABILITI	21	Escrow account liability Complete Part IV of Schedule	D :			21		
Ī	22	Payables to current and former officers, directors, trus		ey employees,				
Ì		highest compensated employees, and disqualified per-	sons C	omplete Part II				
į		of Schedule L	1		22			
Ė	23	Secured mortgages and notes payable to unrelated th	ırd part	es		23		
	24	Unsecured notes and loans payable				24		
	25	Other liabilities, Complete Part X of Schedule D		-		25		
	26	Total liabilities. Add lines 17 through 25	11		29,026.	26	75,	<u> 263.</u>
N E T		Organizations that follow SFAS 117, check here	X and	d complete lines		F		
	l	27 through 29 and lines 33 and 34.			20 201		1.0	104
ASSET	27	Unrestricted net assets		-	28,281.	27	-12,	184.
E T S	28	Temporarily restricted net assets		-		28		
Q R	29	Permanently restricted net assets				29		
		Organizations that do not follow SFAS 117, check her	e -	and complete				
FUND	20	lines 30 through 34.				30		
	30	Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, and equip	mont fo	nd		31		
Ā	31			}		32		
Ă	32	Retained earnings, endowment, accumulated income, Total net assets or fund balances.	or othe	riulius	28,281.	33	-12,	184
BALAZCES	33	Total liabilities and net assets/fund balances		ŀ	57,307.	34		079.
	art X		-		37,307.	_ 	05,	073.
	111.7	r mancial Statements and Reporting					Yes	No
1	Δα	counting method used to prepare the Form 990	Cash	X Accrual	Other		1103	110
		· · ·					2a	Х
2a Were the organization's financial statements compiled or reviewed by an independent accountant? b Were the organization's financial statements audited by an independent accountant? 21								
		Yes' to 2a or 2b, does the organization have a committee			for oversight of the au-	dıt.		X
	rev	view, or compilation of its financial statements and selec	ction of	an independent accour	ntant?	,	2c	
3		a result of a federal award, was the organization requir	ed to u	ndergo an audit or aud	its as set forth in the S	ıngle	3-	v
		dit Act and OMB Circular A-133?	ا جال احريم ،	,			3a 3b	X
BA		Yes,' did the organization undergo the required audit or	auditS	•			Form 990	(2008)

SCHEDULE A (Form 990 or 990-EZ)

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.

OMB No 1545 0047 2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Total

ARTS AND HUMANITIES COUNCIL OF SOUTHWEST LOUISIANA, INC.

Employer identification number 72-0860898

Reason for Public Charity Status (All organizations must complete this part.) (see instructions) The organization is not a private foundation because it is. (Please check only one organization.) 1 A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H) A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii) Enter the hospital's 4 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described 7 X in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 8 9 An organization that normally receives (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33-1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions) An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that 11 describes the type of supporting organization and complete lines 11e through 11h. Type III — Functionally integrated d Type III- Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11 g (i) a family member of a person described in (i) above? 11 g (ii) a 35% controlled entity of a person described in (i) or (ii) above? 11 g (iii) Provide the following information about the organizations the organization supports h (i) Name of Supported (in) EIN (iii) Type of organization (iv) Is the (v) Did you notify (vi) Is the (vii) Amount of Support organization in col (i) organized in the US? the organization in col (i) of Organization (described on lines 1.9 above or IRC section organization in col (i) listed in your (see instructions)) your support? governing document? Yes Yes No Yes No No

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I) Section A. Public Support Calendar year (or fiscal year (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total beginning in) Gifts, grants, contributions and membership fees received (Do not include 'unusual grants ') 259,849 275,552 264,329 263,195 349,236 1,412,161. Tax revenues levied for the organization's benefit and either paid to it or expended 0. on its behalf The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge 0. 259,849. 275,552. 264,329. 263,195 349,236. 1,412,161. Total. Add lines 1-3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount 0. shown on line 11, column (f) Public support. Subtract line 5 1,412,161. from line 4 Section B. Total Support Calendar year (or fiscal year (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total beginning in) 275,552 259,849 264,329 263,195 349,236 1,412,161. 7 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form 375 170 813 2,437 336 4,131. similar sources Net income form unrelated business activities, whether or not the business is regularly 0. carried on 10 Other income Do not include gain or loss form the sale of capital assets (Explain in Part IV) SEE PART IV 1,045 29,653 5,822 11,121 52,478 100,119. Total support. Add lines 7 1,516,411. through 10 12 Gross receipts from related activities, etc. (see instructions) 12 0. First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) ▶ [organization, check this box and stop here. Section C. Computation of Public Support Percentage 93.1% 14 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f) 15 Public support percentage for 2007 Schedule A, Part IV-A, line 26f 15 98.3% 16a 33-1/3 support test - 2008. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box ► X and stop here. The organization qualifies as a publicly supported organization b 33-1/3 support test - 2007. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. b 10%-facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization

Schedule A (Form 990 or 990-EZ) 2008

Private foundation. If the organization did not check a box on line, 13, 16a, 16b, 17a, or 17b, check this box and see instructions

18

BAA

ARTS AND HUMANITIES COUNCIL OF Schedule A (Form 990 or 990-EZ) 2008 72-0860898 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I) Section A. Public Support Calendar year (or fiscal yr beginning in)► (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants') Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt 3 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1-5 7a Amounts included on lines 1, 2, 3 received from disqualified persons **b** Amounts included on lines 2 and 3 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 c Add lines 7a and 7b Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal yr beginning in) ► (a) 2004 **(b)** 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included inline 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 Ins 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) 15 % 16 Public support percentage from 2007 Schedule A, Part IV-A, line 27q. 16 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) 17 % 18 18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h % 19a 33-1/3 support 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

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

b 33-1/3 support tests - 2007. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18

more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Schedule /	A (Form 990 or	990-EZ) 2008	ARTS AN	ND HUMANI	TIES CO	DUNCIL	OF	72-0860898	Page 4
Part IV	Suppleme	ntal Informa	ation. Comp	plete this p	art to pro	ovide the	explanation	72-0860898 on required by Part II, lin- information. (see instruc	e 10;
	Part II, line	1/a or 1/b	; or Part II	I, line 12. F	rovide a	iny other	additional	information. (see instruc	tions)
							- -		
								·	
					- -		-		
									
									
									-
- -									
					- -				
				_ _	- -				

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545 0047

Department of the Treasury Internal Revenue Service Attach to Form 990. To be completed by organizations that answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

Name of the organization Employer Identification number ARTS AND HUMANITIES COUNCIL OF 72-0860898 Part I 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 1 Total number at end of year 2 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 funds are the organization's property, subject to the organization's exclusive legal control? Yes No 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?? Part II | Conservation Easements Complete if the organization answered 'Yes' to Form 990, Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure 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. Held at the End of the Year a Total number of conservation easements 2a b Total acreage restricted by conservation easements 2b 2c c Number of conservation easements on a certified historic structure included in (a) 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 the taxable 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 easement it holds? Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year Amount 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)(i) and 170(h)(4)(B)(ii)? 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 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. 1a 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. b 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 the following amounts relating to these items ► S Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X **►** \$ 2 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 a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

Schedule D (Form 990) 2008 · ARTS							72-086			Page 2
Part III Organizations Maintai	ning Colle	ctions	of Art, His	toric	al Treasures, o	or Oth	ner Similar As	ssets	(contır	nued)
Using the organization's accession that apply)	and other re	cords,	check any of th	e follo	wing that are a si	gnificai	nt use of its colle	ction ite	ms (che	ck all
a Public exhibition			d Loan	or exc	change programs					
b Scholarly research			e Other		<u> </u>					
c Preservation for future general	tions									
4 Provide a description of the organi Part XIV	zation's colle	ctions a	and explain how	they	further the organi	zation's	s exempt purpose	e in		
5 During the year, did the organization assets to be sold to raise funds raise.	ther than to b	e main	tained as part o	f the	organization's coll	ection?	_	Yes		No
Part IV Trust, Escrow and Cus IV, line 9, or reported a	stodial Arr an amount	anger on Fo	nents Comp orm 990. Pai	lete 1 X	if organızatıor line 21	ansv	vered 'Yes' to	Form	990, I	Part
1a Is the organization an agent, truste included on Form 990, Part X?					***	er asse	ts not	Yes		 No
b If 'Yes,' explain the arrangement in	n Part XIV an	d comp	lete the followi	no tab	le.				L	
z ii i se, expiani iiie ariangement ii		<i>-</i>		.5				Amoun	ıt	
c Beginning balance							1 c	7 (1110 a)		
d Additions during the year						<u> </u>	1 d			
e Distributions during the year						-	1 e			
f Ending balance							1 f			
2a Did the organization include an am	ount on Form	, aan E	Part V. Juna 212			L	<u> </u>	Yes		No
b If 'Yes,' explain the arrangement in		1 330, 1	art X, mic 21					☐ 163	L	_]110
Part V Endowment Funds Cor		ัดลกเร	ation answe	red '	Vas' to Form	aan E	Part IV June 16	<u> </u>		
Tare V Endowment unus Cor	(a) Current y		(b) Prior yea		(c) Two years bac		(d) Three years back		Four year	
1 a Beginning of year balance	(a) current y	cai [(b) Thor yea		(c) Two years bac	<u> </u>	u) Tillee years back	(e)	roui year	S Dack
b Contributions				······································						
c Investment earnings or losses										
d Grants or scholarships										•
e Other expenditures for facilities and programs			······································	************					•••••	
f Administrative expenses			***************************************							
g End of year balance			·	***********						***************************************
2 Provide the estimated percentage	of the vear e	nd bala	nce held as						******	
a Board designated or guasi-endowr	•		ş							
b Permanent endowment ►			 -							
c Term endowment ►	°									
3a Are there endowment funds not in organization by.	the possessi	on of th	e organization	that a	re held and admin	ustered	for the		Yes	No
(i) unrelated organizations								3a(i)		
(ii) related organizations								3a(ii)		
b If 'Yes' to 3a(ii), are the related org	nanizations li	sted as	required on Sc	hedul	R7			3b		
4 Describe in Part XIV the intended	_							١		<u> </u>
Part VI Investments-Land, Bu		~				X line	10			
Description of investment		(a) Cost	or other basis vestment)	(b	Cost or other basis (other)		Depreciation	(d) l	Book Va	alue
1a Land		•			··			_		
b Buildings			 ,							
c Leasehold improvements										
d Equipment	-		-							
e Other	-				24,115.		23,697.			418.

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Schedule **D** (Form 990) 2008

418.

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

Schedule D (Form 990) 2008 ARTS AND HUMANITI			age 3
Part VII Investments-Other Securities See F	Y	12. N/A	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
Financial derivatives and other financial products			
Closely-held equity interests			
Other			
		· · · · · · · · · · · · · · · · · · ·	
Total (Column (b) should equal Form 990 Part X, col (B) line 12)	<u> </u>	10	
Part VIII Investments—Program Related (See			
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
		,	
		<u> </u>	
-			
Total Column (b)(should equal Form 990, Part X, Col (B) line 13) Part IX Other Assets (See Form 990, Part X,	line 15) N/A		
(a) De	scription	(b) Book value	е
· · · · · · · · · · · · · · · · · · ·	<u> </u>		
	····		
Total. Column (b) Total (should equal Form 990, Part X, col		<u> </u>	
Part X Other Liabilities (See Form 990, Part			
(a) Description of Liability	(b) Amount	4	
Federal Income Taxes			
		-	
		4	
		1	
		_	
	>		
In Part XIV, provide the text of the footnote to the organizat positions under FIN 48	ion's financial statements t	hat reports the organization's liability for uncertain tax	

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Sche	edule D	Form 990) 2008. ARTS AND HUMANITIES COUNCIL OF	2-086	50898	Page 4
		Reconciliation of Change in Net Assets from Form 990 to Financial Statements		N/A	
1		revenue (Form 990, Part VIII,column (A), line 12)			
2	Total	expenses (Form 990, Part IX, column (A), line 25)			
3		ss or (deficit) for the year. Subtract line 2 from line 1			
4		nrealized gains (losses) on investments			
5	Dona	ted services and use of facilities		-	
6	Inves	tment expenses			
7	Prior	period adjustments			
8		(Describe in Part XIV)			
9		adjustments (net). Add lines 4-8			
10		ss or (deficit) for the year per financial statements. Combine lines 3 and 9			
Pai		Reconciliation of Revenue per Audited Financial Statements With Revenue per	Retur	n N/A	
1		revenue, gains, and other support per audited financial statements	1		
2		unts included on line 1 but not on Form 990, Part VIII, line 12			
		nrealized gains on investments			
		ted services and use of facilities 2b	1 1		
		veries of prior year grants 2c	1 1		
		(Describe in Part XIV)	-		
		ines 2a through 2d			
3		ract line 2e from line 1	3		
4		unts included on Form 990, Part VIII, line 12, but not on line 1.			
•		tments expenses not included on Form 990, Part VIII, line 7b			
		r (Describe in Part XIV).	⊣		
		ines 4a and 4b	4c		
		revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)	5		
		Reconciliation of Expenses per Audited Financial Statements With Expenses per Re		N/A	
1		expenses and losses per audited financial statements	1	11/11	
2		unts included on line 1 but not on Form 990, Part IX, line 25	ļ -		
		ted services and use of facilities	f l		
		year adjustments 2b	-		
		es reported on Form 990, Part IX, line 25.	-		
		r (Describe in Part XIV)	-[
		ines 2a through 2d			
3		ract line 2e from line 1	3		
4		unts included on Form 990, Part IX, line 25, but not on line 1:			
₹,		strents expenses not included on Form 990, Part VIII, line 7b			
		r (Describe in Part XIV)	-		
		ines 4a and 4b	- 4c		
		expenses Add lines 3 and 4c (This should equal Form 990, Part I, line 18)	5		
		Supplemental Information		<u>-</u>	
Com	plete t	this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b	lines 1	b and 2b, Part	V,
	- -				
					-

Schedule D	(Form 990) 2008 · Supplemental Information (continued)	Page 5
Part XIV	Supplemental Information (continued)	
		~
		
-		
<u>-</u>		
_		

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545 0047

2008

Department of the Treasury Internal Revenue Service

Must be completed by organizations that answer 'Yes' to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

Open to Public Inspection

Name of the organization ARTS AND HUMANITIES COUNCIL OF					Employer identification number				
SOUTHWEST LOUISIANA, INC.						72-0860898			
Part I Fundraising Activities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 17.									
1	Indicate whether the organization	raised funds thr	ough any	of the follo					
	Mail solicitations				Solicitation of non-	~	•		
	Email solicitations				Solicitation of gove		grants		
	Phone solicitations				Special fundraising	events			
	In-person solicitations								
2a	Did the organization have written of employees listed in Form 990, Par	or oral agreeme t VII) or entity in	nt with any n connecti	y individua on with pro	l (including officers, dire ofessional fundraising s	ectors, t ervices?	rustees or key	Yes X No	
b	olf 'Yes,' list the ten highest paid in compensated at least \$5,000 by the	dividuals or enti ie organization.	ties (fundr Form 990	aisers) pu EZ filers ai	rsuant to agreements u re not required to comp	nder wh	ich the fundrais table	er is to be	
	(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	orı (orı	nount paid to retained by) aiser listed in col (i)	(vi) Amount paid to (or retained by) organization	
	-		Yes	No				<u> </u>	
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			L	-					
	Total			▶				0	
3	List all states in which the organize or licensing.				cit funds or has been n				
									
								-	

Part # Fundraising Events. Complete if the organization answered 'Yes' to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other Events (d) Total Events (Add col (a) through col (c)) SPECIAL PROJEC GOLDEN KEY QUE (event type) (event type) (total number) REVENUE 69,986. 35,940 37,345. 143,271. 1 Gross receipts 2 Less Charitable contributions 69,986 35,940. 37,345. 3 Gross revenue (line 1 minus line 2) 143,271. Cash prizes 5 Non-cash prizes 6 Rent/facility costs EXPENSES 48,787. 27,091. 26,473. 7 Other direct expenses 102,351. 102,351. 8 Direct expense summary Add lines 4- through 7 in column (d) Net income summary Combine lines 3 and 8 in column (d) 40,920. Gaming. Complete if the organization answered 'Yes' to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (a) Bingo (b) Pull tabs/Instant (c) Other gaming (d) Total gaming REVENUE (Add col. (a) through col. (c)) bingo/progressive bingo Gross revenue 2 Cash prizes EXPERSES DIRECT 3 Non-cash prizes 4 Rent/facility costs 5 Other direct expenses Yes 왕 Yes Yes 6 Volunteer labor No No No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Combine lines 1 and 7 in column (d) YES NO 9 Enter the state(s) in which the organization operates gaming activities a is the organization licensed to operate gaming activities in each of these states? 9a b If 'No,' Explain 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 10 a b If 'Yes,' Explain 11 Does the organization operate gaming activities with nonmembers? 11 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

Schedule G (Form 990 or 990-EZ) 2008 ARTS AND HUMANITIES COUNCIL OF	72-0860898	F	² age 3
		YES	NO
13 Indicate the percentage of gaming activity operated in			
a The organization's facility			
b An outside facility	b %		
14 Provide the name and address of the person who prepares the organization's gaming/special events l	ooks and records		
Name	. – – – – –		
Address <u></u>			
15a Does the organization have a contact with a third party from whom the organization receives gaming in b. If 'Yes,' enter the amount of gaming revenue received by the organization \$		15a	
of gaming revenue retained by the third party \$			
c If 'Yes,' enter name and address			
Name ►			
Address			
16 Gaming manager information			
Name •			
Gaming manager compensation ► \$			
Description of services provided			
Director/officer Employee Independent contractor	1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1		7
17 Mandatory distributions			
a Is the organization required under state law to make charitable distributions from the gaming proceeds state gaming license?		17a	
b Enter the amount of distributions required under state law distributed to other exempt organizations or	spent in the		
organization's own exempt activities during the tax year - \$			
BAA TEEA3703L 07/18/08	Schedule G (Form 990	or 990-EZ	2008

SCHEDULE L (Form 990 or 990-EZ)

Transactions with Interested Persons

2008

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

Open to Public

OMB No 1545 0047

Department of the Treasury Internal Revenue Service Inspection Employer identification number Name of the organization ARTS AND HUMANITIES COUNCIL OF SOUTHWEST LOUISIANA, INC. 72-0860898 Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). To be completed by organizations that answered 'Yes' on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. (c) Corrected? (a) Name of disqualified person (b) Description of transaction 1 Yes No 2 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 Loans to and/or From Interested Persons. To be completed by organizations that answered 'Yes' on Form 990. Part IV, line 26 or Form 990-EZ. Part V, line 38a (a) Name of interested person and purpose (b) Loan to or from the organization? (c) Original principal amount (f) Approved by board or committee? (g) Written agreement? (d) Balance due (e) In default? Τo From Yes No Yes No No Yes Ś **Total** Part III Grants or Assistance Benefitting Interested Persons. To be completed by organizations that answered 'Yes' on Form 990, Part IV. line 27. (a) Name of interested person (b) Relationship between interested person and the organization (c) Amount of grant or type of assistance Business Transactions Involving Interested Persons. on Form 990, Part IV, line 28a, 28b, or 28c. To be completed by organizations that answered 'Yes' (e) Sharing of organization's revenues? (b) Relationship between interested person and the organization (a) Name of interested person (c) Amount of transaction \$ (d) Description of transaction Yes No KING BOLTON BOARD MEMBER 16,000. VEHICLE PURCHASE AT CO Χ

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule L (Form 990 or 990-EZ) 2008

SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545 0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Name of the organization ARTS AND HUMANITIES COUNCIL OF SOUTHWEST LOUISIANA, INC.	Employer identification number 72-0860898						
FORM 990, PART VI, LINE 2 - BUSINESS OR FAMILY RELATIONSHIP OF OFFICERS	, DIRECT						
KING AND KAYSIE BOLTON ARE HUSBAND AND WIFE.							
FORM 990, PART VI, LINE 10 - FORM 990 REVIEW PROCESS							
NO REVIEW WAS OR WILL BE CONDUCTED.	· 						
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE							
AVAILABLE ON THE WEBSITE							
	·						
	· 						
	· 						
	·						
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2008

SCHEDULE A, PART IV - SUPPLEMENTAL INFORMATION PAGE 5

ARTS AND HUMANITIES COUNCIL OF SOUTHWEST LOUISIANA, INC.

72-0860898

1/07/10

12.15PM

NATURE AND SOURCE	2008	2007	2006	2005	2004
MISCELLANEOUS TOTA	52,478.	5,822.	29,653.	1,045.	11,121.
	\$ 52,478.	\$ 5,822.	\$ 29,653.	\$ 1,045.	3 11,121.