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SCANNED MAR 0 8 2010,

DAA

Form **990-EZ** 

Department of the Treasury Internal Revenue Service

Short Form 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)

Sponsoning organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form

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

OMB No 1545-1150 2008

Open to Public Inspection

11100			10/01/00	^	1/20/0	0		
Α	For the			dending 9	/30/0			
В								loyer identification number
Ш	Address change use IRS							4444
	Name ch	label or print or		<u>37</u>	-1003507			
	Initial ret	•	Number and street (or P O box, if mail is not delive	ered to street addr	ess)	Room/suite E		phone number
П	Terminal	tion See	420 SOUTH SIXTH STREET				21	7-753-3519
П	Amende	Specific d return Instruc-	City or town, state or country, and ZIP + 4		·	F	Gro	up Exemption
Н		on pending tions.		62701			Nun	nber <b>&gt;</b>
ш			zations and 4947(a)(1) nonexempt charitable tr		ch	G Accounting me	ethod	Cash X Accrual
	• • • • • • • • • • • • • • • • • • • •		mpleted Schedule A (Form 990 or 990-EZ).			Other (specify)		
$\overline{}$	Websit		PRINGFIELDARTSCO.ORG				_	organization is not
j		zation type (check onl		4947(a)(1) or	527	required to att	ach Sch D-PF)	e organization is <b>not</b> nedule B (Form 990,
<u>=</u> _K	Check		ization is not a section 509(a)(3) supporting organization					han \$25.000 A return
•		_	anization chooses to file a return, be sure to file a co		, , , , , , , , , , , , , , , , , , , ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
$\overline{}$			to determine gross receipts, if \$1,000,000 or more, file Fo		Form 990-F	7	<b>▶</b> \$	195,713
<u> </u>	Part I		kpenses, and Changes in Net Assets					
<u>-</u> '	1		nts, and similar amounts received	or runa bar	arroco (c	occ inc monder	1	144,428
			•				2	50,132
	2	J	enue including government fees and contracts				3	50,132
	3	Membership dues a	nd assessments				4	320
	4	Investment income	L. C. and a discretization of the second and	1.			-	320
	5a		sale of assets other than inventory	<u> </u>	5a			
	þ		pasis and sales expenses	L	5b			
æ	C	• •	e of assets other than inventory (Subtract line 5b from line 5			🛌	5c	
חב	6	Special events and acti						
Revenue	а	Gross revenue (not	including \$ of contri	1	. 1			
œ	reported of fine 1)					<del> </del>		1
	b	•	es other than fundraising expenses		6b			
	C	Net income or (loss)	from special events and activities (Subtract line 6b	from line 6a)	1		6c	
	7a	Gross sales of inver	ntory, less returns and allowances	h	7a			
	b	Less cost of goods	sold	<u></u>	7b			
	С		) from sales of inventory (Subtract line 7b from line	7a)			7c	
	8	Other revenue (desc	cribe ► See Statement 1				8	833
_	9	Total revenue. Add	lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	P	PEN	/FD -	9	195,713
	10	Grants and similar a	mounts paid (attach schedule)		-OLIV		10	13,467
	11	Benefits paid to or fo	or members	FE -603		10	11	
ø	12	Salaries, other comp	pensation, and employee benefits	[항] FE	B 162	RS-03(	12	97,930
use P	13	Professional fees an	nd other payments to independent contractors	1"[	* V L	18	13	5,345
Expenses	14	Occupancy, rent, uti	lities, and maintenance	OCI	DEN.	<del></del> 1 <sup>1</sup> 1	14	7,983
ш	15	Printing, publications	s, postage, and shipping		UEN,	<u> </u>	15	10,383
	16	Other expenses (de	scribe ▶ See Statement 2			)	16	107,037
	17		ld lines 10 through 16			<u> </u>	17	242,145
_st	18	Excess or (deficit) for	or the year (Subtract line 17 from line 9)				18	-46,432
Net Assets	19		inces at beginning of year (from line 27, column (A)) (must a	gree with end-of-year	figure reported	on prior year's return)	19	64,076
<u>خ</u>	20		et assets or fund balances (attach explanation)				20	
Ž	21	-	valances at end of year. Combine lines 18 through 2	20		<b>&gt;</b>	21	17,644
_	Part II		eets. If Total assets on line 25, column (B) are \$2		re, file Forn	n 990 instead of For	m 990	-EZ
			e the instructions for Part II )			Beginning of year		(B) End of year
22	Cash s	savings, and investme	•			60,961	22	18,475
)		nd buildings				1,202	+	1,787
-		assets (describe	See Statement 3		)	4,052		4,040
,	Total a	•		· · ·	- '	66,215		24,302
),		iabilities (describe	See Statement 4			2,139		6,658
27		•	es (line 27 of column (B) must agree with line 21)		-′	64,076		17,644
_			k Reduction Act Notice, see the Instructions for	Form 990	-			Form 990-EZ (2008)

Form 990-EZ (2008) SPRINGFIEL	D AREA ARTS COUNCIL	37	-1003507			Page 2
	Service Accomplishments (S	ee the instruction	ons for Part III.		Ext	penses
What is the organization's primary exempt purp					Required	for 501(c)(3)
See Statement 5				6	ind (4) or	ganizations
Describe what was achieved in carrying out the						(a)(1) trusts,
describe the services provided, the number of	persons benefited, or other relevant info	ermation for each pro	ogram title		ptional fo	or others )
28 ART EDUCATION: PROGRAMS DESIG	GNED TO INFORM AND EDUCATE				İ	
STUDENTS THROUGH VARIOUS PRES	ENTATIONS AND SEMINARS.					
						60 544
(Grants \$ ) If	this amount includes foreign grants, che	ck here		28a	<u> </u>	62,511
29 PERFORMANCE ART: PROGRAMS DE	SIGNED TO INTRODUCE THE					
PUBLIC TO VARIOUS FORMS OF AR	T THROUGH PERFORMANCE					
PRESENTATIONS.				l		100 266
<del></del>	this amount includes foreign grants, che	eck here	<u> </u>	29a		128,366
30 GRANTS: CONTRIBUTIONS MADE TO	O VARIOUS ORGANIZATIONS TO					
PROMOTE ARTS IN THE COMMUNITY						
12 467 %			•	m   🔐		13,467
	this amount includes foreign grants, che	eck nere		30a		13,107
31 Other program services (attach schedule)		-1-1				
	this amount includes foreign grants, che	ck nere		31a ▶ 32	<del> </del>	204,344
32 Total program service expenses (add lin		h and awar if not ar	mnoncated (See ti		one for B	
Part IV List of Officers, Directors, T	rustees, and Key Employees. List each	(b) Title and average	(c) Compensation	(d) Contrib	outions to	(e) Expense
(a) Name and	d address	hours per week	(If not paid, enter -0)	employee ben deferred com		account and other allowances
DEBRY MOLLAN VETEL	SPRINGFIELD	ACTING DIREC	enter -0)	deletted with	pensauon	Other allowarious
PENNY WOLLAN-KRIEL		40	36,449		1,640	0
MARK PENCE	IL 62704 SPRINGFIELD	PAST PRES	30,443		1,040	<u>~</u>
MARK PENCE	IL 62704	1	o		٥	0
KIM VILLANUEVA	SPRINGFIELD	PRESIDENT	<u> </u>	<del></del>		
KIM VILLIANOEVA	IL 62704	1	۰ ا		o	0
JILL LEKA	SPRINGFIELD	FUND DEV VP		*1		
OTHE BEACK	IL 62712	1	٥		0	0
RITA CRIM	SPRINGFIELD	TREASURER				
	IL 62703	1	٥	ĺ	٥	0
AARON MCEVOY	SPRINGFIELD	SECRETARY				
	IL 62704	1	0		o	0
DEANNA DAY	SPRINGFIELD	DIRECTOR				
	IL 62704	1	0		0	0
DOUGLAS HOLT	SPRINGFIELD	DIRECTOR				
	IL 62702	1	0		0	0
JUDSON DEVORE	ILLIOPOLIS	DIRECTOR				
	IL 62539	1	0		0	0
MARSHA DEVORE	ILLIOPOLIS	DIRECTOR				
	IL 62539	1	0		0	0
LINDA M. GREEN	SPRINGFIELD	DIRECTOR				
	IL 62701	1	.0		0	0
STEVE SCHOEFFEL	SPRINGFIELD	DIRECTOR				
	IL 62711	1	0		0	0
PENNY TROY	SPRINGFIELD	DIRECTOR				
	IL 62701	1	0	ļ	0	0
		<del> </del>		ļ		
			[			
			ļ	<del> </del>		
			1		1	
		<del> </del>	ļ	<del> </del>		
			1			
		<del></del> -	<b> </b>	<del> </del>		
		i	i contract of the contract of			

	and enter the amount of tax-exempt interest received or accrued during the tax year	► <u>43</u>			
				Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of		[		
	Form 990-EZ		44		<u> </u>
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If				
	"Yes," Form 990 must be completed instead of Form 990-EZ		45		_X_
			Form 99	0-EZ	(2008)

Second St

62704

Phone

217-528-8473

Form 990-EZ (2008)

X Yes

901

May the IRS discuss this return with the preparer shown above? See instructions

S.

Springfield,

**Use Only** 

if self-employed),

address, and ZIP + 4

SCHEDULE Å
(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

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

			SPRINGFIELD	AREA ARTS COUNC	IL					37	- <u>100</u> 350	7	
Pa	art I	Reas	on for Public Charity	Status (All organizations	s must co	omplete	this p	art.) (s	ee ins	struction	ons)		
he	orgar	nization is not a	рпvate foundation because	e it is (Please check only one or	ganızation	)							
1		A church, con	vention of churches, or asso	ociation of churches described in	section 1	70(b)(1)( <i>/</i>	۹)(i).						
2		A school desc	cribed in section 170(b)(1)(A	A)(ii). (Attach Schedule E )									
3		A hospital or a	a cooperative hospital service	e organization described in sec	tion 170(b)	(1)(A)(iii)	. (Attach	Schedu	le H)				
4		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,											
	_	city, and state	;										
5		An organization	on operated for the benefit of	f a college or university owned o	or operated	by a gove	ernmenta	il unit de	scribed	ın			
		section 170(l	b)(1)(A)(iv). (Complete Part	11)									
6		A federal, stat	te, or local government or go	overnmental unit described in se	ction 170(i	b)(1)(A)(v	').						
7	X	An organization	on that normally receives a s	substantial part of its support from	m a govern	mental un	ut or fron	n the ger	neral pu	blic			
		described in s	section 170(b)(1)(A)(vi). (Co	omplete Part II )									
8		A community	trust described in section 17	70(b)(1)(A)(vi). (Complete Part	II )								
9		An organization	on that normally receives (1)	) more than 33 1/3 % of its supp	ort from co	ntribution	s, memb	ership fe	es, and	gross			
		receipts from	activities related to its exemp	pt functions—subject to certain	exceptions,	and (2) n	o more t	han 33 1	1/3 % of	fits			
		support from	gross investment income and	d unrelated business taxable inc	come (less	section 51	l1 tax) fr	om busii	nesses				
		acquired by th	ne organization after June 30	), 1975 See section 509(a)(2).	(Complete	Part III)							
10		An organization	on organized and operated e	exclusively to test for public safe	ty See sec	tion 509(	a)(4). (s	e instru	ctions)				
11		An organization	on organized and operated e	exclusively for the benefit of, to p	erform the	functions	of, or to	carry ou	t the				
		purposes of o	ne or more publicly supporte	ed organizations described in se	ction 509(a	)(1) or se	ction 509	9(a)(2) S	See sec	tion			
		509(a)(3). Ch	eck the box that describes th	ne type of supporting organization	on and com	plete lines	11e thr	ough 11	h				
		a U Type	<b>—</b> ··	c Type III–Function			d		e III–Otl	her			
0		By checking the	his box, I certify that the orga	anization is not controlled directl	y or indirec	tly by one	or more	disqual	fied				
		persons other	than foundation managers a	and other than one or more publ	licly suppor	ted organ	izations	describe	d in sec	ction			
			ection 509(a)(2)										
f		•		rmination from the IRS that it is a	a Type I, Ty	pe II, or T	Type III s	upportin	9				
		•	check this box										Ш
g				ion accepted any gift or contribu	tion from ai	ny of the							
		following pers										Γ	T
			•	introls, either alone or together v	vith persons	s describe	ed in (ii)					Yes	No
		` '		f the supported organization?							11g(i)		-
		• •	member of a person describe								11g(ii)	-	<del>                                     </del>
_			ontrolled entity of a person d								[11g(ni)	)	L
h		Provide the f	ollowing information about th	ne organizations the organization	supports					1			
(i)		e of supported	(ii) EIN	(iii) Type of organization	1 ' '	rganization		ou notify		s the	(VII) Am		
	org	anization		(described on lines 1–9 above or IRC section		sted in your document?	col (I)	nization in of your	organizat		supp	Jort	
				(see instructions))				oort?	U	S?			
					Yes	No	Yes	No	Yes	No			
						<u> </u>							
						ļ		ļ					
				<u> </u>									<u>-</u> _
					-	ļ		ļ			<del></del>		
rota	ıl												

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

shown on line 11, column (f)

(Explain in Part IV)

Total support. Add lines 7 through 10

11

6	Public support. Subtract line 5 from line 4						900,296
Se	ction B. Total Support						
С	alendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4	165,777	195,218	224,115	170,758	144,428	900,296
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	234	611	2,488	747	320	4,400
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
0	Other income Do not include gain or loss from the sale of capital assets						

12 12 Gross receipts from related activities, etc. (see instructions) 276,143 13 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

230

103l

833

1,166

905,862

Sec	ection C. Computation of Public Support Percentage						
14	Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	99.3856 %				
15	Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	99.5059 %				

33 1/3 % support test-2008. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization

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 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

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

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions Schedule A (Form 990 or 990-EZ) 2008

18

Support Schedule for Organizations Described in Section 509(a)(2) Part III (Complete only if you checked the box on line 9 of Part I.)

<u>Sec</u>	tion A. Public Support							
Ca	lendar 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 include any "unusual grants")							
2	Gross receipts from admissions, 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		1					
7a	Amounts included on lines 1, 2, and 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							
	Add lines 7a and 7b		<del> </del>		ļ	<del> </del>	<del></del>	
8	Public support (Subtract line 7c from line 6)							
	tion B. Total Support		I		I	Г		
	lendar year (or fiscal year 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 from similar sources							
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	·					, , , , , , , , , , , , , , , , , , , ,	
С	Add lines 10a and 10b		ļ			<u> </u>		
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,					<u> </u>		
	and 12)		1		l			
14	First five years. If the Form 990 is for the o organization, check this box and stop here	rganization's first,	second, third, fourth	n, or fifth tax year a	as a section 501(c)	(3)	▶ [	
<u>Sec</u>	tion C. Computation of Public Su	pport Percent	tage					
15	Public support percentage for 2008 (line 8,		•	f))		15	%	
16	Public support percentage from 2007 Sched					16	%	
<u>Sec</u>	tion D. Computation of Investme	<u>nt Income Per</u>	centage			<del></del>		
17	Investment income percentage for 2008 (lin	e 10c, column (f) o	divided by line 13, c	olumn (f))		17	%	
18	Investment income percentage from 2007 S	· ·	•			18	%	
19a	33 1/3 % support tests—2008. If the organ							
	17 is not more than 33 1/3 %, check this bo						▶ ∟	
b	33 1/3 % support tests—2007. If the organ						,	
	line 18 is not more than 33 1/3 %, check the	=					▶  -	
20	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 SPRINGFIELD AREA ARTS COUNCIL

37-1003507

Page 4

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

Part II, Line 10 - Other Income Detail

MISCELLANEOUS INCOME

\$

1,166

# Form 4562

Department of the Treasury Internal Revenue Service

Name(s) shown on return

#### **Depreciation and Amortization**

(Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return.

OMB No 1545-0172

Identifying number

Attachment

37-1003507 SPRINGFIELD AREA ARTS COUNCIL Business or activity to which this form relates Indirect Depreciation Part I **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 1 Maximum amount. See the instructions for a higher limit for certain businesses. Total cost of section 179 property placed in service (see instructions) 2 2 800,000 3 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 4 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 5 (a) Description of property (b) Cost (business use only) (c) Elected cost 6 7 7 Listed property Enter the amount from line 29 8 R Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 9 9 Tentative deduction Enter the smaller of line 5 or line 8 10 10 Carryover of disallowed deduction from line 13 of your 2007 Form 4562 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 12 Carryover of disallowed deduction to 2009 Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service 14 during the tax year (see instructions) 15 15 Property subject to section 168(f)(1) election 1,398 Other depreciation (including ACRS) 16 MACRS Depreciation (Do not include listed property.) (See instructions.) Part III Section A 17 17 MACRS deductions for assets placed in service in tax years beginning before 2008 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B-Assets Placed in Service During 2008 Tax Year Using the General Depreciation System (b) Month and (c) Basis for depreciation (d) Recovery (f) Method (g) Depreciation deduction (e) Convention (a) Classification of property year placed in (business/investment use period only-see instructions) sérvice 19a 3-year property b 5-year property 7-year property d 10-year property 15-year property 20-year property S/L 25 yrs g 25-year property MM S/L h Residential rental 27 5 yrs property 27 5 vrs MM S/L MM S/L 39 yrs Nonresidential real property MM S/L Section C-Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System 20a Class life 12 yrs S/L b 12-year S/L MM 40-year 40 yrs Part IV Summary (See instructions.) 21 Listed property Enter amount from line 28 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 1,398 Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instr. For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23 Form **4562** (2008)

For Paperwork Reduction Act Notice, see separate instructions.

# 5540 SPRINGFIELD AREA ARTS COUNCIL 37-1003507

FYE: 9/30/2009

**Federal Statements** 

#### Statement 1 - Form 990-EZ, Part I, Line 8 - Other Revenue

	Description	 Amount
MISCELLANEOUS	INCOME	\$ 833
Total		\$ 833

# Statement 2 - Form 990-EZ, Part I, Line 16 - Other Expenses

Description	Amount
Description  Expenses Travel Insurance ARTISTIC SERVICES COMPUTER MAINTENANCE CONCESSIONS DUES/SUBSCRIPTIONS EQUIPMENT RENTAL OUTSIDE SERVICES OTHER PAYMENTS AND SPLITS POSTAGE PRINTING PROFESSIONAL DEVELOPMENT	Amount \$ 6,041 2,735 48,927 2,809 5,705 2,259 2,221 15,170 4,663 2,484 2,044 3,468 354
PROGRAM SUPPLIES TELEPHONE Total	5,468 2,689 \$ 107,037

### Statement 3 - Form 990-EZ, Part II, Line 24 - Other Assets

Description		Beginning of Year		
Prepaid Expenses and Deferred Charges PURCHASED ART WORK	\$	16 4,036	\$	4 4,036
	<del></del>	4,052		4,040

#### Statement 4 - Form 990-EZ, Part II, Line 26 - Total Liabilities

Description	Beginning of Year	 End of Year
Accounts Payable and Accrued Expenses SHORT TERM LOAN PAYABLE	\$ 2,139	\$ 1,658 5,000
	 2,139	 6,658

2/9/2010 4:00 PM

# 5540 SPRINGFIELD AREA ARTS COUNCIL 37-1003507 Federal Statements

FYE: 9/30/2009

#### Statement 5 - Form 990-EZ, Part III - Organization's Primary Exempt Purpose

#### Description

THE SPRINGFIELD AREA ARTS COUNCIL PROMOTES THE EXISTENCE AND VISIBILITY OF ALL ART FORMS; PROVIDES EDUCATIONAL AND FINANCIAL SUPPORT OF ARTISTS AND ART ORGANIZATIONS; PROMOTES AND UNDERWRITES ARTS IN EDUCATION; SUPPORTS LOCAL, STATE, AND NATIONAL POLICIES WHICH INCREASE PUBLIC APPRECIATION FOR THE ARTS; AND ADVOCATES FOR PARTICIPATION IN THE ARTS BY ALL CITIZENS IN OUR COMMUNITIES. THE MISSION IS TO ENRICH THE COMMUNITY BY PROMOTING AND SUPPORTING ALL ART FORMS AND PROVIDING CREATIVE OPPORTUNITIES TO PARTICIPATE IN AND ENJOY THE ARTS.