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SCANNED JUL 0 & 2010

932001 02-04-10

# **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)

OMB No 1545-0047

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

Open to Public Inspection

A F	or the	2009 calendar year, or tax year beginning and endin	<u>g</u>
Вс	heck if	use IKS	D Employer identification number
	Addres change Name	print or ARTS COUNCIL OF FAIRFAX COUNTY, INC	
느	_change		54-0784570
<u> </u>	_return Termin	See Specific Instruc- 4022 HUMMER ROAD	/Suite E Telephone number 703-642-0862
-	_ated  Amend		G Gross receipts \$ 1,291,152.
<u> </u>	∐return ∏Applica	City of town, state or country, and ZIP + 4	<del> </del>
Ц.	⊥tion pendin	ANNANDADE, VA ZZUUJ Z4UJ	H(a) Is this a group return for affiliates?  Yes X No
			SP H(b) Are all affiliates included? Yes No
		empt status: X 501(c) (3 ) ◀ (insert no.) 4947(a)(1) or 527	If "No," attach a list (see instructions)
_		re: NWW.ARTSFAIRFAX.ORG	H(c) Group exemption number
			Year of formation: 1964 M State of legal domicile: VA
		Summary	Tour or formation.
		Briefly describe the organization's mission or most significant activities: SEE SCH	EDULE O
Activities & Governance	' '	briory 3000 rise organization of most organization desired	
ı.	2	Check this box   if the organization discontinued its operations or disposed of	more than 25% of its net assets
Ver		Number of voting members of the governing body (Part VI, line 1a)	30
ğ		Number of independent voting members of the governing body (Part VI, line 1b)	4 0
S.	٠ ـ ا	Total number of employees (Part V. line 2a)	5 10
jţį	6	Total number of volunteers (estimate if necessary) RECEIVED	6 0
Çį	7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a 16,545.
⋖		Total gross unrelated business revenue from Part VIII, column (C), line 12	7ь 0.
		Control day of Control (Port ) (III line 1b)	Prior Year Current Year
Ð	8	Contributions and oranis iPart viii. line ini i	1,129,273. 1,016,547.
Ĕ	9 1	Program service revenue (Part VIII, line 2g) OGDEN, UT	277,141. 258,060.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	34,784. 16,545.
Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,441,198. 1,291,152.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	599,070. 531,725.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	420,843. 368,938.
Expenses	1	Professional fundraising fees (Part IX, column (A), line 11e)	
×	1	Total fundraising expenses (Part IX, column (D), line 25)  59,250.	
ш		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	424,437. 399,689.
	1	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	1,444,350. 1,300,352.
<u>\</u>	19	Revenue less expenses. Subtract line 18 from line 12	<3,152.> <9,200.
Net Assets or Fund Balances	l		Beginning of Current Year End of Year
Sse Bala	20	Total assets (Part X, line 16)	858,367. 953,885. 334,839. 409,967.
net Piet	21	Total liabilities (Part X, line 26)	523,528. 543,918.
뚬	<u>  22</u> art II	Net assets or fund balances Subtract line 21 from line 20 Signature Block	323,320. 343,910.
	21 ( 11	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and states	ments, and to the best of my knowledge and belief, it is true, correct,
		and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any known	wledge
Sig	n .	Dirde S. Sulline	5/14/10
Her		Signature of Officer	Date
1101	•	LINDA SULLIVAN, PRESIDENT/CEO	•
		Type or print name and title	
		Preparer's Date	Check If Preparer's identifying number (see instructions)
Paid		signature 5/13/16	Self- employed ► [ (see instructions)
	Darer's	Firm's name (or GAFFEY & ASSOCIATES, PLC	EIN ▶
use	Only	self-employed). 12355 SUNRISE VALLEY DRIVE. SUITE	305
		address, and ZIP + 4 RESTON, VA 20191	Phone no. ► (703) 657-6040
May	the IF	RS discuss this return with the preparer shown above? (see instructions)	X Yes No
	01 02-0		te instructions. Form <b>990</b> (2009)

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

932002 02-04-10

			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_	_X_	
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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		<u>X</u>
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 similar funds or 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_		X
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_		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III .	8		X
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, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10_		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable	11	X	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI.		ļ	
•	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
_	Part X, line 16? If "Yes," complete Schedule D, Part IX.  Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
•	•			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
40	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
12	Schedule D, Parts XI, XII, and XIII.	12	х	
124	Was the organization included in consolidated, independent audited financial statements for the tax year?  Yes No			
IZA	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
-	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X
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		X
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		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		_X_
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	ļ	X
19	Did the organization report more than \$15,000 of gross income from gaming activities 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	000	X
		Form	<b>990</b>	(2009)

			res	NO
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States 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, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J .	23		X
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 lines 24b through 24d and complete			
	Schedule K If "No", go to line 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		
	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	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
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, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			İ
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			
	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
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		X
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		_X
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		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable 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
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	1		
	Note, All Form 990 filers are required to complete Schedule O.	38	X	
		F	gan /	2000

O09) ARTS COUNCIL OF FAIRFAX COUNTY, INC Statements Regarding Other IRS Filings and Tax Compliance

18 Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns Enter 0- if not applicable 15 to				Yes	No
be Enter the number of Forms W2G included in line 1a. Enter-0-if not applicable   1b.   0   0   0   0   0   0   0   0   0	1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  2 Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, filled for the calendar year ending with or within the year covered by this return  10 If all least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-rise this return. (see instructions)  3 Did the organization have unreleted business gross income of \$1,000 or more during the year covered by this return?  3 At any time during the calendar year, did the organization file foreign country, Even and the organization in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other authority over, a financial Accounts.  5 If "Yes," other the name of the foreign country, Even See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.  5 Was the organization a party to a prohibited tax shelter transaction?  5 Dos the organization have annual gross receipts that are normally greater than \$100,000, and did the organization shall are accountable?  5 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  5 Did the organization shall may receive deductible contributions under section 170(c).  6 Did the organization shall may receive deductible contributions under section 170(c).  7 Did the organization shall may receive deductible contributions under section 170(c).  8 Did the organization shall may receive deductible contributions under section 170(c).  9 Did the organization shall may be experted the space of the population of the population of the population of the population of the populatio		— · · · · · · · · · · · · · · · · · · ·			
(agambing) wennings to prate winners?  2	_	Enter the hamber of come we can blocked in time to a street of inter-dependence.			
2a Either the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements.    10	C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
filed for the calendar year ending with or within the year covered by this returm.  b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines is and 2a is greater than 250, you may be required to e-file this return. (see instructions)  3a bit the organization have unrelated business gross is some of \$1,000 or more during the year covered by this return?  b If Yes, it has a filed a Form 990-T for this year? If Yio, "provide an explanation in Schedule 0.  b If Yes," enter the name of the foreign country, text has a bank account, or other financial accountry?  b If Yes," enter the name of the foreign country, when as a bank account, or other financial accountry?  b If Yes, the instructions for exceptions and filing requirements for Form TD F 90.22. I, Report of Foreign Bank and Financial Accounts.  5a Was the organization aparty to a prohibited tax shelter transaction?  c If Yes, to line 5 a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5c United the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?  5c United the organization include with very solicitation an express statement that such contributions or gifts were not tax deductible?  5c United the organization include with very solicitation an express statement that such contributions or gifts were not tax deductible?  6c United the organization notify the donor of the value of the goods or services provided?  6d If Yes, "indicate the number of Forms 8282 filed during the year receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7c X  7d If Yes, "ondicate the number of Forms 8282 filed during the year receive any funds, directly or indirectly, to pay premiums on a perso		(gambling) winnings to prize winners?	1c		
b If a least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-fife this return, (see instructions)  3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  5a Hay the 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; or a signature or other authority over, a financial account in a foreign country, lower as a bank account, securities account, or other financial account; or a signature or other authority over, a financial account in a foreign country. It is seen than a financial account in a 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?  5b Was the organization aptry to a prohibited tax shelter transaction?  6c If "Yes," is line 5a or 5b, did the organization file Form 88861, Disclosure by Tax Exempt Entity Regarding Prohibited Tax Shelter Transaction?  6c Dess the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?  7c Organizations that may receive deductible contributions under section 170(c).  8d by the organization state of the payor?  8d by the organization state of the payor?  9d by the organization state the number of Forms 8282 filed during the year of the goods or services provided?  9d by the organization of qualified intellectual property, did the organization file a form 1098 C as required?  9d For all contributions of cars, boats, arplaines, and other vehicles, did the organization file a form 1098 C as required?  9d Sponsoring organization, or a donor advi	2a				
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 30. Did the organization have unrelated business gross is some of \$1,000 or more during the year covered by this return? 40. If Yes, "but as filed a Form 990-T for this year? If 'No, "provide an explanation in Schedule 0 41. All 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. See the instructions for exceptions and filing requirements for Form TD F 90-22. 1. Report of Foreign Bank and Financial Accounts. 52. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 53. Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 54. Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 55. Was the organization are on tax deductible? 56. If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax Exempt Entity Regarding Prohibited Tax Shelter Transaction? 56. If "Yes," to line 5a or 5b, did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 56. If "Yes," to line 5a or 5b, did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible contributions under section 170(c). 57. If Yes, "to line 5a or 5b, did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible contributions under section 170(c). 58. Did the organization shalt may receive deductible contributions under section 170(c). 59. If "Yes," indicate the number of Forms 8282 filed during the year. 50. If Yes, "Indicate the number of Forms 8282 filed during the year. 51. If Yes are all the organization, during the year, receive any funds, directly or indire		, , ,			
3a Dit the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  b if "Yes," has it filled a Form 990 T for this year? If "No," provide an explanation in Schedule O  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)?  b if "Yes," there 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.  6a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  c if "Yes," in line Sa or 5b, did the organization file form 8886 T, Disclosure by Tax Exempt Entity Regarding Prohibited Tax Shelter Transaction?  6a Does the organization include with every solicitation an express statement that such contributions origits were not tax deductible?  6b If "Yes," did the organization include with every solicitation an express statement that such contributions or grifts were not tax deductible?  6b If "Yes," did the organization notify the donor of the value of the goods or servoes provided?  6c Did the organization sthat may receive deductible contributions under section 170(c).  a provided to the payor?  7c Did the organization of the value of the goods or servoes provided?  6d If "Yes," indicate the number of Forms 8282 filed during the year  6 Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7d If "Yes," indicate the number of Forms 8282 filed during the year  6 Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7d If "Yes," indicate the number of Forms 8282 filed duri	b		2b	X	
b if "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 43 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?) 4			_		
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)?  See the instructions for exceptions and filing requirements for Form TD F 90:22 1, Report of Foreign Bank and Financial Accounts.  Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5a					<u> X</u>
the financial account in a foreign country (such as a bank account, securities account, or other financial account??  b   f "Yes," either 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.  b   Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  c   f "Yes," to line 5 ao r 5b, did the organization file Form 8885T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?  c   f "Yes," to line 5 ao r 5b, did the organization file Form 8885T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?  c   f "Yes," to line 5 ao r 5b, did the organization file Form 8886T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?  c   f "Yes," to line 5 ao r 5b, did the organization file Form 8886T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?  c   f "Yes," did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions and prohibited tax shelter transaction?  c   f "Yes," did the organization include with every solicitation an express statement that such contributions or grifs were not tax deductible?  do the organization state may receive deductible contributions under section 170(c).  a   Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  b   f "Yes," indicate the number of Forms 8282 filed during the year.  c   Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  f   Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  f   Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p			3b		
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?  5 bid any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  6 if "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?  6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?  7 bif "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  8 bif "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 organizations that may receive deductible contributions under section 170(c).  8 bif "Yes," did the organization notify the donor of the value of the goods or services provided?  7 bif "Yes," did the organization notify the donor of the value of the goods or services provided?  7 bif "Yes," indicate the number of Forms 8282 filed during the year  7 bif the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  8 bif the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  9 bif the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  9 bif the organization makinaling donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds and	4a				v
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benefit contract?  f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?  h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?  8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?  9 Sponsoring organizations maintaining donor advised funds.  a Did the organization make any taxable distributions under section 4966?  b Did the organization make a distribution to a donor, donor advisor, or related person?  9 Section 501(c)(7) organizations. Enter.  a Initiation fees and capital contributions included on Part VIII, line 12  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  11a  Section 501(c)(12) organizations. Enter.  a Gross income from members or shareholders  Gross income from members or shareholders  Corss income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)  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  12b					
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a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b  Section 501(c)(12) organizations. Enter.  a Gross income from 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)  11a  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  12a	b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
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b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		· · · · · · · · · · · · · · · · · · ·		-	
			12a	ļ	<del> </del>
	b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b	Ecre	990	(2000)

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions.

Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body  1a 30			
b	Enter the number of voting members that are independent  1b 0			
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?	2		<u> </u>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			77
	of officers, directors or trustees, or key employees to a management company or other person?	3		<u>X</u>
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		<u>X</u>
6	Does the organization have members or stockholders?	6		X
7a	·			v
	governing body?	7a		$\frac{x}{x}$
	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b_		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year		. İ	
	by the following:			
_	The governing body?	8a_	X	
b		8b		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	_		v
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
ec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		V	
	Does the assessment as have level chapters, broughes, or offiliator?	10a	Yes	No X
	Does the organization have local chapters, branches, or affiliates?  If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,	iva		
D	and branches to ensure their operations are consistent with those of the organization?	10b		
	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	111	х	
11 14 A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	<b></b> -	-2.2	
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	x	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise	120		
	to conflicts?	12b	x	
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	x	
13	Does the organization have a written whistleblower policy?	13	Х	
14	Does the organization have a written document retention and destruction policy?	14	X	
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		Х
	Other officers or key employees of the organization	15b		Х
_	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
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		X
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		
Эес	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►VA		_	
18	Section 6104 requires an organization to make its Forms 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.			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	nd fina	ncial	
	statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	tion: 🕨	<b>-</b>	
	CAROLYN MCGEE - 703-383-5150			
	10615 JUDICIAL DRIVE, SUITE 402,, FAIRFAX, VA 22030	_	000	
		Form	990 (	2009)

932006 02-04-10

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year 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. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees. See instructions for definition of "key employee."
- 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, 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 (A)	(B)	y cu	11011	(C		, une	,0101	(D)	(E)	(F)
Name and Title	Average	Position						Reportable	Reportable	Estimated
	hours	(check		allt	all that apply)		ly)	compensation	compensation from related	amount of other
	per week	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
LINDA SULLIVAN		-	<u> </u>				<u> </u>			
PRESIDENT/CEO	40.00	<u> </u>		X				22,500.	0.	0
		<del> </del>								
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Form **990** (2009)

Form 990 (2009)

\$100,000 in compensation from the organization

	990 (			OF FAIRF	AX COUNTY,	INC	54-0/84	5/U Page 9
Pai	rt VIII	Statement of Rever	nue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	b c d e f	Membership dues Fundraising events Related organizations Government grants (contribut All other contributions, gifts, gran similar amounts not included abo Noncash contributions included in lines	ts, and ve 1f	25,138. 873,203. 118,206.				
	2 a b	INTERNATIONAL C		Business Code 711300	1,016,547. 258,060.	258,060.		
Program Service Revenue	c d e							
	f g	All other program service reve Total. Add lines 2a-2f	enue		258,060.			
	3	Investment income (including other similar amounts) Income from investment of ta		•	16,545.		16,545.	
	5 6 a	Royalties  Gross Rents	(ı) Real	(ii) Personal				
	b	Less: rental expenses Rental income or (loss) Net rental income or (loss)						
	7 a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	c d	and sales expenses Gain or (loss) Net gain or (loss)		<b>•</b>				
Other Revenue	8 a	Gross income from fundraisin including \$ contributions reported on line	of 1c). See					
Other	С	Part IV, line 18 Less: direct expenses Net income or (loss) from func						
	b	Gross income from gaming ac Part IV, line 19 Less direct expenses Net income or (loss) from gam	a t					
	10 a	Gross sales of inventory, less and allowances Less. cost of goods sold	-					
		Net income or (loss) from sale	s of inventory	<b>•</b>				
}	11 a	Miscellaneous Revenu		Business Code				
ļ	b							
	c d	All other revenue			_			
02000	12	Total. Add lines 11a-11d  Total revenue See instructions.			1,291,152.	258,060.	16,545.	0.
93200	и							Form <b>990</b> (2009)

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. anizations must complete column (A) but are not required to complete columns (B). (C). and (D).

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D</b> ) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	531,725.	531,725.		<u> </u>
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				<del></del>
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				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				50 654
7	Other salaries and wages	323,485.	177,239.	93,575.	52,671.
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits	21,588.		21,588.	
10	Payroll taxes	23,865.	14,936.	4,900.	4,029.
11	Fees for services (non-employees):				
а	Management				
b	Legal				
C	Accounting	7,898.		7,898.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				<del></del>
g	Other				
12	Advertising and promotion	3,681.	3,156.	525.	0 510
13	Office expenses	89,845.	66,444.	20,852.	2,549
14	Information technology	6,518.	29.	6,489.	
15	Royalties _	54 535		F1 F2F	
16	Occupancy .	51,737.	0 216	51,737.	
17	Travel	8,794.	8,316.	478.	<del></del>
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0.555	1 246	1 021	
19	Conferences, conventions, and meetings	2,577.	1,346.	1,231.	
20	Interest	217.	3.	213.	1
21	Payments to affiliates	2 545		2 545	· ·
22	Depreciation, depletion, and amortization	3,745.		3,745.	
23	Insurance				<del></del>
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	SUBCONTRACTORS	143,291.	105,616.	37,675.	
b	A D T C TO A D A TO CONTROL	38,577.	38,577.		
С	CATA	15,596.	15,596.		
d	AWARDS	11,648.	11,648.		
е	DOLLED TO COC	6,198.		6,198.	
f	All other expenses	9,367.	633.	8,734.	
25	Total functional expenses. Add lines 1 through 24f	1,300,352.	975,264.	265,838.	59,250
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				·-···

Form 9		2009) ARTS COUNCIL OF FAIRFAX COUNCIL OF AIRFAX COUNCIL OF FAIRFAX COU	NTY, INC	54-(	0784570 Page <b>11</b>
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	119,858	. 1	822,964.
İ	2	Savings and temporary cash investments	500,000	. 2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	40,830	. 4	19,505.
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II			
ĺ		of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete			
1		Part II of Schedule L		6	
ži	7	Notes and loans receivable, net		7	· · · · · · · · · · · · · · · · · · ·
Assets	8	Inventories for sale or use		8	
⋖	9	Prepaid expenses and deferred charges	4,286	9	4,331.
-	10a	Land, buildings, and equipment. cost or other			
ŀ		basis. Complete Part VI of Schedule D 10a 32,69			40.400
ĺ	b	Less: accumulated depreciation 10b 20,1			12,480.
- 1	11	Investments - publicly traded securities	177,168	1	94,605
- 1	12	Investments - other securities. See Part IV, line 11	· · · · · · · · · · · · · · · · · · ·	12	<del></del>
	13	Investments · program-related See Part IV, line 11		13	
	14	intangible assets		14	
	15	Other assets See Part IV, line 11	050 267	15	052 005
	16	Total assets. Add lines 1 through 15 (must equal line 34)	858,367 178,835		953,885
	17	Accounts payable and accrued expenses	178,835		293,088
	18	Grants payable	156,004	18	116,879.
	19	Deferred revenue	130,004	7 7	110,0/9
- 1	20	Tax-exempt bond liabilities		20	
les	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
≣	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part			
Liabilities		of Schedule L	"	22	
	23	Secured mortgages and notes payable to unrelated third parties		23	<del> </del>
	23 24	Unsecured notes and loans payable to unrelated third parties		24	
	2 <del>4</del> 25	Other liabilities Complete Part X of Schedule D		25	
	26 26	Total liabilities. Add lines 17 through 25	334,839		409,967.
	20_	Organizations that follow SFAS 117, check here   X and comple		1	100,750
s		lines 27 through 29, and lines 33 and 34.			
ည္	27	Unrestricted net assets	349,320	. 27	337,369.
alai	28	Temporarily restricted net assets	174,208		206,549
e	29	Permanently restricted net assets		29	
et Assets or Fund Balances		Organizations that do not follow SFAS 117, check here	" " " " " " " " " " " " " " " " " " " "		
<u>ہ</u>		complete lines 30 through 34.			
its	30	Capital stock or trust principal, or current funds		30	
SSE	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
#	32	Retained earnings, endowment, accumulated income, or other funds		32	
١٣			E22 E20	00	E / 2 010

953,885. Form **990** (2009)

543,918.

33

Total net assets or fund balances

Total liabilities and net assets/fund balances

523,528. 858,367.

۲a	rt XI   Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990.   Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			ł
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Х
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
С	If "Yes" to line 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		X
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a	-   - 3		
	consolidated basis, separate basis, or both	-		
	X Separate basis Consolidated basis Both consolidated and separate basis			
За	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		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		ı

Form **990** (2009)

#### **SCHEDULE A**

(Form 990 or 990-EZ)

## **Public Charity Status and Public Support**

2009

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Name of the organization

ARTS COUNCIL OF FAIRFAX COUNTY INC

Employer identification number

			UNCIL OF FAI						54	<u>1-0784570</u>
Part I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	e this part	) See inst	ructions		
he orgar	nization is not a	private foundation	because it is: (For lines 1	through 1	1, check o	only one b	ox)			
1 🔲	A church, cor	nvention of churches	s, or association of churc	ches desci	nbed in se	ction 170	(b)(1)(A)(i)			
2 🔲	A school des	cribed in section 17	0(b)(1)(A)(ii). (Attach Scl	hedule E.)						
з 🔲			tal service organization of		n section	170(b)(1)(	A)(iii).			
4	A medical res	search organization of	perated in conjunction	with a hos	pital descr	ibed in se	ction 170	(b)(1)(A)(ii	). Enter th	ne hospital's name,
. —	city, and stat		,							
5 🗀	•		benefit of a college or ur	niversity ov	vned or op	erated by	a governr	nental uni	describe	ed in
• —	-	, (b)(1)(A)(iv). (Comple		•		·	_			
6 🔲			ent or governmental unit	t described	ın sectio	n 170(b)(1	)(A)(v).			
7 X		-	eives a substantial part o					r from the	general p	public described in
-	-	b)(1)(A)(vi). (Comple		• •		~				
в 🗀	•		ection 170(b)(1)(A)(vi). (	(Complete	Part II.)					
9 🗔	-		eives: (1) more than 33 1			om contri	butions, m	embershij	o fees, an	d gross receipts from
			nctions - subject to certa							
			axable income (less sect							
		509(a)(2). (Complete			-		•			
10 🗀			perated exclusively to tes	st for publ	c safety. S	ee sectio	n 509(a)(4	<b>l)</b> .		
11 🔲			perated exclusively for th						y out the p	purposes of one or
	-	-	tions described in section							
	describes the	type of supporting	organization and comple	ete lines 1	le through	11h				
	a Type I	l <b>b</b> □	Type II o	; 🗀 Тур	e III - Func	tionally int	egrated		d 🗀	Type III - Other
е 🗀	By checking	this box, I certify tha	t the organization is not	controlled	directly or	r indirectly	by one or	more disc	qualified p	ersons other than
	foundation m	nanagers and other t	han one or more publicly	y supporte	d organiza	tions desc	cribed in s	ection 509	9(a)(1) or s	section 509(a)(2).
f	If the organiz	ation received a writ	ten determination from t	the IRS tha	at it is a Ty	ре I, Туре	II, or Type	· III		
	supporting o	rganization, check th	nis box							
g			organization accepted ar							
	(i) A perso	n who directly or ind	rectly controls, either al	one or tog	ether with	persons d	lescribed i	n (II) and (	ııı) below,	Yes No
	the gove	erning body of the si	upported organization?							11g(i)
	(ii) A family	member of a persor	n described in (i) above?	•						11g(ii)
	(iii) A 35% (	controlled entity of a	person described in (i) of	or (II) above	∍?					11g(iii)
h	Provide the f	ollowing information	about the supported or	ganızatıon	(s).					
		<del>,</del>	1000 T		_			1	<del></del>	
(i) Nam	e of supported	(ii) EIN	(iii) Type of organization		rganization			(vi) Is organization	on in col.	(vii) Amount of
org	ganization		(described on lines 1-9		sted in your document?			(i) organız U.S	ed in the	support
			above or IRC section				· · · · · · · · · · · · · · · · · · ·		_	
			(see instructions))	Yes	No	Yes	No	Yes	No	<del></del>
	<u> </u>									<del></del>
				ļ						· · · · · · · · · · · · · · · · · · ·
				-						
					,					
Total	_	1	<u> </u>		L	L	l	<u> </u>		

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

Schedule A (Form 990 or 990-EZ) 2009

932021 02-08-10

Schedule A (Form 990 or 990-EZ) 2009 ARTS COUNCIL OF FAIRFAX COUNTY 54-0784570 Page 2 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 beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not 836,808. 531,764. 1516902. 982,845. 873,203. 4741522. include any "unusual grants ") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 836,808, 531,764, 1516902, 982,845, 873,203, 4741522, 4 Total. Add lines 1 through 3 5 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) 4741522. 6 Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008(e) 2009 (f) Total 836,808. 531,764. 1516902. 982,845. 873,203. 4741522. 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties 18,397. 38,037. 34.874. 16,545. 109,131. 1,278. and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 4850653. 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 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 Section C. Computation of Public Support Percentage 97.75 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 15 % 15 Public support percentage from 2008 Schedule A, Part II, line 14 16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and  $\triangleright X$ stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2008. 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 - 2009. 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 - 2008. 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 18 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) 2009

Colondor waar (or ficeal year beginning in)	(a) 2005	(F) 2006	(6) 2007	(d) 2008	(6) 2000	(f) Total
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(4) 2006	(e) 2009	(I) IOIal
1 Gifts, grants, contributions, and			1			
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						
· · ·		1				
6 Total. Add lines 1 through 5		<del> </del>	<del>                                     </del>			
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 \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b				<u> </u>		
8 Public support (Subtract line 7c from line 6) Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(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>b</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 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)		+		1		
14 First five years. If the Form 990 is for t	he organization	's first, second, the	rd, fourth, or fifth t	ax vear as a secti	on 501(c)(3) organiz	ation.
check this box and stop here	5. 94.1124.1011		,			, ▶ſ
Section C. Computation of Public	Support Po	ercentage				
5 Public support percentage for 2009 (lir			column (fl)		15	
16 Public support percentage for 2009 (iii					16	
Section D. Computation of Invest			 }		1101	
· · · · · · · · · · · · · · · · · · ·					17	
17 Investment income percentage for 200			rie 13, column (i))			
18 Investment income percentage from 20			on line 14 and lin	0 15 10 mars the=	18   33 1/3% and line 1	7 is not
19a 33 1/3% support tests - 2009. If the d						izisnot ⊾∫
more than 33 1/3%, check this box and	-					<b>≯</b> [
b 33 1/3% support tests - 2008. If the c	_					ano ⊾ ſ
line 18 is not more than 33 1/3%, chec		•				<b>▶</b> [
20 Private foundation. If the organization	ala not check	a pox on line 14, 19	a, or 19d, check t	nis box and see ii	nstructions	▶.

#### Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Financial Statements**

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

➤ Attach to Form 990. ➤ See separate instructions.

2009
Open to Public Inspection

Name of the organization

ARTS COUNCIL OF FAIRFAX COUNTY, INC

Employer identification number

54-0784570

Par		d Funds or Other Similar Fund	s 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)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor adv	sed funds
•	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a		•
•	for charitable purposes and not for the benefit of the donor o	• •	•
	impermissible private benefit?	, , , , , , , , , , , , , , , , , , , ,	Yes No
Pai		anization answered "Yes" to Form 990,	<del>~</del>
1	Purpose(s) of conservation easements held by the organization		
•	Preservation of land for public use (e.g., recreation or p		istorically important land area
	Protection of natural habitat	· —	rtified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ed conservation contribution in the form	n of a conservation easement on the last
_	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic stri	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	, ,	2d
3	Number of conservation easements modified, transferred, rel		ne organization during the tax
•	year >	,	
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per		•
	violations, and enforcement of the conservation easements if		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements	during the year ▶
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above		
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservati	on easements in its revenue and expens	se statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describe	s the organization's accounting for
	conservation easements.		
Pa	rt III Organizations Maintaining Collections of	f 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, no	t to report in its revenue statement and	balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of p	ublic service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these i	tems.	
b	If the organization elected, as permitted under SFAS 116, to	report in its revenue statement and bala	ince sheet works of art, historical treasures,
	or other similar assets held for public exhibition, education, o	r research in furtherance of public service	ce, provide the following amounts relating to
	these items.		
	(i) Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X		<b>&gt;</b> \$
2	If the organization received or held works of art, historical trea	asures, or other similar assets for financ	
	the following amounts required to be reported under SFAS 1	16 relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
b	Assets included in Form 990, Part X		<b>&gt;</b> \$

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

Schedule D (Form 990) 2009

Sche		UNCIL OF F						-078457		e <b>2</b>
Pai	t III Organizations Maintaining C	ollections of A	rt, Hist	<u>orical T</u>	reasures	, or Oth	<u>er Similar</u>	Assets (con	linued)	
3	Using the organization's acquisition, accessi	on, and other record	is, check	any of the	e following	that are a s	significant use	of its collection	n items	
	(check all that apply).									
а	Public exhibition	c	ו 🗀 נ	oan or ex	change pro	grams				
b	Scholarly research	e	. 🗆	Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how the	ey further	the organiz	ation's exe	mpt purpose	in Part XIV.		
5	During the year, did the organization solicit o	r receive donations	of art, his	torical tre	asures, or o	other simila	r assets			
	to be sold to raise funds rather than to be ma							Yes		No_
Pai	t IV Escrow and Custodial Arran	gements. Compl	ete if orga	anization a	answered "	Yes" to Fo	m 990, Part I	V, line 9, or		
	reported an amount on Form 990, Pa	t X, line 21.								
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for c	ontributio	ns or other	assets no	t included			
	on Form 990, Part X?							Yes		No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing to	able:						
								Amour	nt	
С	Beginning balance						1c			
d	Additions during the year			•			1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on F	orm 990, Part X, line	21?				<u> </u>	Yes		No
b	If "Yes," explain the arrangement in Part XIV.									
	t V Endowment Funds. Complete		swered '	"Yes" to F	orm 990, P	art IV, line	10			
		(a) Current year	(b) Pr	nor year	(c) Two	years back	(d) Three year	rs back (e) Fou	r years ba	ack
1a	Beginning of year balance							.		
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the year	r end balance held a	as:		<del></del> '		<del></del>			
a	Board designated or quasi-endowment		%							
b	Permanent endowment ▶	%	<del></del> `							
-		<u> </u>								
3a	Are there endowment funds not in the posse	ession of the organiz	ation tha	t are held	and admin	stered for	the organizat	ion		
ou	by.						o. <b>3.</b>		Yes I	No
	(i) unrelated organizations							3a(i)		<del></del>
	(ii) related organizations							3a(ii)		
h	If "Yes" to 3a(ii), are the related organization:	s listed as required o	n Sched	ule R?				3b		
4	Describe in Part XIV the intended uses of the	•							<del></del>	
	rt VI Investments - Land, Building			**	0. Part X. li	ne 10				
	Description of investment	(a) Cost or o			st or other		ccumulated	(d) Boo	ok value	
	2000p.10 0	basis (investi			s (other)		preciation	(,		
	Land	<u> </u>			<del></del>					_
	Buildings				• •					_
	Leasehold improvements									
	Equipment				32,657	7.	20,17	7. 1	2,48	<u>0.</u>
	Other				,,					
	I. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, colum	nn (B), line	10(c))		)	1	2,48	0.

Schedule D (Form 990) 2009

Schedule D (Form 990) 2009 AI	RTS COUNCI	L OF FAIRE	AX COUNTY,	INC	54-0784570	Page 3
Part VII Investments - Other		e Form 990, Part X, I	ine 12.			
(a) Description of security or (including name of secu		(b) Book value			ethod of valuation. nd-of-year market value	
Financial derivatives						
Closely-held equity interests						
Other						
<del></del>					<del> </del>	
<del></del>				-	=======================================	
	<del></del>					
Total. (Col (b) must equal Form 990, Part X	col (B) line 12.)					
Part VIII Investments - Prog	am Related. S	ee Form 990, Part X,	line 13			
(a) Description of investme	nt type	(b) Book value			ethod of valuation	
				Cost or er	nd-of-year market value	
		<u> </u>			<del></del> -	
		-				
Total. (Col (b) must equal Form 990, Part X	col (B) line 13.)					
Part IX Other Assets. See Fo						
	(a)	Description			(b) Book val	ue
<del></del>	<del> </del>	<del></del>				•
				<del></del>		
	·	····· — ·-				
				<u></u>		
Total. (Column (b) must equal Form 99					<b>&gt;</b>	
Part X Other Liabilities. Ser	Form 990, Part X, on of liability	line 25.	(h) Amount			
<del></del>	on or liability		(b) Amount			
Federal income taxes						
Total. (Column (b) must equal Form 99						<u></u>
2. FIN 48 Footnote In Part XIV, provide	e the text of the foo	otnote to the organiza	ation's financial state	ements that r	eports the organization's liability	y tor
uncertain tax positions under FIN 48	<del></del>			-	Cabadula D /Farra 00	20) 2000
02-01-10					Schedule D (Form 99	

	dule D (Form 990) 2009 ARTS COUNCIL OF FAIRFAX CO	UNTY	, INC			0784570	Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to	Audit	ed Finan	cial State	emen		
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1		1,291	
2	Total expenses (Form 990, Part IX, column (A), line 25)			2		1,300	
3	Excess or (deficit) for the year. Subtract line 2 from line 1			3			<u>,200.</u> :
4	Net unrealized gains (losses) on investments .			4		15	<u>,748.</u>
5	Donated services and use of facilities			5			
6	Investment expenses			6			
7	Prior period adjustments .			7			
8	Other (Describe in Part XIV.)			8		13	,842.
9	Total adjustments (net) Add lines 4 through 8			9		29	,590.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 art XII   Reconciliation of Revenue per Audited Financial Statements.	nd 9	ith Dayo	10	20tur	20	<u>,390.</u>
<u> </u>		CIILS VV	illi nevei	iue pei i		1,415	022
1	Total revenue, gains, and other support per audited financial statements				1	1,415	, 944.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	ا ۔ ا	1	5,748			
a	Net unrealized gains on investments .	2a		9,022			
р	Donated services and use of facilities	2b	10	0.	- 1		
С.	Recoveries of prior year grants	2c		0	-		
d	Other (Describe in Part XIV.)	2d			ا ہے ا	124	,770.
e	Add lines 2a through 2d		•		2e	1,291	152
3	Subtract line 2e from line 1				3	1,491	, 152.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	الما		0			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		<u> </u>	4		
þ	Other (Describe in Part XIV.)	4b			ا ہے ا		0
C	Add lines 4a and 4b				4c	1.291	$\frac{0.}{152.}$
Dai	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)  t XIII Reconciliation of Expenses per Audited Financial Statem	ante V	Vith Expe	nees ne	_		,152.
		icits v	VILII EXPE	nises per	11010		,374.
1	Total expenses and losses per audited financial statements				<b>!</b>	1,403	, 3 / 2 •
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	2a	1.0	9,022			
a	Donated services and use of facilities			9,022	4		
ь	Prior year adjustments	2b			Ŧ		
C	Other losses	2c 2d			┥		
d	Other (Describe in Part XIV)	_ Zu ]			ا 🚓 ا	100	,022.
e	Add lines 2a through 2d				2e 3	1,300	
3	Subtract line 2e from line 1				3	1,300	, , , , , , .
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	المدا					
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			-		
	Other (Describe in Part XIV.)	4b			ا 🗚 🖯		0.
c	Add lines 4a and 4b  Total expenses Add lines 3 and 4c, (This must equal Form 990, Part I, line 18.)				4c 5	1,300	
Pai	t XIV Supplemental Information				<u> </u>	1,300	, , , , , , ,
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part	III lines 1	a and 4. Pa	art IV lines	1b and	2b: Part V. line	4. Part
	e 2, Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also com						ν, ν αιν
	ASSETS WERE ADJUSTED BY \$13,842 WHICH RE						
112.	. Hobbit walla indooring of \$15/018 willow its						
RES	STRICTED FUNDS TO INCOME AND THE DIRECT_CO	NTRI	BUTION	OF \$	20,8	42 TO	
RES	STRICTED FUNDS WHICH WERE NOT USED IN THE	CURR	ENT YE	EAR.			
		-			<u> </u>	tulo D (Form 9	200) 0000

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

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

2009	
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Open to Public Inspection

Name of	Name of the organization ARTS COUNCIL OF FAIRFAX	CIL OF FA	IRFAX COUNTY	Y, INC				Employer identification number 54-0784570	umber 570
Parti	General Information on Grants and Assistance	nd Assistance	1 1						
- Do	Does the organization maintain records to substantiate the amount of	to substantiate the	e amount of the grants	or assistance, the	grantees' eligibility	y for the grants or ass	the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	;	: 4
c crit	criteria used to award the grants or assistance? Describe in Bart IV the organization's procedures for monitoring the use of grant funds in the United States	stance?	toring the use of grant	finds in the United	States				<b>8</b>
<del> </del>	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	Governments an	d Organizations in the	e United States. C	complete if the orga	anization answered "\	res" to Form 990, Part	IV, line 21, for any	
	recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	\$5,000. Check this	s box if no one recipier	nt received more th	ian \$5,000 Use Pa	art IV and Schedule I-	1 (Form 990) if addition	al space is needed	
1(a)	1 (a) Name and address of organization or government	( <b>p)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	±
i i									
SEE ATTACHED	ACHED			0.	0				
:									
2 Ent	Enter total number of section 501(c)(3) and government organizations	nd government or	rganizations					<b>A</b> .	
3 Ent	Enter total number of other organizations	S						•	
LHA Fo	For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	ction Act Notice,	see the Instructions	for Form 990.				Schedule I (Form 990) 2009	0) 2009

22

#### SCHEDULE O

(Form 990)

# **Supplemental Information to Form 990**

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

ARTS COUNCIL OF FAIRFAX COUNTY. INC.

Employer identification number 54-0784570

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
MISSION STATEMENT: THE ARTS COUNCIL OF FAIRFAX COUNTY IS THE
RECOGNIZED VOICE OF THE ARTS IN FAIRFAX COUNTY, DEDICATED TO FOSTERING
A DYNAMIC AND DIVERSE LOCAL ARTS PRESENCE AND PARTICIPATION. THE ARTS
COUNCIL ENSURES THAT ARTISTS AND THE ARTS THRIVE BY PROVIDING VISION,
LEADERSHIP, ADVOCACY, FUNDING, EDUCATION AND CAPACITY BUILDING.
FORM 990, PART VI, SECTION B, LINE 11: FORM 990 IS PROVIDED TO THE
GOVERNING BODY WHICH EXAMINES THE RETURN AND ANY ACCOMPANYING DOCUMENTS FOR
COMPLETENESS AND ACCURACY BEFORE SIGNING AND SUBMITTING THE RETURN TO THE
INTERNAL REVENUE SERVICE.
FORM 990, PART VI, SECTION B, LINE 12C: THE ORGANIZATION REQUIRES THAT BOARD MEMBERS SUBMIT A WRITTEN CONFLICT OF INTEREST STATEMENT AT LEAST ANNUALLY.
FORM 990, PART VI, SECTION C, LINE 19: AVAILABLE UPON WRITTEN REQUEST.