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## Form 990

Department of the Treasury Internal Revenue Service

## **Return of Organization Exempt From Income Tax**

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

benefit trust or private foundation)

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

2009
Open to Public Inspection

Α	For the	ne 2009 calendar year, or tax year beginning and endir	ng	
В	Check i	ole riedse	D Employer ident	ification number
г	Addi char	use IRS ess label or A DINE TAIC		
_	Nam	9 type S : S		01 201 01
늗	lchar linitia	ge Doing Business As		2138181
늗	iretur Term	Specific	,	
-	ated Ame	Instruc- 15 GRAND AVENUE		-469-4536
-	lretur Appl tion	City or town, state or country, and ZIP + 4	G Gross receipts \$	105,430.
L	Itión pend	F Name and address of principal officer:DAVID S. GRECO	H(a) Is this a group	return Yes X No
		19 GRAND AVENUE, NEW HAVEN, CT 06513	for affiliates?	
_	Tay-o	tempt status:   X 501(c) ( 3 )   (insert no )   4947(a)(1) or   527	H(b) Are all affiliates i	
<u> </u>		ite: WWW.ARTE-INC.COM	H(c) Group exempt	a list (see instructions)
				M State of legal domicile: CT
	art I	Summary	Tour of formation, 200 4	IN Cate of legal definition. C 1
_	. 1	Briefly describe the organization's mission or most significant activities: DEVELOP	AND PROMOTE	LATINO ART.
2010 Activities & Governance	[	CULTURE & TALENT. YOUTH & FAMILY PROGRAMS,		
Ę	2	Check this box   If the organization discontinued its operations or disposed of		
۶	3	Number of voting members of the governing body (Part VI, line 1a)		1
9	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	9
8	5	Total number of employees (Part V, line 2a)	5	1
	6	Total number of volunteers (estimate if necessary)		12
2010 Activi	7a	Total gross unrelated business revenue from Part VIII, column (C), line 12		0.
@	<u></u>	Net unrelated business taxable income from Form 990-T, line 34		0.
<b>୧୬</b>		WECENTO TO	Prior Year	Current Year
و عص	8	Contributions and grants (Part VIII, line 1h)	61,893	
MAR Bevenue	9	Program service revenue (Part VIII, line 2g)	35,498	. 25,192.
200	10	Investment income (Part VIII, column (A), III (3), 4, and 74) 5 2010		
<u>_</u>	11	Other revenue (Part VIII, column (A), lines 1, 60, 8c, 9c, 10c, and 11e)	5,020	
SCANNED Expenses	12	Total revenue - add lines 8 through 11 (must equal at V) column(44), line 2)	102,411	. 101,499.
3	13	Grants and similar amounts paid (Part IX, column (A), Tines 1-3)		
වී	14	Benefits paid to or for members (Part IX, column (A), line 4)	24.070	17.050
ത്ര	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	34,970	17,950.
ë	10a	Professional fundraising fees (Part IX, column (A), line 11e)		
Ë	1,0	Total fundraising expenses (Part IX, column (D), line 25)  4,887.	59,892	
	''	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) Total expenses, Add lines 13 17 (must expense Part IX, askura (A) (no. 05)	94,862	
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 18 from line 12	7,549	
<u></u>	3 3	nevenue less expenses. Subtract line 16 from line 12		
ets (	20	Total assets (Part X, line 16)	Beginning of Current Year 82,706	
Ass	21	Total liabilities (Part X, line 26)	02,700	795.
Net Assets or	22	Net assets or fund balances. Subtract line 21 from line 20	82,706	
P	art II	Signature Block	<u> </u>	20072021
		Under penalties of perjury, I declare that I have examined this resum, including accompanying schedules and staten and complete Declaration of prepares (office than officer) is paged on all information of which preparer has any know	nents, and to the best of my knowle	dge and belief, it is true, correct,
			<i>n</i>	-/ //-
Sig	jn	V / / / / / / / / / / / / / / / / / / /	√ ∠	7/10/10
He	re	Signature of officer	Date	, ,
		DAVID S. GRECO, EXECUTIVE DIRECTOR	<del></del>	
		Type or print name and title	10back d	<del></del>
Pai	d	Preparer's Date, CA Date,	Check if Prepa	erer's identifying number nstructions)
	parer's	signature Zignature Zignat	employed	
Use	Only	yours if CARIER, HAIES + ASSOCIATES, P.C.	<u>EIN</u> ►	
		self-employed, address, and 1952 WHITNEY AVENUE	[n.	102 207 2000
- N # -	45 ~ !	ZIP+4 HAMDEN, CT 06517	Phone no. > 2	203-287-3990
		RS discuss this return with the preparer shown above? (see instructions)	·	Yes No Form <b>990</b> (2009)
₩32	001 02-0	4-10 LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate	ะ เกรษนะพอกร.	romj <b>230</b> (2009)

	1 99 <u>0 (</u> 20			E, INC						54-213	38181	Page 2	
Pa	rt III	Statemen	t of Progra	m Servic	e Accor	mplishments							
1	Bnefly	describe the	organization'	s mission:				_					
			-		FIT O	RGANIZAT:	ION DED	ICATED	TO PRO	MOTING	LATIN	IO	
			JRE AND										
							-					_	
				-								-	
2	Did the	e organizatioi	n undertake a	ny significan	t program	services during	the year whic	h were not lis	ted on				
_		or Form 990					and your mino				Ves	X No	
	•		hese new serv	 vicas on Sch			• •		• •	•	163		
3						cant changes in l	how it conduc	ste any progr	am conucoc?			X No	
3			hese changes			cant changes in	now it conduc	is, any progr	am services r	•	res	LZLINO	
			_			£ 11 1	-1-41						
4		Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.  Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and											
									ne amount of	grants and			
	allocat	lions to other	s, the total ex	penses, and		of any, for each p	-		m= 0 / .	~ \			
		<del></del>				SCHEDULE		CONTINU					
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	THE	COMMUN	VITY FO	UNDATI	ON OF	GREATER	NEW HA	VEN.	IN MARCI	H, ARTI	AWAR	DED	
	AN Z	ADDITIO	DNAL \$50	000 IN	SCHO	LARSHIPS	_ MAKIN	G THIS	ITS 6T	H YEAR	AWARD	ING	
	SCH	OLARSH1	IPS TO	THE CO	MMUNI	TY. ARTE	RAN SE	VERAL A	AFTER SO	CHOOL			
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	Other	orogram son	ices. (Describ	a in Sebadul	۵0۱	··							
4d	(Expens	_	ices. (Describ		g grants o	f <b>¢</b>	\	evenue \$		`			
16			vice expenses			56,853 <b>.</b>	) (He	evenna p					
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Fa	Checklist of nequired schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		J	
	If "Yes," complete Schedule A	1	X	-
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2_	_X_	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			٠,,
	public office? If "Yes," complete Schedule C, Part I	3	<u> </u>	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	<u> </u>	X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any 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?			
10	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		_	
11	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,	120.5	Ser. 2.	21. N
•			1.3, 2	7
_	Part VI.	, , , , , , , , , , , , , , , , , , ,	1,19	
•	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	:	16	1 3
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	,,,,	<u>د</u> ا	
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	3.48	\$\$. ~	300
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	1 1	5	1
•	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	n 4	2	.33
	Part X, line 16? If "Yes," complete Schedule D, Part IX.	₹# X		
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	33	- 7	
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		3,	
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.	- 6x	3 🕏	30.6
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	1. E.	, ° 4€	
	Schedule D, Parts XI, XII, and XIII.	12		X
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No		7	
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	<b>36</b>	200	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	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		_	
10		16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	··•		<b></b>
17		17		х
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	''		<b>├</b> ^
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		
	1c and 8a? If "Yes," complete Schedule G, Part II	18		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		X

_		T	Yes	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,	1		
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	<u></u>	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	ļ		
	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		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	Ì		
	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		X
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			4.3
	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		Х
С	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	-	İ	
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?	İ		
	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		<u> </u>
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)?	1		l
	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-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
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		X_
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	000	<u> X</u>
		Form	<del>9</del> 90 (	2009)

Form	990 (2009) ARTE, INC. 54-2138	181	. P	age <b>5</b>
Pai	t V Statements Regarding Other IRS Filings and Tax Compliance			r
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable 1a 1a 1	)		
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 5	2	1	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
<b>2</b> a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return	4	-	1,
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b_	<del>  -</del>	X
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a_	<del>                                     </del>	X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	<del>                                     </del>	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			x
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	1	A :
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		5	<***
_	Financial Accounts.		ľ	X
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u>5a</u> 5b		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited	30	<del>  -</del>	- 22
C	Tax Shelter Transaction?	5c		
e o	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	1 30		
oa	any contributions that were not tax deductible?	6a		х
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
-	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	374X		33
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services	12.00		
•	provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
_	to file Form 8282?	7c_	L	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	15.		
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	1.73	,	2.3 30_
	benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	ļ	Х
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	<u>7g</u>	<u> </u>	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	ļ	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the	34,7		A. 25.25
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings	»ff		·\$-
	at any time during the year?	8	ļ <u>.</u>	
9	Sponsoring organizations maintaining donor advised funds.	1		- '
а	Did the organization make any taxable distributions under section 4966?	9a	ļ	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	<u> </u>	
10	Section 501(c)(7) organizations. Enter:	1 ``		
а	Initiation fees and capital contributions included on Part VIII, line 12	<b>-</b> ,		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	┨		
11	Section 501(c)(12) organizations. Enter:	1		
а	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)	1,_		Ì
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	-	
<u> </u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	L Eora-	990	(2000)
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Forth 990 (2009) ARTE, INC. 54-2138181 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. Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body 9 **b** Enter the number of voting members that are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 3 4 Did the organization make any significant changes to its organizational documents since the pnor Form 990 was filed? 4 Did the organization become aware during the year of a material diversion of the organization's assets? 5 5 Does the organization have members or stockholders? . . . . . . . . . . . 6 --7a Does the organization have members, stockholders, or other persons who may elect one or more members of the 7a b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: À.,~ X The governing body? 8a b Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code, No Yes X 10a Does the organization have local chapters, branches, or affiliates? 10a b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11 11 4 11A Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 12a X b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise 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 Does the organization have a written whistleblower policy? 13 13 Does the organization have a written document retention and destruction policy? 14 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization 15b 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 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 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶CT 17 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. X Upon request \_\_\_ Another's website Own website Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial

State the name, physical address, and telephone number of the person who possesses the books and records of the organization.

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statements available to the public.

DAVID GRECO - 203-469-4536

19 GRAND AVENUE, NEW HAVEN,

54-2138181

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

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

1a Complete this table for all persons required to be listed. 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.

(A) Name and Title	(B) Average	(C) Position				1		(D) Reportable	<b>(E)</b> Reportable	(F) Estimated	
	hours	(c	(check all that apply			арр	ıly)	compensation	compensation	amount of	
	per week	e or director	itee		1	sated		from the organization	from related organizations (W-2/1099-MISC)	other compensation from the	
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		organization and related organizations	
DANIEL DIAZ											
CHAIRMAN	0.30	X	<u> </u>	X	<u> </u>	_	ļ.,	0.	0.	0.	
MARISOL LASSALLE											
VICE CHAIRPERSON	0.30	X	<u> </u>	X	<u> </u>	1		0.	0.	0.	
VIVIANA SANTANA										•	
SECRETARY	0.30	X	├	Х			-	0.	0.	0.	
MIRIAM CAMACHO	1 0 20	,,							0.	_	
BOARD MEMBER	0.30	X	├—	-	-	╁	-	0.		0.	
LISSETTE ANDINO TREASURER	0.30			x			l	0.	0.	0.	
DR. GUALBERTO RUANO	0.30	^	╁	^	<del>                                     </del>	+					
BOARD MEMBER	0.30	x	ŀ			l	1	0.	0.	0.	
MIGUEL RIOS	0.50	1			-		-				
BOARD MEMBER	0.30	X						0.	0.	0.	
LUIZ CASANOVA											
BOARD MEMBER	0.30	x						0.	0.	0.	
DAVID GRECO											
EXECUTIVE DIRECTOR	35.00	X	-		X	_	_	16,242.	0.	0.	
		-	-								

	1990 (		- <del></del>			54-2138	181 Page 9
	rt VII			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a b c d e f	Federated campaigns  Membership dues  Fundraising events  Related organizations  Government grants (contributions)  All other contributions, gifts, grants, and similar amounts not included above  1a  1b  1b  1c  1c  1d  1d	32,939. 42,812.				,
Contril and of	g h	Noncash contributions included in lines 1a-1f \$		75,751.		,	
Program Service Revenue	2 a b	ARTS PROGRAMMING TICKETS AND ADMISSIONS	Business Code 711300 711300	18,000. 7,192.	18,000. 7,192.		_,,,,
	c d		711300	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.,,2323		
Pro	e f <u>g</u>	All other program service revenue  Total. Add lines 2a-2f	<b>&gt;</b>	25,192.		`	7 27 3
	3	Investment income (including dividends, interest other similar amounts)  Income from investment of tax-exempt bond processes to the second processes of the second processes o	. •				
	5 6 a	Royalties (i) Real Gross Rents	(ii) Personal	*		.,`	, , , , , , , , , , , , , , , , , , ,
	b c d	Less' rental expenses  Rental income or (loss)  Net rental income or (loss)				ika in in is	
	7 a b	Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses	(ii) Other				A Company of the Comp
nue	d	Gain or (loss)  Net gain or (loss)  Gross income from fundraising events (not including \$	. ▶	The same of the sa			
Other Revenue	h	contributions reported on line 1c). See Part IV, line 18 Less direct expenses b	2 224	i i i i i i i i i i i i i i i i i i i	* ,		
δ	c	Net income or (loss) from fundraising events Gross income from gaming activities. See Part IV, line 19	<b>•</b>	316.	-316.		?
	С	Less: direct expenses b  Net income or (loss) from gaming activities  Gross sales of inventory, less returns	<b>&gt;</b>				***
		and allowances a Less: cost of goods sold b Net income or (loss) from sales of inventory		,			
		MISCELLANEOUS	Business Code 711300	872.	872.		
	c d e	All other revenue Total, Add lines 11a-11d	•	872.			
93200 02-04-	12	Total revenue. See instructions.	<u> </u>	101,499.	25,748.	0.	0 . Form <b>990</b> (2009)

# Form 990 (2009) ARTE, INC. Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must complete 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	(D) Fundraising expenses
1	Grants and other assistance to governments and				
•	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
_	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	16,242.	9,745.	5,685.	812
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	1,708.	1,025.	598.	85
11	Fees for services (non-employees):				
а	Management				
b	Legal				
c	Accounting	4,300.		4,300.	<del></del>
d	Lobbying				<del></del>
e	Professional fundraising services. See Part IV, line 17		1、15年的品數2次十二	× × × × ×	
f	Investment management fees				
g	Other	1,320.		1,320.	
12	Advertising and promotion	5,949.		1,959.	3,990
13	Office expenses	900.		900.	
14	Information technology	2,438.		2,438.	
15	Royalties	10.054	0.050	1 005	
16	Occupancy	10,954.	9,859.	1,095.	<del></del>
17	Travel	355.	<del></del>	355.	<del></del>
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	· ·	<u> </u>	<del></del>	<del></del>
20	Interest				· · - · · -
21	Payments to affiliates	071	740.	121	· · · · · · · · · · · · · · · · · · ·
22	Depreciation, depletion, and amortization	871.	/40•	131.	<u> </u>
23	Insurance .	y	-	<del></del>	
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled			;	
	miscellaneous may not exceed 5% of total	1 5	,	, 21	20
	expenses shown on line 25 below.)	11 102	11,193.	<del></del>	· · · · · · · · · · · · · · · · · · ·
	SCHOLARSHIPS  DROCRAMMING EXPENSES	11,193. 9,124.	9,124.	<del></del>	
b	PROGRAMMING EXPENSES	4,850.	4,850.		<del></del>
C	ARTIST FEES		3,000.	634.	<del></del>
d	FOOD AND BEVERAGE	3,634. 1,564.	1,409.	155.	<del></del>
e	TELEPHONE	8,551.	5,908.	2,643.	· · · · · · · · · · · · · · · · · · ·
f	All other expenses Add liggs 1 through 24f	83,953.	56,853.	22,213.	4,887
<u>25</u>	Total functional expenses. Add lines 1 through 24f	03,333.	50,053.	44,413.	4,007
26	Joint costs. Check here June and 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 <b>990</b> (200)

Part X Balance Sheet (A) (B) Beginning of year End of year 97,597. 73,972. 1 Cash - non-interest-bearing . . .... 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net . . . 3 1.500. 5,913 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L 6 Notes and loans receivable, net 7 Inventories for sale or use 8 Prepaid expenses and deferred charges . . . 9 10a Land, buildings, and equipment: cost or other 5,396 basis. Complete Part VI of Schedule D 950. b Less: accumulated depreciation 10c Investments - publicly traded securities ..... 11 11 12 12 Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11 13 13 Intangible assets 14 14 15 15 Other assets. See Part IV, line 11 82,706 Total assets, Add lines 1 through 15 (must equal line 34) 16 16 17 Accounts payable and accrued expenses . . . . 17 18 Grants pavable 18 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D Liabilities Payables to current and former officers, directors, trustees, key employees. 22 highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties 24 24 25 Other liabilities Complete Part X of Schedule D Total liabilities. Add lines 17 through 25 26 26 Organizations that follow SFAS 117, check here lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 100,252. 82,706. 27 27 Unrestricted net assets 28 Temporarily restricted net assets 28 Permanently restricted net assets 29 29 Organizations that do not follow SFAS 117, check here complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 82,706 100,252. Total net assets or fund balances 33 33 101,047. 82,706. Total liabilities and net assets/fund balances

Form	990 (2009) ARTE, INC	<u> </u>	<u> </u>	ge -
Par	t 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.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	<u> </u>	X_
b	Were the organization's financial statements audited by an independent accountant?	. 2b	<u> </u>	X_
c	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	<u> </u>	Ļ
	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			
	consolidated basis, separate basis, or both:		_	
	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 Audi	t		
	Act and OMB Circular A-133?	. 3a	ļ	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit	t		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b	1	

Form **990** (2009)

### SCHEDULE A

Department of the Treasury

(Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

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.

OMB No. 1545-0047

Open to Public

Inspection Internal Revenue Service Employer identification number Name of the organization 54-2138181 Part I Reason for Public Charity Status (All organizations must complete this part ) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. b \_\_\_ Type II Type III - Other a Type I c Type III - Functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? . . . 11g(ii) (iji) A 35% controlled entity of a person described in (i) or (ii) above? | 11g(iii) h Provide the following information about the supported organization(s). (iii) Type of (iv) is the organization (v) Did you notify the (vi) Is the (vii) Amount of (i) Name of supported (ii) EIN organization ganization in col. in col. (i) listed in your organization in col. organization support (i) organized in the (described on lines 1-9 governing document? (i) of your support? above or IRC section (see instructions)) Yes Yes No No Νo Yes

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

Total

Schedule A (Form 990 or 990-EZ) 2009 ARTE , INC. 54-2138181 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

	(Complete only if you checke	d the box on line 5	, 7, or 8 of Part I.)				
Se	ction A. Public Support						
Cal	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	45,594.	43,047.	55,400.	61,893.	75,751.	281,685.
2	Tax revenues levied for the organ-						
	ization'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						
4	Total. Add lines 1 through 3	45,594.	43,047.	55,400.	61,893.	75,751.	281,685.
5	The portion of total contributions	. N. W	1200		1, 1, 1	٠,,,٠	
	by each person (other than a			3.	, ,	3.5	
	governmental unit or publicly		,	***	3 <sup>-4</sup>		
	supported organization) included	5.3	34.			5 * 5	
	on line 1 that exceeds 2% of the				ماد مواد م		
	amount shown on line 11,		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		\$\$\frac{1}{2} \tau \tau \tau \tau \tau \tau \tau \tau		
	column (f)	\$ 3.5°		- A	3 A 2 3 A		
6	Public support. Subtract line 5 from line 4	A STATE		17 1 17	·	L Husell	281,685.
Se	ction B. Total Support						
Cal	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	45,594.	43,047.	55,400.	61,893.	75,751.	281,685.
8	Gross income from interest,		7				
	dividends, payments received on						
	securities loans, rents, royalties	<b> </b>					<u>_</u>
	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.)						
11	Total support. Add lines 7 through 10		\$1 x	36885	かきが さ	- 5 484 * 9 . gibin	281,685.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	140,268.
13	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
	organization, check this box and stor						<u> ▶                               </u>
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2009 (	line 6, column (f) di	ivided by line 11, o	olumn (f))		14	<u>100.00 %</u>
15	Public support percentage from 2008	Schedule A, Part	II, line 14	•		15	%
16a	33 1/3% support test - 2009. If the o	rganization did not	t check the box or	line 13, and line 1	4 is 33 1/3% or m	ore, check this box	
	stop here. The organization qualifies	as a publicly supp	orted organization				. <b>▶</b> [X]
b	33 1/3% support test - 2008. If the o	rganization did not	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check thi	s box
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation		•	
17a	10% -facts-and-circumstances tes	<b>t - 2009.</b> If the orga	anızatıon dıd not c	heck a box on line	13, 16a, or 16b, a	nd line 14 is 10% o	or more,
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check th	nis box and stop h	ere. Explaın in Paı	t IV how the organ	ization
	meets the "facts-and-circumstances"	test The organiza	tion qualifies as a	publicly supported	organization		▶∟
b	10% -facts-and-circumstances tes						
	more, and if the organization meets the	ne "facts-and-circu	mstances" test, cl	neck this box and	stop here. Explain	in Part IV how the	
	organization meets the "facts-and-circ	cumstances" test	The organization o	qualifies as a public	cly supported orga	ınızatıon .	▶∐_
18	Private foundation. If the organization	n did not check a l	box on line 13, 16	a, 16b, 17a, or 17b	, check this box a	nd see instructions	<u>s▶</u>
					A 1	1 1 A /E - 000	000 ETI 0000

b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

## Schedule D

(Form 990)

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.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

ARTE TNC Employer identification number 54-2138181

Pa	rt I Organizations Maintaining Donor Advise	d Funds or	Other Similar Fun	ds or Account	S. Complete if the
	organization answered "Yes" to Form 990, Part IV, line				
			or advised funds	(b) Funds	and other accounts
1	Total number at end of year			†` <i>i</i>	
2	Aggregate contributions to (during year)			*	
3	Aggregate grants from (during year)				
4	Aggregate value at end of year		<del>"</del>		
5	Did the organization inform all donors and donor advisors in v	writing that the	assets held in donor ad	vised frinds	
3	are the organization's property, subject to the organization's	=		visca lulius	Yes No
6	Did the organization inform all grantees, donors, and donor at	-		he used only	162
O	for charitable purposes and not for the benefit of the donor of			•	
	impermissible private benefit?	i donor adviso	, or for any other purpor	se comening	Yes No
Pai	rt II: Conservation Easements. Complete if the org	anization anev	rered "Ves" to Form 990	Part IV line 7	
	Purpose(s) of conservation easements held by the organization			, raitiv, iiie r.	
1	Preservation of land for public use (e.g., recreation or p		Preservation of an	historically imports	nt land area
		ileasure)	Preservation of a c	- ·	
	Protection of natural habitat	,	Preservation of a C	ertilled Historic Stru	icture
_	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qualifi	ied conservation	n contribution in the for	m or a conservatio	n easement on the last
	day of the tax year.			[ / lus	Id at the Ford of the Toy Veer
_	Total number of accessories				ld at the End of the Tax Year
a	Total number of conservation easements			2a	
b	Total acreage restricted by conservation easements			2b	
C	Number of conservation easements on a certified histonic stru		in (a)	2c	· · · · · · · · · · · · · · · · · · ·
d	Number of conservation easements included in (c) acquired a			. <u>2d</u>	
3	Number of conservation easements modified, transferred, rele	easea, extingu	sned, or terminated by	the organization du	inng the tax
	year -				
4	Number of states where property subject to conservation eas			_	
5	Does the organization have a written policy regarding the peri		g, inspection, nandling o	οτ	
_	violations, and enforcement of the conservation easements it	• •			L Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,				·
7	Amount of expenses incurred in monitoring, inspecting, and e			_	<del></del>
8	Does each conservation easement reported on line 2(d) above	e satisty the re	quirements of section 1	70(n)(4)(B)(I)	
_	and section 170(h)(4)(B)(ii)?				Yes No
9	In Part XIV, describe how the organization reports conservation				
	include, if applicable, the text of the footnote to the organization	ion's financial s	statements that describe	es the organization	s accounting for
Da	conservation easements. rt III   Organizations Maintaining Collections of	Art Histor	ical Treasures or	Other Similar	Accate
ı aı	Complete if the organization answered "Yes" to Form 9	-			A33013.
	Complete if the organization anomored free to form	000,1 (21114, 1111	<del> </del>		
10	If the organization elected, as permitted under SFAS 116, not	t to report in its	revenue statement and	halance sheet wo	te of art historical
Ia	treasures, or other similar assets held for public exhibition, ed	•			
	the footnote to its financial statements that describes these it	-	earch in faitherance of p	Dublic Service, prov	ide, iiii ait xiv, tile text of
<b>6</b>	If the organization elected, as permitted under SFAS 116, to r		anua etatement and hal	ance cheet works	of art. historical transuros
b	or other similar assets held for public exhibition, education, or	•			
	these items.	i resealtii iii lu	merance of public servi	ice, provide trie ion	owing amounts relating to
				▶ ¢	
	(i) Revenues included in Form 990, Part VIII, line 1			<b>~</b> *_	
•	(ii) Assets included in Form 990, Part X		ormilar agasta for fire-		
2	If the organization received or held works of art, historical trea	•		Jiai gairi, provide	
_	the following amounts required to be reported under SFAS 11	ro relating to th	ese rems:	▶ ⋄	
a	Revenues included in Form 990, Part VIII, line 1			<b>~</b> \$ _	
b	Assets included in Form 990, Part X	•	•	▶ \$_	

		NC.					138181 Page <b>2</b>
Pa	rt III Organizations Maintaining C	Collections of A	rt, Historical T	reasures,	or Othe	er Similar Ass	ets (continued)
3	Using the organization's acquisition, accessi	on, and other record	is, check any of the	e following th	at are a s	ignificant use of it	s collection items
	(check all that apply):		<u></u>				
а	Public exhibition	d		change progr	rams		
b		е	Other				
С	Preservation for future generations						
4	Provide a description of the organization's co	ollections and explai	n how they further	the organizat	tion's exe	mpt purpose in P	art XIV.
5	During the year, did the organization solicit of	or receive donations	of art, historical tre	asures, or oth	her sımılaı	rassets	
	to be sold to raise funds rather than to be m						Yes No
Pa	rt IV Escrow and Custodial Arran		ete if organization a	answered "Ye	es" to For	m 990, Part IV, lin	e 9, or
	reported an amount on Form 990, Pa	rt X, line 21.					
1a	Is the organization an agent, trustee, custod	ian or other ıntermed	diary for contributio	ns or other a	ssets not	ıncluded	
	on Form 990, Part X?					L	Yes      No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing table:				
							Amount
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?				Yes No
	If "Yes," explain the arrangement in Part XIV						
Pa	rt V :   Endowment Funds. Complete	f the organization ar	swered "Yes" to Fe	orm 990, Par	t IV, line 1	0.	
		(a) Current year	(b) Prior year	(c) Two yea	ars back	(d) Three years bac	k (e) Four years back
1a	Beginning of year balance				č) ×	<u> </u>	The state of the s
b	Contributions			3.22	131 ,	Barrier of the	
С	Net investment earnings, gains, and losses			.42 . 2 .	· 2.	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
d	Grants or scholarships			55 C C		63.7	1111 / 1780 / 1886
е	Other expenditures for facilities			7-		, , , , ,	
	and programs					`	
f	Administrative expenses			-	,		Service Control
g	End of year balance			1			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
2	Provide the estimated percentage of the year	r end balance held a	ıs:				
а	Board designated or quasi-endowment		%				
b	Permanent endowment	%	_				
С	Term endowment	%					
3a	Are there endowment funds not in the posse	ession of the organization	ation that are held	and administ	ered for th	he organization	
	by:						Yes No
	(i) unrelated organizations						3a(i)
	(ii) related organizations						3a(ii)
ь	If "Yes" to 3a(ii), are the related organizations	s listed as required o	n Schedule R?		_		3b
4	Describe in Part XIV the intended uses of the	•	•		•		
Pa	rt VI Investments - Land, Building			), Part X, line	10.		
	Description of investment	(a) Cost or o		t or other		ccumulated	(d) Book value
	·	basis (investr	nent) basis	(other)		oreciation	
1a	Land					-	
	Buildings						
	Leasehold improvements						
	Equipment						
	Other			5,396.		3,446.	1,950.
	I. Add lines 1a through 1e. (Column (d) must e	gual Form 990. Part	X, column (B), line				1,950.

2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

	dule D (Form 990) 2009 ARTE, INC.			54-2138181 Page
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to Au	udited Financ	ial State	ments
1	Total revenue (Form 990, Part VIII, column (A), line 12)		_1	
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3	
4	Net unrealized gains (losses) on investments		4	
5	Donated services and use of facilities	. [	5	
6	Investment expenses		6	
7	Prior penod adjustments		7	
8	Other (Describe in Part XIV.)		8	
9	Total adjustments (net). Add lines 4 through 8		9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		10	
	t XII Reconciliation of Revenue per Audited Financial Statements	s With Reven		eturn
	Total revenue, gains, and other support per audited financial statements		<u> </u>	1
1	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
2		0-		
а		2a		
Ь		2b		
С		2c		
đ		2d`		
е	Add lines 2a through 2d			2e
3	Subtract line 2e from line 1	•		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	ı		
а	· · · · · · · · · · · · · · · · · · ·	4a		
b		4b		
C	Add lines <b>4a</b> and <b>4b</b>			4c
5_	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5
Par	t XIII Reconciliation of Expenses per Audited Financial Statement	ts With Expe	nses per	Return
1	Total expenses and losses per audited financial statements			1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	•		
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		<u>.</u> . ^ .]
ď	Other (Describe in Part XIV.)	2d		) · .
е	Add lines 2a through 2d			2e
3	Subtract line 2e from line 1			3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			÷
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	•	4b		s 1
	Add lines 4a and 4b			4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5
	t XIV Supplemental Information			
-	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete			
	· · · · · · · · · · · · · · · · · · ·			

### **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

ARTE, INC.

Employer identification number 54-2138181

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
EVENTS, EXHIBITS & ACTIVITIES.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS
ARTS/EDUCATION PROGRAMS FOR INNER-CITY AND UNDER-SERVED YOUTH. THESE
PROGRAMS TOOK PLACE AT TWO DIFFERENT INNER-CITY SCHOOLS DURING THE
SCHOOL YEAR AND AT ONE SCHOOL DURING THE SUMMER BREAK PERIOD. ARTE
WORKED WITH EMERGING LATINO ARTISTS TO HELP THEM SECURE LOCATIONS AND
OPPORTUNITIES TO EXHIBIT THEIR ARTWORK. ARTE ALSO ALLOWED SEVERAL
OTHER NON-PROFIT ORGANIZATIONS TO UTILIZE ARTE'S OFFICES FOR MEETINGS
AND FUNDRAISERS.
FORM 990, PART VI, SECTION A, LINE 2: MIRIAM CAMACHO IS THE MOTHER OF
VIVIANA SANTANA. BOTH ARE BOARD MEMBERS.
FORM 990, PART VI, SECTION B, LINE 11: THE BOARD OF DIRECTORS HAS NOT YET
ADOPTED A POLICY FOR REVIEW OF THE FORM 990.
FORM 990, PART VI, SECTION B, LINE 12C: DISCUSSED ANNUALLY AT BOARD
MEETING.
FORM 990, PART VI, SECTION C, LINE 19: UPON REQUEST.