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Department of the Treasury

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)

Open to Public

The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspection A For the 2009 calendar year, or tax year beginning JUL 1, 2009and ending JUN 30, 2010 C Name of organization D Employer identification number Check if applicable Please use IRS THE ARTS PARTNERSHIP OF GREATER Address SPARTANBURG, INC. print or Name change type 57-0986224 Doing Business As Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Specific Termin 200 EAST ST. JOHN ST 8645422787 Instruc-Amended return 2,693,786. City or town, state or country, and ZIP + 4 G Gross receipts \$ Applica-tion pending SPARTANBURG, SC 29306 H(a) Is this a group return Yes X No F Name and address of principal officer MR. PERRY MIXTER for affiliates? 200 E ST JOHN STREET, SPARTANBURG, 29306 H(b) Are all affiliates included? I Tax-exempt status: **X** 501(c) (0 3) ◀ (insert no) ☐ 4947(a)(1) or If "No," attach a list. (see instructions) J Website: ▶ WWW.CHAPMANCULTURALCENTER.ORG H(c) Group exemption number K Form of organization: X Corporation Trust Association L Year of formation: 1993 M State of legal domicile: SC | Part I | Summary Bnefly describe the organization's mission or most significant activities: TAP SUPPORTS AND INSPIRES Activities & Governance CREATIVE EXPRESSION AND EDUCATIONAL DISCOVERY IN SPARTANBURG COUNTY. Check this box 🕨 📖 if the organization discontinued its operations or disposed of more than 25% of its net assets 31 Number of voting members of the governing body (Part VI, line 1a) 31 Number of independent voting members of the governing body (Part VI, line 1b) 4 31 Total number of employees (Part V, line 2a) 5 100 Total number of volunteers (estimate if necessary) 6 0. Total gross unrelated business revenue from Part VIII, column (C), line 12 7a Net unrelated business taxable income from Form 990-T, line 34 0. SCANNED **Prior Year Current Year** 1,886,918. Contributions and grants (Part VIII, line 1h) 576,344 207,211 189,097. Program service revenue (Part VIII, line 2g) 12B\(\overline{9}\)458. 19,293. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 201889 2150 598,478. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) NOA Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), lin 2,496%163 2,693,786. 2,267,409. 1,100,530Grants and similar amounts paid (Part IX, column (A), lines 1-3) OGE Benefits paid to or for members (Part IX, column (A), line 4) 0 872,156 793,762. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 305,276. b Total fundraising expenses (Part IX, column (D), line 25) 2,668,836 2,012,720. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 4,641,522 5,073,891. -2,145,359 -2,380,105. Revenue less expenses. Subtract line 18 from line 12 Net Assets or Fund Balances Beginning of Current Year **End of Year** 46,218,535 42,060,000. Total assets (Part X, line 16) 6,738,714. 8,517,144. 21 Total liabilities (Part X, line 26) 37,701,391 35,321,286. Net assets or fund balances. Subtract line 21 from line 20 Part II Signature Block Under penalties of perairy, I declare that I have examined this return, including accompanying schedules and statements, 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 knowledge Sign Signature of officer Here PERRY MIXTER, PRESIDENT & COO Type or print name and title Check if self-Date Preparer's identifying number (see instructions) Preparer's Paid signature employed > Preparer's Firm's name (or MCABEE, TALBERT, HALLIDAY EIN > yours if self-employed Use Only 824 EAST MAIN STREET SPARTANBURG, SC 29802 Phone no. \triangleright (864) 583-0886

May the IRS discuss this return with the preparer shown above/ (see instructions)

932001 02-04-10

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

X Yes L

THE ARTS PARTNERSHIP OF GREATER SPARTANBURG, INC. 57-0986224 Part III | Statement of Program Service Accomplishments SEE SCHEDULE O FOR CONTINUATION Briefly describe the organization's mission THE ARTS PARTNERSHIP SUPPORTS AND INSPIRES CREATIVE EXPRESSION AND EDUCATIONAL DISCOVERY IN SPARTANBURG COUNTY. THE ARTS PARTNERSHIP WILL PROVIDE STRATEGIC AND FINANCIAL LEADERSHIP TO CULTURAL

ORGANIZATIONS, ARTISTS AND EDUCATORS THAT ENHANCES QUALITY OF LIFE, Did the organization undertake any significant program services during the year which were not listed on Yes X No the prior Form 990 or 990-EZ? If "Yes." describe these new services on Schedule O. Yes X No Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O. Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported) (Expenses \$ 4,065,885. including grants of \$ 2,267,409.) (Revenue \$ 527,528.1 (Code: GRANTS TO OTHER NONPROFIT ART ORGANIZATIONS FOR OPERATING EXPENSES AND ARTIST ASSISTANCE GRANTS. 141,786. including grants of \$ (Code) (Expenses \$) (Revenue \$ ARTS IN EDUCATION PROGRAMS CONDUCTED AT VARIOUS SCHOOLS, HOSPITALS, AND OTHER LOCATIONS (Code:) (Expenses \$ including grants of \$) (Revenue \$

Other program services (Describe in Schedule O) including grants of \$ (Expenses \$

4,207,671. Total program service expenses > \$ 4e_

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Form 990 (2009) SPARTANBURG, INC.

Part IV Checklist of Required Schedules

	•		Yes	No
1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
-	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	_5_		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			٠,,
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		4,7
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			7,
_	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		х
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	Х	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI.			, ,
•	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			ري. ري.
	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.	* }		د أ
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	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			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	1		
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,	<u> </u>		
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		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		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		I	
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
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		х
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		Х
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Х
			990 (

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Form 990 (2009) SPARTANBURG, INC.

Part IV Checklist of Required Schedules (continued)

	•	1	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	Х	
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		Х
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		х
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	х	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Х
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		Х
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		х
	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		х
ь	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		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	200		
20	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		`	14
	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
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
	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	Х	
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		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31	ŀ	х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	<u> </u>	х
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-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
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	Х	<u> </u>
		Form	990 (2009)

Form 990 (2009) SPARTANBURG, INC.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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	•		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 43	1		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	ł		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	ļ		.
	(gambling) winnings to prize winners?	1c	X	
2a	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 2a 31	ł		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	L
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a_		<u>X</u>
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
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		1	
	Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			
	Tax Shelter Transaction?	5c_		
6a	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?	6a		X
b	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).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services	_		
L	provided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	70		х
А	If "Yes," indicate the number of Forms 8282 filed during the year 7d	7c		^
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			,
·	benefit contract?	7e	,	x
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	71		X
a	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the			٠,
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings	_		
	at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:	ł		
а	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			
11	Section 501(c)(12) organizations. Enter:	, ·		
а	Gross income from members or shareholders 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against	İ		
	amounts due or received from them.) 11b	ļ		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		ļ
<u>b</u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		000	
		Form	990 ((2009)

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Form 990 (2009) SPARTANBURG, INC. 57-0986224 Page
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		31			
b	Enter the number of voting members that are independent	1b	J	31	1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	o with	any other				
	officer, director, trustee, or key employee?				2	X	
3	Did the organization delegate control over management duties customarily performed by or under the	e dire	ct supervision				
	of officers, directors or trustees, or key employees to a management company or other person?				3		X
4	Did the organization make any significant changes to its organizational documents since the prior Fo	rm 99	0 was filed?		4		X
5	Did the organization become aware during the year of a material diversion of the organization's asset	:s?	_		5		X
6	Does the organization have members or stockholders?				6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more me	mbei	s of the	1			
	governing body?		_	.	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other per	sons	? .	. [7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken	dunn	g the year				
	by the following			ĺ			
а	The governing body?				8a	X	
b	Each committee with authority to act on behalf of the governing body?				8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ched	at the				
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O				9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Ri	evenu	e Code.)				
						Yes	No
10a	Does the organization have local chapters, branches, or affiliates?				10a		_X_
b	if "Yes," does the organization have written policies and procedures governing the activities of such	chap	ters, affiliates,				
	and branches to ensure their operations are consistent with those of the organization?				10b		ļ
11	Has the organization provided a copy of this Form 990 to all members of its governing body before fi	lıng tl	ne form?		11		_X_
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 cou	ıld gr	e rise				
	to conflicts?				12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	"Yes,	describe				
	ın Schedule O how this is done				12c		
13	Does the organization have a written whistleblower policy?				13		X
14	Does the organization have a written document retention and destruction policy?				14		<u> </u>
15	Did the process for determining compensation of the following persons include a review and approva	al by	ndependent			-	
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						i '
	The organization's CEO, Executive Director, or top management official				15a	X	
b	Other officers or key employees of the organization				15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions.)						İ
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger	ment	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 eva			n	-		
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization of the control o	anıza	ion's				
	exempt status with respect to such arrangements?		 		16b		
	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filled SC	- (504	· · · · · · · · · · · · · · · · · · ·				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T	(501	(c)(3)s only) av	allable	tor		
	public inspection. Indicate how you make these available. Check all that apply						
46	Own website X Another's website X Upon request			l.a.			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, c	onflic	t of interest po	iicy, ar	id fina	ncial	
•	statements available to the public.				.		
20	State the name, physical address, and telephone number of the person who possesses the books at	na re	coras of the or	ganızat	ion. 📂		
	CORPORATION - 864-542-2787						

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

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

1a Complete this table for all persons required to be listed. 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)	(B)			(0				(D)	(E)	(F)
Name and Title	Average) (al		Pos			k A	Reportable	Reportable	Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer		Highest compensated do employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
DR. LOUIS BUTTINO										
TRUSTEE		X				_		0.	0.	0.
MARTHA CHAPMAN										_
TRUSTEE		X				ļ		0.	0.	0.
JAMES A CHEEK									_	_
TRUSTEE		X				ļ		0.	0.	0.
GENE P CONROY										_
TRUSTEE		X						0.	0.	0,
ANNA H °CONVERSE										_
TRUSTEE		Х						0.	0.	0.
MARTIN S CORNELSON	j									
TRUSTEE		X				╂		0.	0.	0 .
MARY FREEDMAN										•
SECRETARY		X		X				0.	0.	0 .
JAMES S FULMER, JR.		v		7.7				0.	0.	0
CHAIRMAN MARSHA H GIBBS		X	<u> </u>	X	_	├		U •	Ų •	0.
TRUSTEE		x						0.	0.	0.
CECILIA HANNA		^		-	_	\vdash		0.	<u> </u>	<u> </u>
TRUSTEE		x						0.	0.	0 .
TIMOTHY K HENSON		1				\vdash		0.	•	0
TRUSTEE		x						0.	0.	0.
JEFF HORTON		 				\vdash				
TRUSTEE	1	x						0.	0.	0.
MARSHALL M JORDAN										
TRUSTEE		x						0.	0.	0.
THOMAS H KEIM, JR.						1				
TRUSTEE		X						0.	0.	0.
JOAB M LESESNE						Γ				
TRUSTEE		х	L_			<u>_</u>		0.	0.	0 .
JULIE W LOWRY										
TRUSTEE		X						0.	0.	0.
MICHAEL L MENARD										
TREASURER		X		X				0.	0.	0.

Form 990 (2009) SPARTANBI	JRG, IN	Ç.						·	57-0986	224 Page 8
Part VII Section A. Officers, Directors, Tru	stees, Key E	mpla	yee	s, a	nd l	High	est	Compensated Employ	ees (continued)	
· (A)	(B)			-	C)			(D)	(E)	(F)
Name and title	Average	,,			ition		L A	Reportable	Reportable	Estimated
•	hours per		heck	all	tnat	app	iy)	compensation from	compensation from related	amount of other
	week	individual trustee or director						the	organizations	compensation
		0	a			sated		organization	(W-2/1099-MISC)	from the
		ruste	trus		8	ubeu		(W-2/1099-MISC)		organization
		dual	institutional trustee		Key employee	st co	5			and related
		- F	Instit	Officer	Keye	Highest compensated employee	Former			organizations
BETTY J MONTGOMERY	<u> </u>	 		-	-	\vdash				
TRUSTEE		x						0.	0.	0.
REBECCA PITTMAN		1				 				
TRUSTEE		X						0.	0.	0.
ROBERT REEDER					İ	<u> </u>				
TRUSTEE		Х				l		0.	0.	0.
RENEE ROMBERGER										
TRUSTEE		X				<u> </u>		0.	0.	0.
PAIGE K ROUSEY								_	_	_
TRUSTEE		X			<u> </u>	<u> </u>	_	0.	0.	0.
UDO SKARKE		l								
TRUSTEE		X	ļ			ļ		0.	0.	0.
JAMES H THOMAS, JR.		٠,							_	_
TRUSTEE GREGORY H WADE		X			_			0.	0.	0.
TRUSTEE		X						0.	0.	0.
GLORIA M WARD		A				\vdash		0.		<u> </u>
TRUSTEE		x						0.	0.	0.
RUSSELL R WEBER	<u> </u>					1		1		
TRUSTEE		X						0.	0.	0.
1b Total								115,795.	0.	12,533.
2 Total number of individuals (including but n	ot limited to th	nose	liste	ed a	bove	e) wł	no re	eceived more than \$100),000 in reportable	
compensation from the organization										1
										Yes No
3 Did the organization list any former officer,			, ke	у еп	nplo	yee,	or h	nighest compensated er	nployee on	
line 1a? If "Yes," complete Schedule J for s 4 For any individual listed on line 1a, is the su							اهـ ا	hav aammanaatian frans	the execution	3 X
4 For any individual listed on line 1a, is the su and related organizations greater than \$150									ule organization	4 X
5 Did any person listed on line 1a receive or a										7 1
the organization? If "Yes," complete Sched					ر	,				5 X
Section B. Independent Contractors										
1 Complete this table for your five highest co	mpensated in	dep	ende	nt c	onti	racto	ors t	hat received more than	\$100,000 of compens	ation from
the organization NONE										
(A)								(B)		(C)
Name and business	address						\dashv	Description of s	services	Compensation
							\dashv			
							- 1			
•							\dashv	-		
							ŀ			
										_
										
2 Total number of independent contractors (i	_	not li	mite	d to		_	sted	l above) who received m	nore than	
\$100,000 in compensation from the organic SEE SCHEDULE J-2 FOR		TT	_	2 TO 1		0 TO	.T :	7 CONTENTS 77 T	ON	Form 990 (2009)
SEE SCHEDUUE UTZ FUK	rant V.			اندر		$\perp \cup \perp$	w 1	a continualt	CATA	FULL 337 (2009)

_		(2009) SPART	ANBURG,	INC.			57-0986	224 Page 9
Pa	rt VI	II 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
ts its	1 a	Federated campaigns	1a					
e a	b	Membership dues	1b					
am, g	С	Fundraising events	1c					
<u>ag</u>	d	Related organizations	. 1d					
n's	е	Government grants (contribut	ions) 1e	323,695.				
er Bi	f	All other contributions, gifts, gran						
Contributions, gifts, grants and other similar amounts		similar amounts not included abo	ve 1f	1563223.				
<u>5</u> <u>5</u>	_	Noncash contributions included in lines	: 1a-1f \$		1006010			
0 0	h	Total. Add lines 1a-1f		<u> </u>	1886918.			
	_	COUCOI BEEC		Business Code	101 007			101 007
Š		SCHOOL FEES	•	900099	121,927.			121,927.
ie g	b	SALES - TICKETS SALES - GIFT SH		900099	67,129. 41.			67,129. 41.
Program Service Revenue	ب 2			300033	41.			41.
2	d						·	
유	e	All other program service reve	20116				•	-
		Total. Add lines 2a-2f	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		189,097.			
	3	Investment income (including	dividends, intere					
		other similar amounts)	•	▶	19,293.			19,293.
	4	Income from investment of ta	x-exempt bond p	oroceeds 🕨			· · · · · ·	
	5	Royalties		>				·
			(i) Real	(ii) Personal				
	6 a	Gross Rents	527528.					
	b	Less. rental expenses						
	С	Rental income or (loss)	527528.	l				
		Net rental income or (loss)		, >	527,528.	527,528.		
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	-					
	b	Less cost or other basis	1			ł		
		and sales expenses						
		Gain or (loss)	L	<u> </u>				
		Net gain or (loss)		<u></u>				
Ę	ва	Gross income from fundraisin including \$	g events (not of					
ĕ		contributions reported on line						
Æ.		Part IV, line 18	а					
Other Revenue	h	Less. direct expenses	b					
0		Net income or (loss) from fund	_					
		Gross income from gaming ac	=					
		Part IV, line 19	а					
	b	Less direct expenses	b					
	С	Net income or (loss) from gam	ning activities					
	10 a	Gross sales of inventory, less	returns					
		and allowances	а			İ		
	b	Less cost of goods sold	. b					
	c	Net income or (loss) from sale		. ▶				
		Miscellaneous Revenu	18	Business Code	<u></u>			
		SALES - OTHER		900099	41,700.			41,700.
	b	MISCELLANEOUS	·····	900099	29,250.			29,250.
	C							
		All other revenue	•	L	70 050			
	e 12	Total. Add lines 11a-11d Total revenue. See instructions.			70,950. 2693786.		n	279,340.
	14	TOTAL TETETINE, OUG HIBLIUCHUIID.			2073/00 el		U •	

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Form 990 (2009) SPARTANBURG, INC.
Part IX Statement of Functional Expenses

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

	All other organizations must comp	lete column (A) but are	not required to comple	ete columns (B), (C), and	
	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	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	2,267,409.	2,267,409.		
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	128,328.	12,833.	83,413.	32,082.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	FC0 004	202 677	151 010	125 400
7	Other salanes and wages	569,994.	282,677.	151,818.	135,499.
8	Pension plan contributions (include section 401(k)	1,317.	316.	659.	342.
9	and section 403(b) employer contributions)	51,217.	19,476.	26,950.	4,791.
_	Other employee benefits Payroll taxes	42,906.	9,702.	22,639.	10,565.
10	Fees for services (non-employees)	42,300.	9,102.		10,505.
11 a					
b	Legal	1,032.			1,032.
C	Accounting	39,583.		39,583.	1,0320
d	Lobbying	33/303.		33/3031	· · · · · · · · · · · · · · · · · · ·
e	D (
f	Investment management fees				
g	Other	206,194.	136,316.	31,627.	38,251.
12	Advertising and promotion	20,612.	9,143.	3,552.	7,917.
13	Office expenses	50,039.	13,042.	4,712.	32,285.
14	Information technology				
15	Royalties				
16	Occupancy	274,073.	264,181.	9,255.	637.
17	Travel	2,921.	1,625.	719.	577.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	17,051.	11,955.	4,120.	976.
20	Interest .	140,888.	135,803.	4,757.	328.
21	Payments to affiliates	1 057 046	1 010 050	25 600	0.450
22	Depreciation, depletion, and amortization	1,057,216.	1,019,058.	35,699.	2,459.
23	Insurance	45,233.		45,233.	.
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.) TELEPHONE	25,078.		25,078.	
a	EQUIPMENT RENTAL AND MA	24,138.		24,138.	
b	MISCELLANEOUS	14,992.	14,992.	24,130.	
ت بہ	WRITEOFF OF PLEDGES	14,300.	12,334.	14,300.	
a e	MISCELLANEOUS	12,018.		14,300.	12,018.
f	All other expenses	67,352.	9,143.	32,692.	25,517.
25	Total functional expenses. Add lines 1 through 24f	5,073,891.	4,207,671.	560,944.	305,276.
26	Joint costs. Check here J 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 990 (2009)

SPARTANBURG, INC.

57-0986224 Page 11

rai	τX	Balance Sheet				
		•		(A) Beginning of year		(B) End of year
	1.	Cash - non-interest-bearing		·	1	-2.
	2	Savings and temporary cash investments		5,958,883.	2	4,485,427.
	3	Pledges and grants receivable, net	_	7,943,124.	3	6,089,695.
	4	Accounts receivable, net		23,548.	4	21,847.
	5	Receivables from current and former officers, directors, trus	tees, key	,		
		employees, and highest compensated employees. Complet	e Part II		1	
		of Schedule L			5	
	6	Receivables from other disqualified persons (as defined und	der section			
		4958(f)(1)) and persons described in section 4958(c)(3)(B).				
		Part II of Schedule L			6	
ς,	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use	2,674.	8		
As	9	Prepaid expenses and deferred charges		41,232.	9	
	-	Land, buildings, and equipment: cost or other				
			34,451,268.			
	h	Less: accumulated depreciation 10b	2,990,235.	32,247,074.	10c	31,461,033.
	11	Investments - publicly traded securities		0-7	11	02/102/0001
	12	Investments - other securities See Part IV, line 11			12	
	13	Investments - program-related See Part IV, line 11			13	
	14	Intangible assets		<u> </u>	14	
	15	Other assets. See Part IV, line 11		2,000.	15	2,000.
	16	Total assets. Add lines 1 through 15 (must equal line 34)		46,218,535.	16	42,060,000.
	17	Accounts payable and accrued expenses	•	111,463.	17	192,183.
	18	Grants payable	5,493.	18	10,465.	
	19	Deferred revenue		846.	19	16,985.
	20	Tax-exempt bond liabilities		8,000,000.	20	6,000,000.
"	21	Escrow or custodial account liability. Complete Part IV of Se	chedule D	0,000,000.	21	0,000,000
Liabilities	22	Payables to current and former officers, directors, trustees,			~-	,
ilidi		highest compensated employees, and disqualified persons		£ -		
Lia		of Schedule L	Complete Fait II	n russia arsikta kiisissi r	22	
	23	Secured mortgages and notes payable to unrelated third pa	arties		23	
	24	Unsecured notes and loans payable to unrelated third parti		250,000.	24	399,092.
	25	Other liabilities. Complete Part X of Schedule D		149,342.	25	119,989.
	26	Total liabilities. Add lines 17 through 25		8,517,144.	26	6,738,714.
		Organizations that follow SFAS 117, check here	and complete	( ) ( ) put		
S		lines 27 through 29, and lines 33 and 34.				1
nce	27	Unrestricted net assets		34,158,856.	27	32,361,709.
ala	28	Temporanly restricted net assets		3,542,535.	28	2,959,577.
g p	29	Permanently restricted net assets			29	
5		Organizations that do not follow SFAS 117, check here	and			-
P		complete lines 30 through 34.		į,		
ts	30	Capital stock or trust principal, or current funds		' ' '	30	. ~
SSE	31	Paid-in or capital surplus, or land, building, or equipment fu	nd		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or ot			32	
ž	33	Total net assets or fund balances		37,701,391.	33	35,321,286.
	34	Total liabilities and net assets/fund balances		46,218,535.		42,060,000.

SPARTANBURG, INC. Form 990 (2009) 57-0986224 Page 12 Part XI Financial Statements and Reporting No Yes Accounting method used to prepare the Form 990 Cash X Accrual Other If the organization changed its method of accounting from a pnor year or checked "Other," explain in Schedule O 2a Were the organization's financial statements compiled or reviewed by an independent accountant? X 2a b Were the organization's financial statements audited by an independent accountant? X 2b 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? X 2c 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: X Separate basis Consolidated basis Both consolidated and separate basis 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? X За 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

Form 990 (2009)

932012 02-04-10

### **SCHEDULE A**

Department of the Treasury

Internal Revenue Service

(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

Name of the organization

THE ARTS PARTNERSHIP OF GREATER

Employer identification number SPARTANBURG, INC. 57-0986224

Part I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	te this part	) See inst	tructions				
he organ			because it is. (For lines 1									
1			s, or association of churc	_		-		١.				
2 🔲	A school des	cribed in section 17	0(b)(1)(A)(ii). (Attach Sc	hedule E.)								
3 🗔			tal service organization of		n section	170/h)/1)/	ΔViii)					
4			operated in conjunction					(b)/ 1)/ A)(ii	ii). Enter th	e hospital	's nam	e.
<del>-</del>	city, and stat				pa. 5555.		0	(=)( •)(• •)(	.,,	ooopu	J	,
5 🗀	An organizati	on operated for the	benefit of a college or ur	niversity ov	wned or op	perated by	a governi	nental un	t described	d in		
	section 170	<b>(b)(1)(A)(iv).</b> (Comple	ete Part II)									
6			ent or governmental und									
7 X	-	•	eives a substantial part	of its supp	ort from a	governme	ntal unit c	r from the	general pu	ublic desc	nbed II	n
		b)(1)(A)(vi). (Comple		(O · · · · I · I ·	0							
8 -			ection 170(b)(1)(A)(vi).				L4		_			£
9			eives: (1) more than 33 1							-		
			nctions - subject to certa									
			axable income (less sect	ion 511 ta	x) trom bu	sinesses a	icquirea o	y tne orga	inization at	ter June 3	0, 197	5
		509(a)(2). (Complete	•					- 5.				
	_		perated exclusively to te	=	-			•				
וו נו	-	•	perated exclusively for the						•			or
			itions described in section				!). See <b>se</b> d	ction 509(	a)(3). Chec	k the box	that	
			organization and comple		_				. —			
	a Type I		• •	Typ		•	_	_		Type III - (		
e	-		t the organization is not				-		•			n
_		_	han one or more publicly		-				9(a)(1) or se	ection 509	(a)(2)	
f	-		ten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	<b>→ (()</b>				
	•	rganization, check th		_				•	٠			
g	-		rganization accepted ar			-						
			rectly controls, either al	one or tog	ether with	persons o	lescribed	ın (ii) and (	iii) below,	Г	Yes	No
	-		upported organization?							11g(i)		
	• • •	•	described in (i) above?	•						11g(ii)		
	• •		person described in (i) o	• •						11g(iii)		
h	Provide the f	ollowing information	about the supported org	ganization	(s)							
(i) Name	of supported	(ii) EIN	(iii) Type of	(iv) Is the o	rganization	(v) Did voi	ı notify the	(vi) !s	the	(vii) An	nount o	<u> </u>
	inization	(11) E 114	organization	in col. (i) lis				organizati	on in col.	nA (iiv)	port	'
J. 9.			described on lines 1-9 above or IRC section	governing	document?	(i) of you	support?	(i) organiz U.S	.7		<b>P</b> 0. 1	
			(see instructions))	Yes	No	Yes	No	Yes	No			
		•										
										<del></del>		
									<del>                                     </del>			
											-	
ntal					İ	1						

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

Schedule A (Form 990 or 990 EZ) 2009 SPARTANBURG, INC. 57-0986224 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 include any "unusual grants") 1,882,942 4,783,746 7,039,115 1,576,394 1,886,918, 17,169,115, 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 4 Total. Add lines 1 through 3 1,882,942 7,039,115 1_576_394 4,783,746 1,886,918, 17,169,115. 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) 2.875.099. 6 Public support. Subtract line 5 from line 4 14 294 016. Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (d) 2008 (c) 2007 (e) 2009 (f) Total 7 Amounts from line 4 1,882,942 4,783,746 7,039,115 1,576,394 1,886,918 17,169,115, 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties 693,250. 390,981. 783,447. 712,606. 617,771. and income from similar sources 3,198,055. 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 . 1 200 20,367,170, 12 Gross receipts from related activities, etc. (see instructions) 861,544. 12 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 70.18 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 75.33 15 Public support percentage from 2008 Schedule A, Part II, line 14 15 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  $\triangleright \overline{\mathbf{X}}$ 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		

Page 3

Pa	rt III Support Schedule for C	Organizations	Described in	Section 509(a	)(2) (Complete only	if you checked the bo	ox on line 9 of Part I.)
	tion A. Public Support			¥		_	
Cale	endar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Grfts, grants, contributions, and membership fees received. (Do not include any "unusual grants ")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ- ization'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						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and	+=					
b	3 received from disqualified persons  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						
¢	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6) ction B. Total Support		, .			<u> </u>	L
		1 ) 0005	4 > 0000	4-3-0007	(-D.0000	(-) 0000	(0 T-t-l
9	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
11	Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
	Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here	the organization	s first, second, the	rd, fourth, or fifth t	ax year as a section	L on 501(c)(3) organiz	zation,
Sec	ction C. Computation of Publ	ic Support Pe	ercentage			•	
	Public support percentage for 2009 (			column (f))		15	%
16	Public support percentage from 2008					16	%
	ction D. Computation of Inves						
	Investment income percentage for 20					17	%
18	Investment income percentage from	<b>2008</b> Schedule A,	Part III, line 17			18	%
19a	33 1/3% support tests - 2009. If the	organization did	not check the box	on line 14, and line	e 15 is more than :	33 1/3%, and line	17 is not
	more than 33 1/3%, check this box a	nd <b>stop here.</b> The	organization qual	fies as a publicly s	supported organiza	ation	▶□
b	33 1/3% support tests - 2008. If the line 18 is not more than 33 1/3%, che	=					. —
20	Private foundation. If the organization		•	•		_	<b>_</b>

### **SCHEDULE C**

(Form 990 or 990-EZ)

### **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is described below.

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

West Mark Comment West Mark France Con Data No. 17 Con Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fig. 100 Fi

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

Name of organization  THE ARTS PARTNERSHIP OF GREATER  SPARTANBURG INC.  Part I-A   Complete if the organization is exempt under section 501(c) or is a section 527 organization.  Provide a description of the organization's direct and indirect political campaign activities in Part IV  Political expenditures  V   Political expenditures  V   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very   Very	Section 501(c)(4), (5), or (6) organizat			<del> </del>	
Part I-A   Complete if the organization is exempt under section 501(c) or is a section 527 organization.  1 Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours  Part.I-B   Complete if the organization is exempt under section 501(c)(3).  1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?  4 Was a correction made?  5 If Yes, 'describe in Part IV  Part.I-C   Complete if the organization is exempt under section 501(c), except section 501(c)(3).  1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function activities 4 Did the filing organization file Form 1120-POL for this year?  4 Did the filing organization file Form 1120-POL for this year?  5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made For each organization listed, enter the amount paid from the filing organization is funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV  (a) Name  (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter 0. Infiling organization's funds. If none, enter 0. Infiling organization's funds are part of political organization's funds. If none, enter 0. Infiling organization's funds. If none, enter 0. Infiling organization's funds or a separate political organization is funds. If none, enter 0			GREATER	Emp	
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2 Political expenditures 3 Volunteer hours  Part I-B Complete if the organization is exempt under section 501(c)(3).  1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?  Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).  1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b 4 Did the filing organization file Form 1120-POL for this year?  4 Did the filing organization file Form 1120-POL for this year?  5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization's funds. If none, enter -0.  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization organization organization's funds. If none, enter -0.  (e) Amount of political orthbutions received and promptly and directly delivered to a separate political organization's funds. If none, enter -0.	<u> </u>	•		<del> </del>	organization.
Part I-B   Complete if the organization is exempt under section 501(c)(3).  1		ation's direct and indirect politic	cal campaign activities		
Part I-B Complete if the organization is exempt under section 501(c)(3).  1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4 Was a correction made? 5 If "Yes," describe in Part IV  Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).  1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b 4 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV  (a) Name  (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter ·0·. (e) Amount of political contributions received and promptly and directly delivered to a separate political organization.	· ·			▶ \$	
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exempt function activities	1 Enter the amount directly expended	by the filing organization for se	ction 527 exempt fund	ction activities . > 9	S
Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b  Did the filing organization file Form 1120-POL for this year?  Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter -0- contributions received and promptly and directly delivered to a separate political organization	2 Enter the amount of the filing organ	ization's funds contributed to of	ther organizations for s	section 527	
Inter 17b  Did the filing organization file Form 1120-POL for this year?  Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter -0- contributions received and promptly and directly delivered to a separate political organization	exempt function activities	·· ··· ·		▶\$	S
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5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV  (a) Name  (b) Address  (c) EIN  (d) Amount paid from filing organization's funds. If none, enter -0  (e) Amount of political contributions received and promptly and directly delivered to a separate political organization	line 17b			▶9	S
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filing organization's contributions received and funds. If none, enter -0 promptly and directly delivered to a separate political organization	(PAC). If additional space is needed	i, provide information in Part IV	<del></del>	· <del></del>	<del></del>
funds. If none, enter -0 promptly and directly delivered to a separate political organization	(a) Name	(b) Address	(c) ElN	, , ,	
delivered to a separate political organization				, , ,	1
				fullus. Il florie, effici -o	
If none, enter -O-					
					If none, enter -0-
		·			

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

Schedule C (Form 990 or 990-EZ) 2009

Schedule C (Form 990 or 990 EZ) 2009	SPARTAI	NBUR	G, INC.	OF GREATER	57-0	986224	Page 2
Part II-A Complete if the org			npt under section	n 501(c)(3) and fil	ed Form 5768		
election under sec	tion 501(h))	)		·			
A Check 🕨 🔙 if the filing organiza	ation belongs to	an affili	ated group.				
B Check 🕨 if the filing organiza	tion checked b	ox A an	d "limited control" pro	visions apply	<del> </del>		
	its on Lobbyin ditures" mean		ditures nts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated total	• .
1a Total lobbying expenditures to infli	uence public o	pinion (g	rass roots lobbying)				
b Total lobbying expenditures to infli	uence a legisla	tive bod	y (direct lobbying)				
c Total lobbying expenditures (add li							
d Other exempt purpose expenditure	es				4,641,522.		
e Total exempt purpose expenditure	es (add lines 1c	and 1d	)		4,641,522.		_ <del></del>
f Lobbying nontaxable amount Enti-	er the amount t	from the	following table in both	n columns.	382,076.		
If the amount on line 1e, column (a) o	or (b) is:	The lobb	ying nontaxable amo	ount is:			
Not over \$500,000	· · ·	20% of t	he amount on line 1e.				
Over \$500,000 but not over \$1,000	ess over \$500,000	*,*					
Over \$1,000,000 but not over \$1,5							
Over \$1,000,000 but not over \$1,500,000     \$175,000 plus 10% of the excess over \$1,000,000.       Over \$1,500,000 but not over \$17,000,000     \$225,000 plus 5% of the excess over \$1,500,000.							
Over \$17,000,000 \$1,000,000.							
g Grassroots nontaxable amount (enter 25% of line 1f) 95,519.							
h Subtract line 1g from line 1a If zer	ro or less, enter	r - <b>0</b> -			0.		
i Subtract line 1f from line 1c. If zero	o or less, enter	-0-			0.		
j If there is an amount other than ze	ero on either line	e 1h or l	ine 1i, did the organiza	ation file Form 4720			
reporting section 4911 tax for this	year?					Yes	☐ No
	4-Y	ear Ave	raging Period Under	Section 501(h)			
(Some organiz	zations that m	ade a se	ection 501(h) election	do not have to comp	olete all of the five		
co	olumns below.	See the	instructions for line	s 2a through 2f on pa	age 4.)		
	Lobbying	g Expen	ditures During 4-Yea	r Averaging Period	·		
Calendar year (or fiscal year beginning in)	(a) 2006	5	<b>(b)</b> 2007	(c) 2008	( <b>d)</b> 2009	( <b>e)</b> To	tal
2a Lobbying nontaxable amount	257,	872.	475,651.	363,131.	382,076.	1,478	,730.
<ul> <li>b Lobbying ceiling amount</li> </ul>	[		•				
(150% of line 2a, column(e))					,	2,218	<u>,095.</u>
c Total lobbying expenditures	80,	000.				80	,000.
d Grassroots nontaxable amount	64,	468.	118,913.	90,783.	95,519.	369	,683.
e Grassroots ceiling amount (150% of line 2d, column (e))					-#*	554	,525.
	t .					i	

Schedule C (Form 990 or 990-EZ) 2009

f Grassroots lobbying expenditures

THE ARTS PARTNERSHIP OF GREATER Schedule C (Form 990 or 990-EZ) 2009 SPARTANBURG, INC. 57-0986224 Page 3 Part II-B | Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)). (a) (b) Yes No **Amount** During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? If "Yes," describe in Part IV Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912

d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes."

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	-	
	expenses for which the section 527(f) tax was paid).		
а	Current year	2a	
ь	Carryover from last year	2b	
С	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess		
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political		
	expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV | Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1: Also, complete this part for any additional information

### 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.

THE ARTS PARTNERSHIP OF GREATER

Open to Public Inspection

Name of the organization **Employer identification number** SPARTANBURG, INC. 57-0986224 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate contributions to (during year) 2 Aggregate grants from (during year) 3 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or pleasure)

Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c

Preservation of an historically important land area

Preservation of a certified historic structure

d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax vear -Number of states where property subject to conservation easement is located

violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i)

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of

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

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

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

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

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

(ii) Assets included in Form 990, Part X

Protection of natural habitat

Preservation of open space

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

a Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

	\$	
•	\$ 	

Yes

		BURG, INC.		·						Page <b>2</b>
Par	t III Organizations Maintaining C	ollections of A	rt, Hist	torical Tr	reasures, c	or Oth	er Simi	lar Asse	ts (contir	ued)
3	Using the organization's acquisition, accessi	on, and other record	ds, checl	k any of the	following tha	it are a s	significan	t use of its	collection	ıtems
	(check all that apply)									
а	Public exhibition	(	d .	Loan or exc	change progra	ams				
b	Scholarly research	•	e	Other						
C	Preservation for future generations									
4	Provide a description of the organization's co	ollections and expla	in how th	ney further t	the organizati	on's exe	empt pun	oose in Par	t XIV.	
5	During the year, did the organization solicit o	r receive donations	of art, hi	storical trea	asures, or oth	er sımıla	ar assets			
	to be sold to raise funds rather than to be ma	aintained as part of	the orga	nization's c	ollection?				Yes	No_
Par	t IV   Escrow and Custodial Arran	gements. Comp	lete if org	ganization a	nswered "Ye	s" to Fo	rm 990, F	art IV, line	9, or	
	reported an amount on Form 990, Par	rt X, line 21.								
1a	Is the organization an agent, trustee, custod	ian or other interme	diary for	contribution	ns or other as	sets no	t include	t	_	
	on Form 990, Part X?								Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fe	ollowing	table						
									Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f	<u> </u>		
2a	Did the organization include an amount on Fe	orm 990, Part X, line	e 21?						Yes	☐ No
ь	If "Yes," explain the arrangement in Part XIV.	•								
Par	t V Endowment Funds. Complete	f the organization a	nswered	"Yes" to Fo	orm 990, Part	IV, line	10			
		(a) Current year	(b) F	nor year	(c) Two yea	rs back_	(d) Three	years back	(e) Four	years back
1a	Beginning of year balance				ζ.	* 1	5	· · · · · ·	* ***,	
b	Contributions .				કુ પર્કો છ	. 4		, 25 ° 7 ° ° %	, ~ ~ ~	
С	Net investment earnings, gains, and losses				1. 4. 354.8 5		1.6	18 July 1	, se	, *
d	Grants or scholarships				2000		Mr. Jacon	wij. jy		1133
е	Other expenditures for facilities				*		2. (2.58°)	`,î`		
	and programs					. 14 40	16.		,	
f	Administrative expenses					~\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	× /.		777	183,
g	End of year balance				32.5	14		· 445,5°	750	<u> </u>
2	Provide the estimated percentage of the year	r end balance held	as:		•					
а	Board designated or quasi-endowment		_%							
b	Permanent endowment ▶	%								
С	Term endowment	%								
За	Are there endowment funds not in the posse	ession of the organia	zation tha	at are held a	and administe	ered for	the organ	nization		
	by:									Yes No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organization:	s listed as required	on Sche	dule R?					3b	
4	Describe in Part XIV the intended uses of the	e organization's end	lowment	funds.						
Pai	t VI Investments - Land, Building	gs, and Equipm	nent. Se	ee Form 990	D, Part X, line	10.				
	Description of investment	(a) Cost or	other	(b) Cos	t or other	(c) A	Accumula	ited	(d) Book	value
	·	basis (invest	tment)	basis	(other)	de	epreciatio	on		
1a	Land							1- 1		
b	Buildings			31,51	11,023.	2,	293,	069. 2	9,217	7,954.
	Leasehold improvements				58,135.			501.		3,634.
d	_				72,110.		687,			1,445.
	Other									
	i. Add lines 1a through 1e (Column (d) must e	equal Form 990, Par	t X, colur	mn (B), line	10(c).)			🕨 🗓	1,461	1,033.

Part VII   Investments - Other Securities. See Form 990, Part X, line 12   (a) Description of secunty or category (including name of secunty)   (b) Book value   (c) Method of valuation Cost or end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of-year market values in the cost of end-of		Page 3
(including name of security)  Financial derivatives  Closely-held equity interests  Other  Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)  Part VIII Investments - Program Related. See Form 990, Part X, line 13  (c) Method of valuation:		
Closely-held equity interests  Other  Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)  Part VIII   Investments - Program Related. See Form 990, Part X, line 13  (c) Method of valuation:	ue	
Closely-held equity interests  Other  Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)  Part VIII Investments - Program Related. See Form 990, Part X, line 13  (c) Method of valuation:		
Other  Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶  Part VIII Investments - Program Related. See Form 990, Part X, line 13  (c) December of investment time.		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)  Part VIII Investments - Program Related. See Form 990, Part X, line 13  (c) December of investment time.		
Part VIII Investments - Program Related. See Form 990, Part X, line 13  (c) Method of valuation:	<del></del>	
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Part VIII Investments - Program Related. See Form 990, Part X, line 13  (c) Method of valuation:		
(c) Method of valuation:		
	ue	
l l		
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶		
Part IX Other Assets. See Form 990, Part X, line 15.		
	b) Book valu	10
,		
Total. (Column (b) must equal Form 990, Part X, col (B) line 15.)		
Part X Other Liabilities. See Form 990, Part X, line 25.		
1. (a) Description of liability (b) Amount		
Federal income taxes		
INTEREST PAYABLE 119,989.		
INTEREST PATABLE 117,707.		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) 119, 989.		
2. FIN 48 Footnote in Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization		

Sche	dule D (Form 990) 2009 SPARTANBURG, INC.							0986224	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to	o Audi	ted Fin	anc	ial S	tate	ment	:S	
1	Total revenue (Form 990, Part VIII, column (A), line 12)				1			2,693	786.
2	Total expenses (Form 990, Part IX, column (A), line 25)			ſ	2			5,073	
3	Excess or (deficit) for the year Subtract line 2 from line 1				3			-2,380	
4	Net unrealized gains (losses) on investments				4				
5	Donated services and use of facilities	•			5		-		
6	Investment expenses				6				
7	Prior period adjustments		_		7				
8	Other (Describe in Part XIV)			[	8				
9	Total adjustments (net) Add lines 4 through 8			. [	9				0.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 a	nd 9			10			-2,380	,105.
Pa	t XII Reconciliation of Revenue per Audited Financial Statem	ents W	/ith Re	ven	ue p	er Re	eturn	1	
1	Total revenue, gains, and other support per audited financial statements						1	2,675	780.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12					ŀ	ŀ		
а	Net unrealized gains on investments	2a					1		
b	Donated services and use of facilities	2b							
С	Recoveries of prior year grants	2c							
d	Other (Describe in Part XIV.)	2d	<u> </u>	1!	5,24	41.	i		
е	Add lines 2a through 2d					ļ	2e	<u>15</u> _	,241.
3	Subtract line 2e from line 1						3	2,660	<u>,539.</u>
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		1			Ì			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a							
b	Other (Describe in Part XIV)	4b	ļ	3	3,24	<u>47.</u>			
С	Add lines 4a and 4b						4c		<u>, 247.</u>
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		F				5	2,693	<u>,786.</u>
Pa	rt XIII Reconciliation of Expenses per Audited Financial Staten	nents \	With E	xpe	nses	per	Hetu		0.40
1	Total expenses and losses per audited financial statements					ļ	1	3,460	,243.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1	ı						
а	Donated services and use of facilities	- <u>2a</u>							
b	Prior year adjustments	2b	ļ						
С	Other losses	2c	ļ				ردد		
d	Other (Describe in Part XIV)	2d	l						^
e	Add lines 2a through 2d					ŀ	2e	3,460	242
3	Subtract line 2e from line 1					ŀ	3	3,460	, 443.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1.	1	ı						
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1	61	3,64	40	325		
	Other (Describe in Part XIV)	4b	1	01	3,0	±0.		1,613	618
	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	•		•		ŀ	4c 5	5,073	
	rt XIV Supplemental Information						3 1	3,013	,091.
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part	III lines	10 and 4	· Do	+ I\/ Iu	200 1h	and '	2h Bart V line	1: Dort
	e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XII, lines 2d and 4b. Also com								4, ran
	RT XII, LINE 4B: INVESTMENT INCOME, SPART								
	THE TOTAL TO THE THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF T			00.			J11121	11 1 011	
\$1!	5,241,								
<u> </u>	- 1 = = -1 <u> </u>							_	
PAI	RT XIII, LINE 2D: SPARTANBURG COUNTY FOUNT	DATIC	N CO	NT	RIBU	JIO	NTS	- \$26,0	000:
				_					
IN	VENTORY ADJUSTMENT - \$7,247: TOTAL \$33,247	7		_					
PAI	RT XIII, LINE 4B: COST OF SALES - \$7,247;	PAYM	ENTS	T	0 S	PAR	<u>ran</u>	BURG CO	UNTY
FO	$\frac{\text{JNDATION} - \$1,606,401; \text{ TOTAL} = \$1,613,648.}{\text{TOTAL}} = \$1,613,648.$	)							

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, ► Attach to Form 990. OF GREATER THE ARTS PARTNERSHIP Name of the organization Department of the Treasury Internal Revenue Service SCHEDULEI (Form 990)

Open to Public Inspection **Employer identification number** 

57-0986224

° ⊠ (h) Purpose of grant DPERATING ASSISTANCE DPERATING ASSISTANCE DPERATING ASSISTANCE DPERATING ASSISTANCE OPERATING ASSISTANCE or assistance , √es 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

(d) Amount of range and address of organization or government range is a sistance or government received more than \$5,000 Use Part IV and Schedule i-1 (Form 990) if additional space is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpose is needed (h) Purpo 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 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection ö Ö 0 o, ö Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States 13,300 47,015, 112,528 19,000 111,953 501(C)3 501(C)3 501(C)3 501(C)3 501(C)3 57-0924104 57-0661215 57-0658124 23-7041876 57-1075597 General Information on Grants and Assistance critena used to award the grants or assistance? 1 (a) Name and address of organization THE ARTISTS' GUILD OF SPARTANBURG CAROLINA FOOTHILLS ARTISAN CENTER ASSOCIATION - 200 EAST ST JOHN SPARTANBURG COUNTY HISTORICAL SPARTANBURG SCIENCE CENTER 124 WEST CHEROKEE STREET 200 EAST ST JOHN STREET 200 EAST ST JOHN STREET 200 EAST ST JOHN STREET 200 EAST ST JOHN STREET SPARTANBURG ART MUSEUM SPARTANBURG SC 29306 SPARTANBURG SC 29306 SPARTANBURG, SC 29306 SPARTANBURG, SC 29306 BALLET SPARTANBURG SC 29323 CHESNEE Part Part II

Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations ત

STREET - SPARTANBURG, SC 29306

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

Schedule I (Form 990) 2009

DPERATING ASSISTANCE

102,357

57-6025123 |501(C)3

## THE ARTS PARTNERSHIP OF GREATER SPARTANBURG, INC.

Schedule i (Form 990) 2009 SPARTANBURG, INC.

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

Page 2

57-0986224

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
					-
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information	de the information	required in Part I,	line 2, and any other	additional information	

Department of the Treasury Internal Revenue Service SCHEDULE 1-1 (Form 990)

Continuation Sheet for Schedule I (Form 990)

OMB No 1545-0047 Open, to Public

Schedule I-1 (Form 990) 2009 (h) Purpose of grant or assistance OPERATING ASSISTANCE DPERATING ASSISTANCE OPERATING ASSISTANCE Employer identification number Inspection FUND ENDOWMENT 57-0986224 (g) Description of non-cash assistance Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) appraisal, other) (f) Method of valuation (book, FMV, ► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III. 0 0 Ö Ö (e) Amount of non-cash assistance (d) Amount of cash grant 112,234 114,426 1,606,400 7,505 OF GREATER (c) IRC section if applicable 501(C)3 501(C)3 501(C)3 501(C)3 THE ARTS PARTNERSHIP 57-6002713 57-0485556 57-0351398 57-0861531 SPARTANBURG, INC. (b) EIN THE SPARTANBURG LITTLE THEATRE SPARTANBURG - 200 EAST ST JOHN STREET - SPARTANBURG, SC 29306 SPARTANBURG COUNTY FOUNDATION SPARTANBURG REPERTORY COMPANY (a) Name and address of organization or government 200 EAST ST JOHN STREET 200 EAST ST JOHN STREET THE MUSIC FOUNDATION OF 424 EAST KENNEDY STREET SPARTANBURG, SC 29306 SPARTANBURG, SC 29302 SPARTANBURG, SC 29302 Name of the organization

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

### **SCHEDULE J-2**

(Form 990)

**Continuation Sheet for Form 990** 

2009

► Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

See the Instructions for Form 990.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the Organization

THE ARTS PARTNERSHIP OF GREATER SPARTANBURG, INC.

Employer Identification number 57-0986224

SPARTANBO	JKG, IN	<u> </u>							57-098	0444
Part I Continuation of Officers, Di	rectors, Tr	ust	ees	s, K	ey	Em	ple	oyees, and Highes		Employees
(A) Name and title	(B) Average hours	(cl		Pos		арр	ly)	(D) Reportable compensation	<b>(E)</b> Reportable compensation	(F) Estimated amount of
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
DR. THOMAS D WHITE, JR. TRUSTEE		Х						0.	0.	0.
DONALD P WOODWARD TRUSTEE		X						0.	0.	0.
THOMAS R YOUNG III VICE CHAIRMAN		x		x				0.	0.	0.
PERRY MIXTER PRESIDENT & COO	40.00			x		х		115,795.	0.	12,533.
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									100	

SCHEDULEK (Form 990)

# Supplemental Information on Tax-Exempt Bonds

(h) On behalf ş Employer identification number × OMB No 1545-0047 of issuer ŝ ŝ 2009 Open to Public Yes Inspection 57-0986224 (g) Defeased Yes Yes ŝ × Yes ŝ ŝ ۵ (f) Description of purpose Ω Yes Yes 12,000,000, REVENUE BONDS ECONOMIC DEV ▼ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information on Schedule O (Form 990). ŝ ŝ O COLUMN (F) CONTINUATIONS Yes Yes (e) Issue price Attach to Form 990. See separate instructions. ŝ ŝ Ω Φ (d) Date issued 12/07/06 Yes Yes OF GREATER ŝ ŝ A ECONOMIC DEVELOPMENT AUT57-0960018837031PE7 × × × × × (c) CUSIP# O FOR ⋖ Yes Yes SCHEDULE THE ARTS PARTNERSHIP (b) Issuer EIN Was the organization a partner in a partnership, or a member Were the bonds issued as part of a current refunding issue? Does the organization maintain adequate books and records of an LLC, which owned property financed by tax-exempt Were the bonds issued as part of an advance refunding SEE Has the final allocation of proceeds been made? SPARTANBURG, Proceeds in refunding or defeasance escrows Working capital expenditures from proceeds to support the final allocation of proceeds? SOUTH CAROLINA JOBS Capital expenditures from proceeds Gross proceeds in reserve funds Year of substantial completion Issuance costs from proceeds (a) Issuer name Part III Private Business Use Other unspent proceeds Total proceeds of issue Name of the organization Bond Issues Department of the Treasury Internal Revenue Service Proceeds bonds? Issue? Part II Part I 6 7 9 N ß 9 얼 œ O ۵ 4

822121 LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Are there any lease arrangements with respect to the financed

N

property which may result in private business use?

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Schedule K (Form 990) 2009

57-0986224 LNC SPARTANBURG, Part III Private Business Use (Continued) Schedule K (Form 990) 2009

Page 2

Schedule K (Form 990) 2009 % % % ŝ ŝ Yes Yes % 匆 % ŝ ŝ ۵ Ω Yes Yes % % % ŝ ŝ Yes Yes % % % ŝ ŝ m Yes Yes % % % ŝ £ × × × × × × × × Yes Yes business use as a result of unrelated trade or business activity d Was the regulatory safe harbor for establishing the fair market to the financed property which may result in private business Are there any management or service contracts with respect financed property which may result in private business use? other outside counsel to review any management or service Enter the percentage of financed property used in a private Enter the percentage of financed property used in a private Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect 3a Has the organization or the governmental issuer identified contracts or research agreements relating to the financed Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its carried on by your organization, another section 501(c)(3) Does the organization routinely engage bond counsel or a hedge with respect to the bond issue on its books and Were any gross proceeds invested beyond an available Are there any research agreements with respect to the business use by entities other than a section 501(c)(3) 6 Did the bond issue qualify for an exception to rebate? organization, or a state or local government organization or a state or local government 4a Were gross proceeds invested in a GIC? Is the bond issue a variable rate issue? tax-exempt bond liabilities? value of the GIC satisfied? Total of lines 4 and 5 to the bond issue? temporary period? b Name of provider b Name of provider Part IV Arbitrage c Term of hedge c Term of GIC records? g 4 5 9 S

### **SCHEDULE L**

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

### **Transactions With Interested Persons**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,

or Form 990-EZ, Part V, line 38a or 40b.

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

2009

Open To Public Inspection

Schedule L (Form 990 or 990-EZ) 2009

Name of the organization THE ARTS PARTNERSHIP OF GREATER Employer identification number SPARTANBURG, INC. 57-0986224 Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only) Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (c) Corrected? 1 (b) Description of transaction (a) Name of disqualified person Yes No 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a. (f) Approved by board or (a) Name of interested (b) Loan to or from (c) Original principal (e) in (g) Written (d) Balance due person and purpose amount default? the organization? agreement? committee? To From Yes No Yes Yes No **Total** Part III Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27 (a) Name of interested person (b) Relationship between interested person and (c) Amount and type of the organization assistance **Business Transactions Involving Interested Persons.** Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c. (e) Sharing of (a) Name of interested person (b) Relationship between interested (c) Amount of (d) Description of organization's person and the organization transaction transaction revenues? Yes No GENE CONROY BOARD TRUSTEE 111,953 ANNUAL GRAN X REBECCA PITTMAN 7,505 ANNUAL GRAN BOARD TRUSTEE X

SEE SCHEDULE O FOR SCHEDULE L CONTINUATIONS

LHA For Privacy Act and Paperwork Reduction Act Notice, see the

Instructions for Form 990 or 990-EZ.

### **SCHEDULE 0**

(Form 990)

Department of the Treasury Internal Revenue Service

### **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.

Open to Public Inspection

Name of the organization

THE ARTS PARTNERSHIP OF GREATER SPARTANBURG, INC.

Employer identification number 57-0986224

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
CULTIVATES ECONOMIC VITALITY, AND ENCOURAGES EDUCATIONAL ENGAGEMENT
WITH ARTS, SCIENCE AND HISTORY.
FORM 990, PART VI, SECTION A, LINE 2:
MARTHA CHAPMAN AND TOMMY YOUNG: FAMILY RELATIONSHIP
JAMIE FULMER AND TOMMY YOUNG: BUSINESS RELATIONSHIP
FORM 990, PART VI, SECTION B, LINE 11: CURRENTLY THE FORM 990 IS NOT
PROVIDED TO THE ORGANIZATION'S GOVERNING BODY BEFORE IT IS FILED.
FORM 990, PART VI, SECTION B, LINE 12: IN THE EVENT AN EXECUTIVE BOARD
MEMBER OR TRUSTEE HAS A PERSONAL INTEREST OR AN INTEREST THAT RESULTS FROM
MEMBERSHIP ON THE STAFF OR BOARD OF ANOTHER ORGANIZATION RECEIVING GENERAL
OPERATING SUPPORT FROM THE CORPORATION SHALL EXCUSE HIMSELF FROM VOTING ON
THE MATTER IN QUESTION.
FORM 990, PART VI, SECTION B, LINE 15A: THE ONLY COMPENSATED KEY OFFICER OF
THE ARTS PARTNERSHIP IS THE ORGANIZATION'S CEO.
THE CURRENT POLICY IN OFFERING A COMPENSATION PACKAGE TO A NEWLY HIRED CEO

IS TO CONSIDER THE FORMER CEO'S COMPENSATION, CONDUCT A REGIONAL/NATIONAL

SURVEY OF COMPARABLE ORGANIZATIONS FOR COMPENSATION PACKAGES OF THE CEO,

CONDUCT A SURVEY OF COMPENSATION PACKAGES OF CEO'S OF ALL MAJOR NONPROFIT

ORGANIZATIONS IN SPARTANBURG COUNTY, CONSIDER THE ORGANIZATION'S AVAILABLE

### **SCHEDULE O**

(Form 990)

Department of the Treasury Internal Revenue Service

### **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

Name of the organization

THE ARTS PARTNERSHIP OF GREATER SPARTANBURG, INC.

Employer identification number 57-0986224

COMMITTEE CHAIR. ONCE ALL DISCUSSION IS RESOLVED AND AGREED UPON, THE					
BOARD CHAIR IS GIVEN PERMISSION TO NEGOTIATE A COMPENSATION PACKAGE.					
IN ANNUALLY REVIEWING THE CEO, THE BOARD CHAIR AND THE HUMAN RESOURCES					
COMMITTEE CHAIR MEET TO REVIEW THE CEO'S PERFORMANCE FOR THE PRIOR 12					
MONTHS, THEY THEN MEET WITH THE CEO TO DISCUSS HIS PERFORMANCE, SET GOALS					
AND OBJECTIVES FOR THE COMING YEAR, THEY REVIEW THE COMPENSATION PACKAGE					
AND THE ORGANIZATION'S FINANCIAL CONDITION AND MAKE NECESSARY ADJUSTMENTS.					
THE BOARD IS NOT SPECIFICALLY ASKED TO APPROVE A COMPENSATION PACKAGE FOR					
THE CEO, BUT ARE ENCOURAGED TO PROVIDE INPUT DURING THE EVALUATION PROCESS					
PRIOR TO THE COMMITTEE MEETING WITH THE CEO.					
TRIOR TO THE COMMITTED MEDITAG WITH THE CEO.					
FORM 990, PART VI, SECTION C, LINE 19: THE ARTS PARTNERSHIP MAKES ITS					
GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS					
AVAILABLE TO THE PUBLIC UPON REQUEST. TAP'S 990 IS ALSO AVAILABLE ON					
OTHER'S WEBSITES OFFERING NON-PROFIT ORGANIZATION REPORTS.					
SCHEDULE K, PART I, BOND ISSUES:					
(A) ISSUER NAME: SOUTH CAROLINA JOBS - ECONOMIC DEVELOPMENT AUTHORITY					
(B) DESCRIPTION OF PURPOSE: ECONOMIC DEV REVENUE BONDS					
SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:					
(A) NAME OF PERSON: GENE CONROY					
(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:					
BOARD TRUSTEE					

(C) AMOUNT OF TRANSACTION \$ 111953.

### **SCHEDULE 0**

(Form 990)

Department of the Treasury Internal Revenue Service

### 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

Open to Public Inspection

Name of the organization	THE ARTS PAR SPARTANBURG,	INC.	≤ATER 	Employer identification number 57-0986224
(D) DESCRIPTION	N OF TRANSACTI	ON: ANNUAL GRAN	NT	
(E) SHARING OF	ORGANIZATION	REVENUES? = NO		
(A) NAME OF PER	RSON: REBECCA	PITTMAN		
(B) RELATIONSHI	IP BETWEEN INT	ERESTED PERSON	AND ORGANIZATI	ON:
BOARD TRUSTEE				
(C) AMOUNT OF T	TRANSACTION \$	7505.		
(D) DESCRIPTION	N OF TRANSACTI	ON: ANNUAL GRAM	NT	
(E) SHARING OF	ORGANIZATION	REVENUES? = NO		
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