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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)

OMB No 1545-0047 Open to Public

▶ The organization may have to use a copy of this return to satisfy state reporting requirements. JUL 1, 2009 A For the 2009 calendar year, or tax year beginning and ending JUN 30, D Employer identification number Check if C Name of organization Please use IRS Address change label or REGIONAL ARTS & CULTURE COUNCIL print o Name change 93-1059037 type 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 Specifi 823-5111 Termin-ated 08 N.W. NINTH AVE. l3 0 0 (503)Instruc-Amended 5,975,968. G Gross receipts \$ City or town, state or country, and ZIP + 4 Applica-tion pending PORTLAND, OR 97209 H(a) Is this a group return F Name and address of principal officer ELOISE DAMROSCH ີYes ເXີNo for affiliates? SAME AS C ABOVE H(b) Are all affiliates included? Yes No. Tax-exempt status: X 501(c) ( 3 ) (insert no.) 4947(a)(1) or If "No," attach a list, (see instructions) J Website: WWW.RACC.ORG H(c) Group exemption number ▶ K Form of organization: X Corporation Trust Association Other > L Year of formation: 1995 M State of legal domicile: OR Part I Summary Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O Activities & Governance Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets. 22 3 Number of voting members of the governing body (Part VI, line 1a) 22 Number of independent voting members of the governing body (Part VI, line 1b) 4 <u>34</u> Total number of employees (Part V, line 2a) 5 425 6 Total number of volunteers (estimate if necessary) Ō. 7a Total gross unrelated business revenue from Part VIII 7a b Net unrelated business taxable income from 1990 1, Inc. 19 0. 7b **Prior Year Current Year** 5,557,221.5,567,731. 348,388. Contributions and grants (Part VIII, liner)h) Revenue Program service revenue (Part VIII, line 354,866. 78,790. 57,362. 10 Investment income (Part VIII, column A), ines 3 2,487. 5,914.11 Other revenue (Part VIII, column (A), lines 5, 60,63,95,95, and 5,996,791. 5,975,968. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 2,644,779. 2,477,096. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 1,495,786. 1,538,657. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 85,449. **b** Total fundraising expenses (Part IX, column (D), line 25) 1,319,762. 1,746,155. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 5,761,908. 5,460,327. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 536,464. 214,060. Revenue less expenses Subtract line 18 from line 12 Assets or Balances **Beginning of Current Year End of Year** 4,552,107. 5,004,759. 20 Total assets (Part X, line 16) 2,991,272. 3,208,114. 21 Total liabilities (Part X, line 26) 1,560,835. ,796,645. Net assets or fund balances Subtract line 21 from line 20 Signature Block Part II Under penalties of perjury, 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 Signatuse of officer Here JEŃNIFER CIES TREASURER Type or print name and title Preparer's Paid self-P01294356 signature employed Preparer's Firm's name (o CO. LLP EIN > Use Only vours if 808 S.W. THIRD AVENUE, SUITE 700 self-employed),

address, and

PORTLAND, OR 97204

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

Phone no.  $\triangleright$  (503) 222-2515

	950 (2005) REGIONAL PARTS & COLITONS COUNCIL
Pai	t III Statement of Program Service Accomplishments
1	Bnefly describe the organization's mission THROUGH VISION, LEADERSHIP, AND SERVICE, THE REGIONAL ARTS & CULTURE COUNCIL (RACC) WORKS TO INTEGRATE ARTS AND CULTURE IN ALL ASPECTS OF COMMUNITY LIFE.
3 4	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  If "Yes," describe these new services on Schedule O.  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  (Code: (Code: (Code: 2, 539, 046) including grants of \$ 2, 328, 777) (Revenue \$ 175.)
4a	(Code: )(Expenses \$ 2,539,046. including grants of \$ 2,328,777.)(Revenue \$ 175.)  GRANTS PROGRAM - SUPPORTS A DIVERSE RANGE OF ARTS AND CULTURE  ORGANIZATIONS AND ARTISTS. GRANTS ARE AWARDED BASED ON ARTISTIC  EXCELLENCE, PROVEN SERVICE TO THE COMMUNITY, ADMINISTRATIVE COMPETENCE,  AND FISCAL RESPONSIBILITY. THESE GRANTS ARE AVAILABLE TO ARTISTS AND  ORGANIZATIONS IN THE TRI-COUNTY AREA.  RACC DISTRIBUTED GRANT FUNDS TO 87 INDIVIDUAL ARTISTS AND 188 ARTS
	ORGANIZATIONS IN THE PORTLAND TRI-COUNTY AREA. THE AMOUNT DISTRIBUTED INCLUDES AMOUNTS RECEIVED IN GRANTS AS WELL AS THOSE CONSIDERED AGENCY TRANSACTIONS.
4b	(Code: )(Expenses \$ 1,151,046. including grants of \$ )(Revenue \$ 213,425.)  PUBLIC ART - MANAGEMENT OF THE "PERCENT FOR ART" PROJECTS FOR THE CITY  OF PORTLAND, MULTNOMAH COUNTY, AND OTHER AGENCIES AS CONTRACTED,  INCLUDING THE COMMISSIONING AND MAINTENANCE OF PUBLIC ART. THROUGH THE  PUBLIC ART DEPARTMENT, THE ORGANIZATION PROVIDES PUBLIC EDUCATION,  ADVOCACY, AND ASSISTANCE TO COMMUNITIES WHO WISH TO ESTABLISH PUBLIC  ART PROGRAMS.
4c	(Code: )(Expenses
4d	Other program services. (Describe in Schedule O.)
	(Expenses \$ 586,846 · including grants of \$ 111,492 · ) (Revenue \$ )  Total program service expenses ▶ \$ 4,947,712 ·

Form 990 (2009) REGIONAL ART
Part IV Checklist of Required Schedules

			Yes	No
1	ts 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			
Ū	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			_
Ū	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	N/	A
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			l <u></u>
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			l <u></u>
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			l
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable	11	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			
	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			ŀ
	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			
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	Х	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional . 12A X			<u> </u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			,,
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	<u> </u>	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization		1	,
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	ļ	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	<u> </u>	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		1	
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	<u> </u>	<u> </u>
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	<u> </u>	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"		1	۱.,
	complete Schedule G, Part III	19	<u> </u>	X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
		Form	99U (	2009)

orm	990 (2009) REGIONAL ARTS & CULTURE COUNCIL 93-1059	037	P	age 4
Par	t IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the		Ì	
	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		x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
Ŭ	any tax-exempt bonds?	24c		
А	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	<u> </u>	
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			$\vdash$
LJ4	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			<del></del>
U	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			ŀ
	Schedule L, Part I	25b	1	х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	200	-	<del></del> -
26	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			<del></del>
21	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV	<del></del>	<del>                                     </del>	<u> </u>
20	instructions for applicable filing thresholds, conditions, and exceptions):			
_	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	ŀ	X
a	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			<del></del>
·	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		<del>                                     </del>	<del></del> -
30	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations?		$\vdash$	
•	If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		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		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
-	If "Yes," complete Schedule R, Part V, line 2	35	1	Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		1	
	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	1	Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI. lines 11 and 19?		1	1

Form **990** (2009)

Note. All Form 990 filers are required to complete Schedule O.

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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 171			
ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		1
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 34			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	За		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	At any time dunng 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			
	Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
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			
	provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			l
	to file Form 8282?	7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year			
е	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?	7f		X
_	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	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			
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? $N/A$			1
_		8		<del>                                     </del>
9	Sponsoring organizations maintaining donor advised funds.  Did the organization make any taxable distributions under section 4966?  N/A	0-		
a		9a		$\vdash$
b	<u></u>	9b	_	$\vdash$
0	Section 501(c)(7) organizations. Enter:  Initiation fees and capital contributions included on Part VIII, line 12  N/A   10a			
a	Initiation fees and capital contributions included on Part VIII, line 12  Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b			
b i4				
11	Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders  N/A   11a			
_	Gross income from other sources (Do not net amounts due or paid to other sources against		1	1
U	amounts due or received from them.)			
22	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		<del>                                     </del>	<del>                                     </del>

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	1:	<u> </u>	22			
b	Enter the number of voting members that are independent	1	<u> </u>	22			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	ip wı	th any other			_	
	officer, director, trustee, or key employee?			ļ	2		X
3	Did the organization delegate control over management duties customanly performed by or under the	ne di	rect 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	om 9	990 was filed?		4	Х	
5	Did the organization become aware during the year of a material diversion of the organization's asse	ts?			5		X
6	Does the organization have members or stockholders?				6		Х
7a	Does the organization have members, stockholders, or other persons who may elect one or more me	emb	ers of the				
	governing body?				7a		<u>X</u>
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other pe				7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken	dur	ng the year				
	by the following:						
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 real	ache	d at the				
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O				9		<u> </u>
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Fi	reve	nue Coae )				
	- · · · · · · · · · · · · · · · · · · ·			ſ	40-	Yes	No X
	Does the organization have local chapters, branches, or affiliates?			- 1	10a		
D	If "Yes," does the organization have written policies and procedures governing the activities of such	Cha	pters, anniates,		10b		
	and branches to ensure their operations are consistent with those of the organization?  Has the organization provided a copy of this Form 990 to all members of its governing body before the organization provided and the organization provided a copy of this Form 990 to all members of its governing body before the organization provided and organization pro	filing	the form?		11	Х	
11		ming	the lonn?				<del>-</del>
11A	· · · · · · · · · · · · · · · · · · ·				12a	х	
	Does the organization have a written conflict of interest policy? If "No," go to line 13  b Are officers, directors or trustees, and key employees required to disclose annually interests that could give use						_
В	to conflicts?					х	l
_	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	"Yes	s." describe		12b		
·	in Schedule O how this is done		•		12c	Х	
13	Does the organization have a written whistleblower policy?				13	X	
14	Does the organization have a written document retention and destruction policy?				14	X	
15	Did the process for determining compensation of the following persons include a review and approv	al by	y independent				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						
а	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.)						_
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	emer	t with a				
	taxable entity dunng 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 org	ganız	ation'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 filed OR	T /F	24/-1/01	-1-61-			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	1 (50	J1(c)(3)s only) av	allable	tor		
	public inspection. Indicate how you make these available. Check all that apply.  Own website Another's website Upon request						
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents,	conf	lict of interest po	olicy, ar	nd fina	ancial	
	statements available to the public.						
20	State the name, physical address, and telephone number of the person who possesses the books a CINDY KNAPP $-$ (503) 823-5111	and	ecords of the or	ganiza	tion:		
	108 N.W. 9TH AVE., SUITE 300, PORTLAND, OR 97209						
			··· <del>-</del>	-	Form	990	(2009)

# 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."

Check this box if the organization did not compensate any current officer, director, or trustee.

- 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)	(C)		(D)	(E)	(F)				
Name and Title	Average		Position		Reportable	Reportable	Estimated			
	hours	(cl	neck	allt	that	app	ly)_	compensation	compensation	amount of
	per	.to:						from	from related	other
	week	direc				8		the	organizations	compensation
		tee or	ustee			ensat		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	ŀ	af frus	nal tr		loyee	g E E E		(***-27 1055*****1000)		and related
	•	ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Беттег			organizations
		Ē	Ë	6	ş	<b>=</b> 5	ತ			
ALAN ALEXANDER III										
BOARD MEMBER	2.00	X		Ш			<u> </u>	0.	0.	0.
JESSE BEASON									_	
BOARD MEMBER	2.00	Х		Ш		_		0.	0.	0.
GWYNETH GAMBLE BOOTH							1		_	_
BOARD MEMBER	2.00	Х		Ш	_	<u> </u>		0.	0.	0.
JENNIFER C. CIES								_		
BOARD MEMBER	2.00	Х						0.	0.	0.
JAY CLEMENS								_ :		
BOARD MEMBER	2.00	X						0.	0.	0.
KIRA HIGGS										
BOARD MEMBER	2.00	Х						0.	0.	0.
KAREN KARBO										
BOARD MEMBER	2.00	X						0.	0.	0.
PEG MALLOY										
BOARD MEMBER	2.00	X						0.	0.	0.
JOSIE MENDOZA		1								
BOARD MEMBER	2.00	X				L		0.	0.	0.
MAX. M. MILLER, JR.										-
BOARD MEMBER	2.00	X				L	L	0.	0.	0.
JIM NEILL										
BOARD MEMBER	2.00	X						0.	0.	0.
BONITA OSWALD										
BOARD MEMBER	2.00	X				L		0.	0.	0.
BRIAN RICE	1					l				
BOARD MEMBER	2.00	X				L		0.	0.	0.
JAN ROBERTSON	1									
BOARD MEMBER	2.00	Х	L				L.	0.	0.	0.
MARSHALL RUNKEL	1					ĺ				
BOARD MEMBER	2.00	X						0.	0.	0.
TAD SAVINAR										
BOARD MEMBER	2.00	X			L	L	$ldsymbol{ld}}}}}}$	0.	0.	0.
LINA GARCIA SEABOLD										
BOARD MEMBER	2.00	X	L				L	0.	0.	0.
932007 02-04-10										Fa 990 (2000)

Part VII Section A. Officers, Directors, Tru		mpl	oyee	es, a	nd l	High	nest	t Compensated Employ	rees (continued)				
(A)	(B) (C)							(D)	(E)			(F)	
Name and title	Average	١,,		Pos			- 6- 4	Reportable	Reportable		l '	stimate	-
	hours per		hecl	( all )	tnat	Т	DIY) T	compensation	compensation from related		ar	nount other	Οĭ
	week	Individual trustee or director	İ		ŀ			the	organization		con	pensa	tion
		e or d	<u>a</u>		İ	sated		organization	(W-2/1099-MIS	3C)	f	rom th	е
		tuste	al trus		eg.	mpen		(W-2/1099-MISC)				anizat	
		ndual	nstitutional trustee	- E	Key employee	Highest compensated employee	   =				ı	d relat anızatı	
		횰	턀	Officer	Æ	ま	5				l o.g.	umzum	5.15
LORIN WOLFE						T	T	1					-
BOARD MEMBER	2.00	X				L		0.		0.	L		0.
CAROLE MORSE													
BOARD CHAIR	4.00	X	<u> </u>	X	<u> </u>	<u> </u>	$oxed{igspace}$	0.		0.	<u> </u>		0.
CAROL R. SMITH	4 00			,				0.		_			^
BOARD VICE-CHAIR PAMELA KNOWLES	4.00	X	╀	Х	├	├-	╀	0.		0.	<u> </u>		0.
SECRETARY	4.00	x		х	l			0.		0.			0.
CLAUDIA BURNETT		<del>  **</del>	$\vdash$	<u> </u>	$\vdash$	$\vdash$	╁			<del></del>	_		<del>.</del>
TREASURER	4.00	$ \mathbf{x} $		x				0.		0.			0.
ELOISE DAMROSCH		<b>†</b>	1	1	l	1	1						
EXECUTIVE DIRECTOR	40.00			X				112,379.		0.	1	4,1	59.
CYNTHIA KNAPP								100.40					
DIRECTOR OF OPERATIONS	40.00	ļ	ļ	X		ļ	<u> </u>	100,127.		0.	$\frac{1}{1}$	3,3	74.
											l		
		╁	╁		$\vdash$	$\vdash$	-				$\vdash$		
						1							
		1	1	<b>!</b>		T-							
				<u> </u>									
1b Total						<u> </u>		212,506.		0.	2	7,5	33.
2 Total number of individuals (including but r	ot limited to the	nose	liste	ed a	bov	e) w	ho ı	received more than \$100	0,000 in reportable	e			2
compensation from the organization												Yes	No
3 Did the organization list any former officer,	director or tru	ıste	e. ke	v en	olar	vee.	. or	highest compensated ei	mplovee on	1		1.00	
line 1a? If "Yes," complete Schedule J for s			-,	,	-,-	,,					3	İ	X
4 For any individual listed on line 1a, is the su	ım of reportat	le c	omp	ensa	atior	n an	d of	ther compensation from	the organization				
and related organizations greater than \$15											4		X
5 Did any person listed on line 1a receive or	•			from	any	y un	rela	ted organization for serv	ices rendered to				
the organization? If "Yes," complete Scheo	ule J for such	per	son								5		X
Section B. Independent Contractors  1 Complete this table for your five highest co		400						that received many than	\$100,000 of one				
<ol> <li>Complete this table for your five highest co the organization.</li> </ol>	mpensateu m	uep	ena	erii C	OIIL	Iacı	UIS	that received more than	\$ 100,000 or con	ipens	auon	110111	
(A)								(B)			((	C)	
Name and business	address							Description of s	services	C		nsatio	n
YOUNG AUDIENCES OF OREGO								PARTNER FOR					
MORRISON ST, SUITE 900, PORTLAND, OR 97205 BRAIN INITIATIVE								20	2,1	<u>58.</u>			
												-	
								<u> </u>					
2 Total number of independent contractors ( \$100,000 in compensation from the organi	=	not l	ımıte	ed to		se t 1	iste	d above) who received n	nore than				

Form 990 (2009)

Part IX | Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). (B) Program service (C) Management and general expenses (D) Fundraising (A) Total expenses Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to governments and 2,187,355 2,187,355. organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in 2 289,741 289,741. 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 Benefits paid to or for members Compensation of current officers, directors, 240,187 18,976. 221,211. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 277,797. 997,249. 665,667. 53,785. 7 Other salanes and wages Pension plan contributions (include section 401(k) 15,748. 57,799 38,899 3,152. and section 403(b) employer contributions) 7,203. 144,695. 86,804. 50,688. Other employee benefits 37,835. 4,303. 98,727. 56,589. 10 Payroll taxes Fees for services (non-employees): Management **b** Legal 12,692. 12,692. C Accounting Lobbying d Professional fundraising services. See Part IV, line 17 Investment management fees 1,319,865. 1,272,329. 47,296. 240. Other g Advertising and promotion 12 133,197. 81,286. 50,505. 1,406. Office expenses 13 14 Information technology 15 Royalties 113,709. 113,709. 16 Occupancy 24,907. 16,225 7,668. 1,014. 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 497. 33,928. 28,398 5,033. Conferences, conventions, and meetings 19 20 Interest Payments to affiliates 21 35,847. 35,847. 22 Depreciation, depletion, and amortization 6,226. 6,226. 23 Insurance Other expenses, Itemize expenses not covered 24 above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) 13,569. 37,536. 23,967. EQUIPMENT AND MAINT. 28,248. 19,095. 9,028. DUES AND SUBSCRIPTIONS 125. 13,724. 172,779. Ō. -186,503. ADMIN. ALLOCATION C d All other expenses f 5,761,908. 4,947,712. 728,747. 85,449. Total functional expenses. Add lines 1 through 24f Joint costs. Check here ⊥ ıf followına SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

REGIONAL ARTS & CULTURE COUNCIL 93-1059037 Page 11 Form 990 (2009) Part X | Balance Sheet (A) (B) Beginning of year End of year 500. 670,823. 1 Cash - non-interest-bearing 2,251,548. 967,619. 2 2 Savings and temporary cash investments 3 3 Pledges and grants receivable, net 592,182. 605,151. 4 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II 5 of Schedule L Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L 6 Notes and loans receivable, net 7 8 Inventories for sale or use 7,944. 32,479. 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 323,495. basis. Complete Part VI of Schedule D 10a 87,108. 272,234. 51,261. 10c b Less: accumulated depreciation 10b 1,612,825. 2,677,426. 11 Investments - publicly traded securities 12 Investments - other securities See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 15 15 Other assets. See Part IV, line 11 4,552,107. 5,004,759. Total assets. Add lines 1 through 15 (must equal line 34) 16 16 187,717. 468,931. 273,876. Accounts payable and accrued expenses 17 17 441,279. 18 18 Grants payable 2,334,624. 2,492,959. 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D 21 iabilities. Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties 24 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities Complete Part X of Schedule D 25 2,991,272. 3,208,114. Total liabilities. Add lines 17 through 25 26 26 Organizations that follow SFAS 117, check here 

X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 1,290,307. 506,338. 985,737. 27 Unrestricted net assets 27 575,098. 28 28 Temporanly restricted net assets Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here 

and complete lines 30 through 34.

> 5,004,759. Form 990 (2009)

1,796,645.

30 31

32

33

1,560,835.

4,552,107.

30

31

32

33

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Total net assets or fund balances

Paid-in or capital surplus, or land, building, or equipment fund

Retained earnings, endowment, accumulated income, or other funds

review, or compilation of its financial statements and selection of an independent accountant?

X Separate basis Consolidated basis Both consolidated and separate basis

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

consolidated basis, separate basis, or both:

Act and OMB Circular A-133?

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

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

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

Form 990 (2009)

X

2c

За

### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section

ir the organization is a section 50 η(ε)(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

REGIONAL ARTS & CULTURE COUNCIL

Employer identification number

<b>.</b>			L AKIS & COL							3-1039037
Part I	Reason	for Public Char	ty Status (All organiz	ations mu	st complet	e this part	) See inst	tructions.		
The <u>orga</u> n	iization is not a	private foundation l	pecause it is: (For lines 1	1 through 1	11, check	only one b	ox)			
1 🔲	A church, cor	nvention of churches	s, or association of churc	ches desc	nbed in <b>se</b>	ction 170	(b)(1)(A)(i)	<b>).</b>		
2	A school des	cribed in section 17	0(b)(1)(A)(ii). (Attach Sc	hedule E.)						
з 🗀	A hospital or	a cooperative hospit	tal service organization of	described	n section	170(b)(1)(	A)(iii).			
4	A medical res	search organization of	perated in conjunction	with a hos	pıtal desci	rbed in <b>se</b>	ction 170	(b)(1)(A)(iii	i). Enter	the hospital's name,
	city, and stat	<del>-</del>							•	,
5 🗀	• .		benefit of a college or ur	niversity ov	vned or or	erated by	a govern	mental uni	descnb	ed in
-	=	( <b>b)(1)(A)(iv)</b> . (Comple	_	•	•	•	Ū			
6			ent or governmental unit	t described	d in sectio	n 170(b)(1	η(Δ)(ν).			
7 X	•		eives a substantial part					or from the	neneral	nublic described in
	•	b)(1)(A)(vi). (Comple	•	o. No oopp	0.1	90.000			gonora	pasiio acsonoca iii
в 🗀	-		ection 170(b)(1)(A)(vi). (	(Complete	Part II \					
9 🗀	-		eives: (1) more than 33 1		•	rom contri	butions m	nemberchi	n foor a	nd aross receipts from
<b>9</b>	•	•	erves. (1) more than 33 inctions - subject to certa							•
		•	axable income (less sect	•		•				•
			•	lion o i i ta	x) 110111 bu	311103303 6	icquired b	y tile orga	Inzation	alter durie 30, 1373.
40		509(a)(2). (Complete	•	at for mubli	o cafati. S	Soo sostia	n 500(n)(/	4)		
10	•	-	perated exclusively to te	-					. aut tha	numpered of one or
11 📖	•		perated exclusively for that Itions described in section		· -			-		• •
					•		:). See <b>se</b> c	alion sos(a	a)(3). On	eck the box that
		· · · -	organization and compl Type II	Type	_		ografad		а□	Type III - Other
. 🗀	a Type I					-	-	r mara dia		
e 🗀	, ,	•	t the organization is not		-	•	•		•	
		•	nan one or more publicly		-				n(a)(1) or	section 509(a)(z).
f	•		ten determination from t	ine ins tha	ititis a iy	рет, туре	ii, or Type	9 111		
	•	rganization, check th					-6456-11		•	لبا
g	•		rganization accepted ar	. •		•				V N-
	• • •	•	rectly controls, either al	one or tog	etner with	persons d	ieschbed	ın (ıı) and (ı	ii) below	
	-		upported organization?							11g(i)
		·	described in (i) above?		-0					11g(ii)
_			person described in (i) o							11g(iii)
h	Provide the f	ollowing information	about the supported or	ganization	(S).					
			(iii) Type of	(C. 3.15.45.5		6-3 D-4		(vi) Is	the	
	of supported	(ii) EIN	organization	(iv) Is the o				organizatio	n in col.	(vii) Amount of
org	anization		(described on lines 1-9	governing				(i) organız U.S	ed in the	support
			above or IRC section (see instructions))	Yes		Yes	No	Yes		
			(acc manachona))	res	No	162	No	res	No	
				1						
***				1	-		<del> </del>	<del> </del>		
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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 REGIONAL ARTS & CULTURE COUNCIL 93-1059037 Page 2 Part.II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Sec	tion A. Public Support		· · · · · · · · · · · · · · · · · · ·		<del></del> :-		
Cale	endar 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.")	3,400,857.	4,627,490.	4,814,051.	5,557,221.	5,567,731.	23,967,350.
2	Tax revenues levied for the organ-						
	ızatıon'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	3,400,857.	4,627,490.	4,814,051.	5,557,221.	5,567,731.	23,967,350.
	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,			1			
	column (f)						
6	Public support. Subtract line 5 from line 4						23,967,350.
	ction B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	3,400,857.	4,627,490.	4,814,051.	5,557,221.	5,567,731.	23,967,350.
8	Gross income from interest,						· · · · · ·
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	59,629.	100,844.	122,205.	78,790.	57,362.	418,830.
9	Net income from unrelated business						
	activities, whether or not the		:				
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)	3,970.	10,256.	6,905.	5,914.	2,487.	29,532.
11	Total support. Add lines 7 through 10						24,415,712.
12	Gross receipts from related activities,	etc. (see instructi	ons)			12 1	,485,178.
13	First five years. If the Form 990 is for			d, fourth, or fifth ta	x year as a sectio	n 501(c)(3)	
	organization, check this box and stop	here					▶□_
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2009 (I	ine 6, column (f) d	ivided by line 11, o	column (f))	· <u> </u>	14	98.16 %
15	Public support percentage from 2008	Schedule A, Part	II, line 14			15	97.13 %
16a	33 1/3% support test - 2009.If the o	rganization did no	t check the box or	line 13, and line 1	4 is 33 1/3% or m	ore, check this bo	
	stop here. The organization qualifies	as a publicly supp	orted organization	1			ightharpoons X
b	33 1/3% support test - 2008.If the o	rganization did no	t check a box on li	ne 13 or 16a, and l	ine 15 is 33 1/3%	or more, check the	s box
	and stop here. The organization quali	ifies as a publicly s	supported organiz	ation			ightharpoons
17a	10% -facts-and-circumstances test	t - 2009.If the orga	anization did not c	heck a box on line	13, 16a, or 16b, a	ınd line 14 is 10% (	or more,
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check t	his box and stop he	ere. Explaın in Pa	rt IV how the organ	ization
	meets the "facts-and-circumstances"	test. The organiza	ition qualifies as a	publicly supported	organization		▶□
t	10% -facts-and-circumstances tes	t - <b>2008.</b> If the orga	anization did not c	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is 1	10% or
	more, and if the organization meets th	ne "facts-and-circu	mstances" test, c	heck this box and s	stop here. Explair	n in Part IV how the	<b>.</b>
	organization meets the "facts-and-circ	cumstances" test.	The organization	qualifies as a public	ly supported org	anization	▶□
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17b	, check this box a	and see instruction	s▶□
	<del></del>		<u> </u>	·	C-1-	dulo A (Form 000	000 FT 0000

Pa	edule A (Form 990 or 990 EZ) 2009 art III   Support Schedule for C	organizations	Described in	Section 509(a	)(2) (Complete only	r if you checked the	Page 3 box on line 9 of Part I.)
Sec	ction A. Public Support			· ··		,	
Cale	endar 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.")						
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 bus- iness 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	·				ļ	
	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
Ь	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						
c	Add lines 7a and 7b				<b>.</b>		
_8_	Public support (Subtract line 7c from line 6)						
	ction B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975				į		
c	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly camed 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)			<u> </u>	_	1	
14	First five years. If the Form 990 is for	the organization	's first, second, thi	rd, tourth, or fifth t	ax year as a secti	on 501(c)(3) orga	nization,
50	check this box and stop here	ic Support De	arcentage				
_	Public support percentage for 2009 (		<del></del>	column (f)		15	0/
	Public support percentage for 2009 (	, ,,	•	column (i))		16	<u>%</u>
Sec	ction D. Computation of Inves			)	<del></del>	110 1	<del></del>
	Investment income percentage for 20					17	<del></del>
18	Investment income percentage from	•	•	(7)		18	
	33 1/3% support tests - 2009. If the			on line 14, and line	e 15 is more than		
	more than 33 1/3%, check this box a	-				· ·	▶□
ŧ	33 1/3% support tests - 2008. If the		•	• •	• • •		6, and
	line 18 is not more than 33 1/3%, che			•		•	on . ▶□
20	Private foundation. If the organization	n did not check a	1 box on line 14, 19	9a, or 19b, check t	his box and see ir	nstructions hedule A (Form	

### 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

OMB No 1545-0047

Open to Public Inspection

Schedule C (Form 990 or 990-EZ) 2009

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.

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

•	Section 501(c)(4), (5), or (6) organiza	tions: Complete Part III.			
Nan	ne of organization			Empl	oyer identification number
		<u>L ARTS &amp; CULTURE</u>			93-1059037
Pa	art I-A Complete if the org	ganization is exempt und	ler section 501(c)	or is a section 527 o	rganization.
1	Provide a description of the organiz	zation's direct and indirect politic	al campaign activities	in Part IV.	<del></del>
2	Political expenditures			▶ \$	
3	Volunteer hours				
Pa	art I-B Complete if the org	ganization is exempt und	ler section 501(c	(3).	
1	Enter the amount of any excise tax	incurred by the organization und	der section 4955	<b>▶</b> \$	
2	Enter the amount of any excise tax	5 ▶\$			
3	If the organization incurred a section	n 4955 tax, did it file Form 4720	for this year?		Yes No
48	Was a correction made?				└─ Yes └─ No
_	If "Yes," describe in Part IV.				7.1/01
		ganization is exempt und			
1	Enter the amount directly expended	d by the filing organization for se	ction 527 exempt fund	ction activities > \$	
2	Enter the amount of the filing organ	iization's funds contributed to ot	her organizations for s	section 527	
	exempt function activities			▶\$	
3	Total exempt function expenditures	s Add lines 1 and 2. Enter here a	and on Form 1120-POI	-,	
	line 17b			▶\$	<del></del>
4	Did the filing organization file Form	•			└─ Yes └─ No
5		• •	•	•	· •
	For each organization listed, enter t	,	•	·	
	that were promptly and directly del		· ·	eparate segregated fund or	a political action committee
	(PAC). If additional space is needed	d, provide information in Part IV.	. <sub>T</sub>		<del></del>
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's funds. If none, enter -0	contributions received and promptly and directly
				iulius. Il florie, emer 404.	delivered to a separate
					political organization.
					If none, enter -0-
			ŀ		
		İ			
	<del></del>				
		1	1	l	
			1	i	
	<u> </u>				
	<del> </del>				
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932041 02-04-10

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

Schedule C (Fòrm 990 or 990-EZ) 2009	REGIONAL A	RTS & CULTU	RE COUNCIL	93-1	059037 Page 2
Part II-A Complete if the org		npt under section	n 501(c)(3) and fil	ed Form 5768	
(election under sect	tion 501(h)).				
A Check 🕨 🖳 if the filing organizat	ion belongs to an affili	ated group.			
B Check 🕨 🔲 if the filing organizat	ion checked box A an	d "limited control" pro	visions apply.		
	s on Lobbying Expen itures" means amou			(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	ence public opinion (g	rass roots lobbying)			
b Total lobbying expenditures to influ	ence a legislative bod	y (direct lobbying)		2,500.	
c Total lobbying expenditures (add lir	nes 1a and 1b)			2,500.	
d Other exempt purpose expenditure	s			5,673,959.	
e Total exempt purpose expenditures	(add lines 1c and 1d	)		5,676,459.	
f Lobbying nontaxable amount. Ente	r the amount from the	following table in both	n columns.	433,823.	· · · · · · · · · · · · · · · · · · ·
If the amount on line 1e, column (a) o	r(b) is: The lobt	ying nontaxable ame	ount is:		
Not over \$500,000	20% of t	he amount on line 1e			
Over \$500,000 but not over \$1,000		0 plus 15% of the exc			
Over \$1,000,000 but not over \$1,50	00,000 \$175,000	plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17,0	000,000 \$225,000	0 plus 5% of the exce	ss over \$1,500,000.		
Over \$17,000,000	\$1,000,0	000			
				100 150	
g Grassroots nontaxable amount (en	ter 25% of line 1f)			108,456.	
h Subtract line 1g from line 1a. If zero		0.			
i Subtract line 1f from line 1c If zero	·			0.	
j If there is an amount other than zer		ine 1i, did the organiza	ation file Form 4720	٦	¬ —
reporting section 4911 tax for this				<u> </u>	Yes No
, ,	ations that made a se	* · · ·	Section 501(h) i do not have to comp s 2a through 2f on pa		
	Lobbying Expen	ditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying nontaxable amount	394,010.	394,281.	421,915.	433,823.	1,644,029.
b Lobbying ceiling amount (150% of line 2a, column(e))					2,466,044.
c Total lobbying expenditures	4,539.	2,623.	2,500.	2,500.	12,162.
d Grassroots nontaxable amount	98,503.	98,570.	105,479.	108,456.	411,008.
e Grassroots ceiling amount (150% of line 2d, column (e))					616,512.
f Grassroots lobbying expenditures		123.			123.

Schedule C (Form 990 or 990-EZ) 2009

# Schedule C (Form 990 or 990-EZ) 2009 REGIONAL ARTS & CULTURE COUNCIL 93-105903 [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	Amo	unt
1	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:				
а	Volunteers?	<u> </u>			
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?	-			
е	Publications, or published or broadcast statements?	$\vdash$			
f	, , ,	<b>-</b>			
9	Direct contact with legislators, their staffs, government officials, or a legislative body?				
n	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities? If "Yes," describe in Part IV				
J	Total. Add lines 1c through 1i		_		
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912  If "Yes," enter the amount of any tax incurred by organization managers under section 4912			<del>-</del>	
_	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
_	t III-A   Complete if the organization is exempt under section 501(c)(4), section 501(c)(	on 501(c)	(5), or se	ction	
	501(c)(6).		(0), 0. 00		
				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		
	501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa"Yes."	nrt III-A, lii 	1	nswered	
1	Dues, assessments and similar amounts from members	ieal	1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures (do not include amounts of political expenditures).	icai			
_	expenses for which the section 527(f) tax was paid).		2a		
	Current year Carryover from last year		2b		
	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 ex	cess	<u> </u>		
•	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and				
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		-
Pa	t IV Supplemental Information				
Com	plete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5, a	nd Part II-B,	line 1ı. Also	o, complete	this part
for a	ny 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.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

	REGIONAL ARTS & CU	•	93-1059037
Par	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds o	r Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, In-		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (dunng year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	wnting that the assets held in donor advised	funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be us	ed only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose co	nferring
	impermissible private benefit?		Yes No
Par	t II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990, Part	t IV, line 7.
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).	
	Preservation of land for public use (e.g., recreation or p	pleasure) Preservation of an histor	rically important land area
	Protection of natural habitat	Preservation of a certifie	d historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied 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
а	Total number of conservation easements		2a
ь	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06	2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the o	rganization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements	t holds?	└── Yes └── No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements duri	ng the year ►
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during th	e year ▶ \$
8	Does each conservation easement reported on line 2(d) about	ve satisfy the requirements of section 170(h)	(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservat	ion easements in its revenue and expense st	tatement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes the	e organization's accounting for
D = -	conservation easements.	6 And I listania al Tura acurra au Oth	an Cincilan Assats
Pai	t III Organizations Maintaining Collections o		er Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line o	
	WW		
1a	If the organization elected, as permitted under SFAS 116, no		
	treasures, or other similar assets held for public exhibition, e	·	c service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these		
D	If the organization elected, as permitted under SFAS 116, to	•	
	or other similar assets held for public exhibition, education, o	or research in furtherance of public service, p	provide the following amounts relating to
	these items.		<b>.</b> .
	(i) Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
_	(ii) Assets included in Form 990, Part X		<b>S</b>
2	If the organization received or held works of art, historical tre	-	ain, provide
	the following amounts required to be reported under SFAS 1	116 relating to these items:	
a	Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
Ь	Assets included in Form 990, Part X		<b>5</b>

Schedule D (Form 990) 2009

51,261.

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

uncertain tax positions under FIN 48.

932053 02-01-10

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

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

OMB No 1545-0047

Open to Public Inspection 2009

Name of the organization REGIONAL ARTS & CULTUR	ARTS & CU	LTURE COUNCIL	IL				Employer identification number 93-1059037	ber 7
Part   General Information on Grants and Assistance	nd Assistance							
1 Does the organization maintain records to substantiate the amount	to substantiate the		or assistance, the	grantees' eligibility	for the grants or ass	of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	[	
criteria used to award the grants or assistance?  2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	stance? ocedures for monit	toring the use of grant	funds in the United	d States.			X Yes	ŝ
ΙĒ	Governments and	d Organizations in the	• United States. C	omplete if the orga	inization answered "Y	es" to Form 990, Part	IV, line 21, for any	
recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	\$5,000. Check this	box if no one recipier	it received more th	an \$5,000. Use Pa	rt IV and Schedule I-1	(Form 990) if addition	lal space is needed	П
1 (a) Name and address of organization or government	( <b>a</b> )	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
ARCHITECTURE FOUNDATION OF OREGON								
			,	,				
PORTLAND, OR 97240	93-0822389	501(C)(3)	10,000.	0.			ART/OPPORTUNITY	
ARTISTS REPERTORY THEATRE								
1515 SW MORRISON								
PORTLAND, OR 97205	93-0828781	501(C)(3)	79,732.	0.			ART/OPPORTUNITY/GENERAL	ار
AUDUBON SOCIETY OF PORTLAND								
5151 NW CORNELL ROAD								
PORTLAND, OR 97210	93-6026088	501(C)(3)	5,100.	0.			ART/PROJECT	
A-WOL DANCE COLLECTIVE								
3929 NE 67TH AVENTE								
PORTLAND, OR 97213	20-3326373	501(C)(3)	5,463.	0.			ART/PROJECT	
BEAVERTON ARTS COMMISSION			-					
P.O. BOX 4755			-					
BEAVERTON, OR 97076	93-6002125	GOVERNMENT	5,700.	0.			ART/PROJECT	
BLUE SKY GALLERY								
122 NW 8TH								
PORTLAND, OR 97209	51-0185021	501(C)(3)	10,696.	0.			ART/GENERAL SUPPORT	
2 Enter total number of section 501(c)(3) and government organizations	nd government or	ganizations					4	69
3 Enter total number of other organizations	S						•	ᆡ
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	ction Act Notice,	see the Instructions	for Form 990.				Schedule I (Form 990) 2009	60

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Schedule I (Form 990) 2009 (f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) 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. LINE 2: A GRANTEE CAN RECEIVE UP TO HALF OF THEIR GRANT SUPPORT BY REQUIRED TO SUBMIT A FINAL REPORT AND EVALUATION, INCLUDING A FINAL BUDGET RACC AND WORK FOR ART (WHEN APPROPRIATE) IN ALL PRINTED MATERIALS RELATED Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information THE GRANT CYCLE, RECIPIENTS ARE IS COMPLETED AND ALL FINAL REPORT SHOWING ELIGIBLE EXPENSES AND FINAL CONTRIBUTIONS, ALONG WITH PROJECT RECIPIENTS MUST ACKNOWLEDGE THE FINAL BALANCE CAN ONLY (d) Amount of non-cash assistance 0 ٥. o DOCUMENTATION IN ORDER TO RECEIVE THEIR FINAL PAYMENT 226,157 43,584 20,000 (c) Amount of cash grant REGIONAL ARTS & CULTURE COUNCIL 20 36 (b) Number of recipients AT THE CLOSE OF RECEIVED ONCE THE PROJECT OR ACTIVITY SUBMITTING AN INVOICE. REQUIREMENTS ARE SUBMITTED TO RACC. (a) Type of grant or assistance TO THE FUNDED ACTIVITY SCHEDULE I, PART I, ART/PROFESSIONAL DEVELOPMENT Schedule I (Form 990) 2009 ART/PELLOWSHIP AWARD IN ADVANCE BY ART/PROJECT 932102 02-02-10 Part IV Par

Page 2

93-1059037

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

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III. Continuation Sheet for Schedule I (Form 990)

OMB No 1545-0047

Open to Public Inspection

Employer identification number 93-1059037 Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II) REGIONAL ARTS & CULTURE COUNCIL

(a) Name and address of (b) EIN (c) IRC section (d) Amount of non-cash organization or government assistance	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BODYVOX 1201 NW 17TH AVENUE PORTLAND, OR 97209	93-1283107	501(C)(3)	22,694.	0.			ART/GENERAL SUPPORT
BROADWAY ROSE THEATRE COMPANY PO BOX 231004 TIGARD, OR 97281	93-1069099	501(0)(3)	30,845.	0.			ART/GENERAL SUPPORT
CAPPELLA ROMANA, INC. 3131 NE GLISAN STREET PORTLAND, OR 97232	93-1124501	501(C)(3)	10,656.	0.			ART/GENERAL SUPPORT
CHAMBER MUSIC NORTHWEST 522 SW 5TH AVENUE, SUITE 920 PORTLAND, OR 97204	23-7355562	501(0)(3)	51,761.	0.			ART/GENERAL SUPPORT
CHINESE CONSOLIDATED BENEVOLENT ASSN - 317 NW DAVIS STREET - PORTLAND, OR 97209	93-6029134	501(C)(3)	9,837.	0.			ART/OPPORTUNITY
COLUMBIA SYMPHONY ORCHESTRA P.O. BOX 6559 PORTLAND, OR 97228	93-0928813	501(C)(3)	13,295.	0			ART/GENERAL SUPPORT
CONDUIT DANCE, INC. 918 SW YAMHILL, #401 PORTLAND, OR 97205	93-1327229	501(C)(3)	15,000.	0.			ART/OPPORTUNITY
DISABILITY RIGHTS OREGON 620 SW FIPTH AVE, SUITE 500 PORTLAND OR 97204	93-0686170	501(C)(3)	5,580.	.0			ART/PROJECT
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	uction Act Notice	e, see the Instructions	s for Form 990.		1		Schedule I-1 (Form 990) 2009

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

Continuation Sheet for Schedule I (Form 990)

▶ Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III.

OMB No 1545-0047 2009

Open to Public, Inspection

Internal Revenue Service							
Name of the organization REGIONAL ARTS		& CULTURE COUNCIL	IL			Employe 9	Employer identification number $93-1059037$
Part I Continuation of Grants and Other Assistance to Governments	Assistance to Go	vernments and Organ	nizations in the Ur	nited States (Sche	and Organizations in the United States (Schedule I (Form 990), Part II)	n!!)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DO JUMP' EXTREMELY PHYSICAL THEATRE - 1515 SE 37TH AVENUE - PORTLAND, OR 97214	93-0682075	501(C)(3)	27,547.	0.			ART/GENERAL SUPPORT
ESTACADA AREA ARTS COMMISSION 475 SE MAIN ST. ESTACADA, OR 97023	93-6002159	GOVERNMENT	5,273.	0			ART/PROJECT
ETHOS MUSIC CENTER 10 N. KILLINGSWORTH STREET PORTLAND, OR 97217	91-1954235	501(C)(3)	23,074.	0.			ART/OPPORTUNITY/GENERAL
FILM ACTION OREGON 4122 NE SANDY BLVD PORTLAND, OR 97212	93-1074861	501(C)(3)	19,519.	0.			ART/GENERAL SUPPORT
FRIENDS OF CHAMBER MUSIC 222 NW DAVIS STREET, SUITE 405 PORTLAND, OR 97209	23-7124336	501(C)(3)	19,454.	0.			ART/GENERAL SUPPORT
HAND2MOUTH THEATRE 6551 N. MARYLAND STREET PORTLAND, OR 97217	71-0916574	501(C)(3)	9,450.	0			ART/OPPORTUNITY
HOMOWO AFRICAN ARTS & CULTURES 7725 N. FOWLER AVENUE PORTLAND, OR 97217	93-0919492	501(C)(3)	21,006.	0.			ART/GENERAL SUPPORT
IMAGO THEATRE P.O. BOX 15182 PORTLAND, OR 97293	93-0813258	501(C)(3)	28,051.	0			ARI/GENERAL SUPPORT
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	uction Act Notice	see the Instructions	s for Form 990.				Schedule I-1 (Form 990) 2009

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

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III. Continuation Sheet for Schedule I (Form 990)

Open to Public

OMB No 1545-0047 Inspection

**Employer identification number** 93-1059037

Schedule I-1 (Form 990) 2009 ART/OPPORTUNITY/GENERAL (h) Purpose of grant or assistance ART/GENERAL SUPPORT ART/GENERAL SUPPORT ART/GENERAL SUPPORT ART/GENERAL SUPPORT ART/OPPORTUNITY ART/OPPORTUNITY ART/PROJECT (g) Description of non-cash assistance 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, 0 0. 0 ö ٥. ö ö ö (e) Amount of non-cash assistance (d) Amount of cash grant 5,285, 5,700 33,425, 40,877. 28,035, 6,020 37,939 27,797 LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. CULTURE COUNCIL (c) IRC section if applicable 501(C)(3) 93-0907543 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 93-1268523 23-7232987 93-1195546 93-0700108 93-0909494 20-3813278 23-7447279 (b) EIN لاي REGIONAL ARTS INDEPENDENT PUBLISHING RESOURCE CENTER (IPRC) - 917 SW OAK ST. 224 NW 13TH AVENUE, SUITE 306 LAKEWOOD CENTER FOR THE ARTS (a) Name and address of organization or government METROPOLITAN YOUTH SYMPHONY 3606 N. MISSISSIPPI AVENUE #218 - PORTLAND, OR 97205 LAKE OSWEGO, OR 97034 MIRACLE THEATRE GROUP 1530 NE MARINE DRIVE 368 S. STATE STREET Name of the organization LITERARY ARTS, INC. PORTLAND, OR 97209 PORTLAND, OR 97208 PORTLAND, OR 97214 PORTLAND, OR 97214 PORTLAND, OR 97211 PORTLAND, OR 97227 425 SE 6TH AVENUE 20 SE 8TH AVENUE LIVE WIRE! RADIO P.O. BOX 5254 KUKATONON KBOO-FM Part

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

Name of the organization

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III. Continuation Sheet for Schedule I (Form 990)

OMB No 1545-0047 Open to Public

Inspection

Schedule I-1 (Form 990) 2009 (h) Purpose of grant or assistance ART/GENERAL SUPPORT ART/GENERAL SUPPORT ART/GENERAL SUPPORT ART/GENERAL SUPPORT ART/GENERAL SUPPORT Employer identification number 93-1059037 ART/OPPORTUNITY ART/OPPORTUNITY ART/OPPORTUNITY (g) Description of non-cash assistance 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, 。 。 ö o (e) Amount of non-cash assistance Ö Ö ö (d) Amount of cash grant 26,433, 12,314, 56,592 20,943 12,050 11,333 5,580 84,950 COUNCIL (c) IRC section if applicable 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) CULTURE 93-1029151 93-6028398 93-1313866 20-3204323 93-1111344 20-2012406 93-1009305 90-0084678 REGIONAL ARTS & (b) EIN NORTHWEST CHILDREN'S THEATER AND SCHOOL - 1819 NW EVERETT, SUITE NEWSPACE CENTER FOR PHOTOGRAPHY MUSEUM OF CONTEMPORARY CRAFT (a) Name and address of organization or government NEW OREGON ARTS AND LETTERS 600 SW 10TH AVE., SUITE 313 OREGON CHILDREN'S THEATRE 216 - PORTLAND, OR 97209 NORTHWEST DANCE PROJECT 3924 NE HANCOCK STREET OREGON BALLET THEATRE 724 NW DAVIS STREET 1123 SE 36TH AVENUE 1632 SE 10TH AVENUE 818 SE SIXTH AVENUE PORTLAND, OR 97214 PORTLAND, OR 97212 PORTLAND, OR 97205 PORTLAND, OR 97209 PORTLAND, OR 97214 PORTLAND, OR 97242 OLD LIBRARY STUDIO PORTLAND, OR 97214 PO BOX 42488 Part H

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

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

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III. Continuation Sheet for Schedule I (Form 990)

Open to Public, 2009

OMB No 1545-0047

Inspection

Schedule I-1 (Form 990) 2009 ART/OPPORTUNITY/PROJECT (h) Purpose of grant or assistance ART/GENERAL SUPPORT ART/GENERAL SUPPORT ART/GENERAL SUPPORT Employer identification number 93-1059037 ART/OPPORTUNITY ART/OPPORTUNITY ART/OPPORTUNITY ART/OPPORTUNITY (g) Description of non-cash assistance 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, 0 ٥. ٥. ٥. 。 ö ٥. ö (e) Amount of non-cash assistance 7,560. (d) Amount of cash grant 12,500. 15,492, 14,036. 26,085, 141,066. 15,872 2,600 LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. CULTURE COUNCIL (c) IRC section if applicable GOVERNMENT 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 93-1285710 20-0414784 51-0185443 93-0811197 93-0446527 93-1093949 27-0748953 91-1819560 (b) EIN REGIONAL ARTS & PENDULUM AERIAL DANCE THEATRE (a) Name and address of organization or government 9320 SW BARBUR BLVD STE 240 OREGON SYMPHONY ASSOCIATION 921 SW WASHINGTON ST. #200 COMMISSION - PO BOX 3588 OREGON REPERTORY SINGERS OREGON CULTURAL HERITAGE 4924 NE MULTNOMAH STREET 22700 NW GILLIHAN ROAD 2516 NW 29TH BLDG. 9 537 SE ASH ST., #41 2525 SW PATTON ROAD PDX BRIDGE FESTIVAL Name of the organization PORTLAND, OR 97208 PORTLAND, OR 97219 PORTLAND, OR 97214 PORTLAND, OR 97205 PORTLAND, OR 97296 PORTLAND, OR 97201 PORTLAND, OR 97231 PORTLAND, OR 97213 OREGON CRUSADERS PLAYWRITE, INC. Part

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

► Attach to Form 990 to list additional information for Continuation Sheet for Schedule I (Form 990) Schedule I (Form 990), Part II or Part III.

OMB No 1545-0047 Open to Public

Inspection

Schedule I-1 (Form 990) 2009 ART/OPPORTUNITY/GENERAL (h) Purpose of grant or assistance ART/GENERAL SUPPORT ART/GENERAL SUPPORT ART/GENERAL SUPPORT ART/GENERAL SUPPORT ART/GENERAL SUPPORT Employer identification number 93-1059037 ART/OPPORTUNITY ART/PROJECT (g) Description of non-cash assistance 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, ٥. 0. ٥. ö ٥. . 。 . (e) Amount of non-cash assistance (d) Amount of cash grant 87,366. 14,525. 5,700, 26,805, 205,038, 20,804 11,000 15,096 CULTURE COUNCIL (c) IRC section of applicable 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 93-1177971 93-0391604 93-0776616 93-0901924 93-1134865 93-0556942 93-0811291 26-3080279 REGIONAL ARTS & (p) EIN FOUNDATION - 12000 SW 49TH AVENUE CONTEMPORARY ART (PICA) - 224 NW 4620 SW BEAVERTON HILLSDALE HWY, 13TH AVE. #305 - PORTLAND, OR (a) Name and address of organization or government PORTLAND CHAMBER ORCHESTRA PORTLAND COMMUNITY COLLEGE PORTLAND BAROQUE ORCHESTRA PORTLAND GAY MEN'S CHORUS PORTLAND FESTIVAL BALLET PORTLAND INSTITUTE FOR PORTLAND CENTER STAGE - PORTLAND, OR 97219 1020 SW TAYLOR, #200 PORTLAND ART MUSEUM 1219 SW PARK AVENUE Name of the organization PORTLAND, OR 97205 128 NW 11TH AVENUE PORTLAND, OR 97208 PORTLAND, OR 97205 PORTLAND, OR 97209 PORTLAND, OR 97207 PORTLAND, OR 97221 PO BOX 3223 PO BOX 9024 Part 97209

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

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

Continuation Sheet for Schedule I (Form 990)

▶ Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III.

OMB No. 1545-0047
2009
Open to Public
Inspection

Internal Revenue Service		Palloc	die i (i oi iii soo), i	alternation and mis-			noncodem
zation REGIONAL	ARTS & CU	CULTURE COUNCIL	IL			Employe 9	Employer identification number 93-1059037
	Assistance to Go	vernments and Organ	nizations in the Ur	nited States (Sche	and Organizations in the United States (Schedule I (Form 990), Part II.)	r II.)	
(a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PORTLAND OPERA ASSOCIATION 211 SE CARUTHERS PORTLAND, OR 97211	93-6034321	501(C)(3)	137,369.	0			ART/GENERAL SUPPORT
PORTLAND PIANO INTERNATIONAL PO BOX 6469 PORTLAND, OR 97228	20-2482159	501(C)(3)	14,338.	.0			ART/GENERAL SUPPORT
PORTLAND QUEER DOCUMENTARY FILM FESTIVAL - C/O DAVID WEISSMAN - PORTLAND, OR 97217	20-8599277	דיכ	5,388.	0.			ART/PROJECT
PORTLAND SYMPHONIC CHOIR P.O. BOX 1517 PORTLAND, OR 97207	93-0415215	501(c)(3)	15,000.	.0			ART/OPPORTUNITY
PORTLAND TAIKO 3230 NE COLUMBIA BLVD. PORTLAND, OR 97211	93-1309882	501(C)(3)	37,264.	0.			ART/GENERAL SUPPORT
PORTLAND YOUTH PHILHARMONIC 421 SW 6TH AVENUE, STE 1350 PORTLAND, OR 97204	93-0386902	501(C)(3)	27,865.	0.			ART/GENERAL SUPPORT
PROFILE THEATRE PROJECT P.O. BOX 14845 PORTLAND, OR 97293	91-1786694	501(0)(3)	22,401.	0.			ART/GENERAL SUPPORT
TEARS OF JOY THEATRE 323 NE WYGANT STREET, #201 PORTLAND, OR 97211	91-1107572	501(C)(3)	29, 623.	0.			ART/GENERAL SUPPORT
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	uction Act Notic	s, see the Instructions	s for Form 990.				Schedule I-1 (Form 990) 2009

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

Partl

► Attach to Form 990 to list additional information for Continuation Sheet for Schedule I (Form 990) Schedule I (Form 990), Part II or Part III.

OMB No 1545-0047 Open to Public

Inspection

Employer identification number 93-1059037

Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II) CULTURE COUNCIL REGIONAL ARTS & Name of the organization

Schedule I-1 (Form 990) 2009 (h) Purpose of grant or assistance ART/GENERAL SUPPORT ART/GENERAL SUPPORT ART/GENERAL SUPPORT ART/GENERAL SUPPORT ART/PROJECT ART/PROJECT ART/PROJECT ART/PROJECT (g) Description of non-cash assistance appraisal, other) (f) Method of valuation (book, FMV, 。 ö ö 。 ö ö ö ö (e) Amount of non-cash assistance 5,100. 16,338. 48,265. 5,400 2,686 5,700 18,450 29,596 (d) Amount of cash grant LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. (c) IRC section if applicable 501(C)(3) 501(C)(3) 93-0521848 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 93-0634049 93-1320715 93-1263353 84-1482706 93-0587688 93-0918692 20-0092657 (p) EIN 4839 NE MLK JR. BLVD, SUITE 204 THIRD ANGLE NEW MUSIC ENSEMBLE 1220 SW MORRISON, SUITE #900 THIRD RAIL REPERTORY THEATRE (a) Name and address of organization or government YOUNG AUDIENCES OF OREGON 6250 SW CAPITOL HIGHWAY 917 SW OAK STREET #406 WRITE AROUND PORTLAND MARYLHURST, OR 97036 THEATRE IN THE GROVE THE PORTLAND BALLET HILLSBORO, OR 97123 PORTLAND, OR 97211 PORTLAND, OR 97205 PORTLAND, OR 97205 PORTLAND, OR 97239 PORTLAND, OR 97202 PORTLAND, OR 97207 17600 PACIFIC HWY. PO BOX 82389 THE ART GYM PO BOX 2961 WHITE BIRD PO BOX 99

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### **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 Inspection

Name of the organization

REGIONAL ARTS & CULTURE COUNCIL

Employer identification number 93-1059037

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE REGIONAL ARTS & CULTURE COUNCIL (RACC) IS AN INDEPENDENT, OREGON

NOT-FOR-PROFIT 501(C)(3) ORGANIZATION THAT PROVIDES SERVICES IN

CLACKAMAS, MULTNOMAH, AND WASHINGTON COUNTIES. THROUGH VISION,

LEADERSHIP, AND SERVICE, THE REGIONAL ARTS & CULTURE COUNCIL WORKS TO

INTEGRATE ARTS AND CULTURE IN ALL ASPECTS OF COMMUNITY LIFE.

A MAJORITY OF RACC'S FUNDING IS PROVIDED BY CONTRACTS WITH THE CITY OF

PORTLAND, METRO, AND MULTNOMAH, CLACKAMAS, AND WASHINGTON COUNTIES.

THE CITY OF PORTLAND PROVIDED 73% OF TOTAL SUPPORT AND REVENUES IN

2010, AND METRO AND THE COUNTIES PROVIDED 7%, INCLUDING AGENCY

TRANSACTIONS. RACC IS ALSO BUILDING SUPPORT FROM THE PRIVATE SECTOR

THROUGH A WORKPLACE GIVING PROGRAM WHICH PROVIDED 5% OF TOTAL SUPPORT

AND REVENUES IN 2010 AND FOR A NEW ARTS EDUCATION PROGRAM, WHICH RAISED

4% FROM PRIVATE SOURCES.

RACC'S SERVICE AREA INCLUDES MORE THAN 1.5 MILLION RESIDENTS, 250

NOT-FOR-PROFIT ARTS AND CULTURE ORGANIZATIONS, AND COUNTLESS ARTISTS OF

EVERY DISCIPLINE.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

COMMUNITY SERVICES - RACC CONDUCTS WORKSHOPS FOR ARTISTS AND PROVIDES

ORGANIZATIONAL CONSULTING SERVICES FOR EMERGING AND MIDSIZED ARTS

ORGANIZATIONS. RACC PROVIDES A WIDE RANGE OF INFORMATION SERVICES FOR

LOCAL ARTISTS AND ARTS ADMINISTRATORS INCLUDING FREE INFORMATIVE

NEWSLETTERS IN PRINTED AND ELECTRONIC FORM SERVING MORE THAN 6,000 AREA

### **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.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

REGIONAL ARTS & CULTURE COUNCIL

**Employer identification number** 93-1059037

RESIDENTS PER MONTH. THE RACC WEBSITE (WWW.RACC.ORG) CONTAINS OPPORTUNITIES FOR ARTISTS (GRANTS, RESIDENCIES, JOBS, COMPETITIONS, COMMISSIONS, ETC.), AN ONLINE CULTURAL CALENDAR OF RACC FUNDED EVENTS IN THE COMMUNITY, AND OTHER IMPORTANT INFORMATION OF INTEREST TO THE LOCAL ARTS AND CULTURE COMMUNITY. RACC ALSO PROCESSES "PASS-THROUGH" OR AGENCY TRANSACTIONS TO HELP DONORS MAKE CONTRIBUTIONS TO ANOTHER DESIGNATED ENTITY.

INCLUDING GRANTS OF \$ 111292. REVENUE \$ 0. **EXPENSES \$ 305512.** 

ADVOCACY - RACC WORKS AT THE LOCAL, STATE, AND NATIONAL LEVEL TO BUILD AWARENESS, SUPPORT, AND RESOURCES FOR ARTS AND CULTURE. RACC CONVENES FORUMS TO PROMOTE THE IMPORTANCE OF ARTS AND CULTURE, AND PRODUCES RESEARCH TO HELP ILLUSTRATE THEIR IMPACT. RACC ALSO CONDUCTS "WORK FOR ART, " A WORKPLACE GIVING PROGRAM AT LOCAL COMPANIES THAT INTRODUCES THOUSANDS OF EMPLOYEES TO THE LOCAL ARTS COMMUNITY, AND GENERATES CONTRIBUTIONS FOR THE REGION'S ARTS AND CULTURAL ORGANIZATIONS. INCLUDING GRANTS OF \$ 200. **EXPENSES \$ 281334.** REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 4: IN NOVEMBER 2009, ORGANIZATION'S BYLAWS WERE AMENDED TO INCREASE MAXIMUM BOARD MEMBERSHIP FROM 25 TO 26. POSITION 26 IS NOW FILLED EX-OFFICIO BY THE CHAIR EMERITUS. A BOARD CHAIR WHOSE BOARD TERM ENDS BEFORE SERVING A FULL TWO YEARS IN OFFICE AUTOMATICALLY STAYS ON THE BOARD TO COMPLETE A FULL TERM OR TWO AT THE END OF A CHAIR'S TERM IN OFFICE, HE/SHE AUTOMATICALLY SERVES AS CHAIR EMERITUS FOR A YEAR IN THE 26TH BOARD MEMBER POSITION AND

CONTINUES TO HAVE VOTING ABILITY. CHAIR EMERITUS STATUS ALLOWS A FORMER LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule O (Form 990) 2009 932211 02-03-10

### **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 Inspection

Name of the organization

REGIONAL ARTS & CULTURE COUNCIL

Employer identification number 93-1059037

CHAIR TO MENTOR A RECENTLY INDUCTED CHAIR AND PROVIDES LEADERSHIP CONTINUITY.

FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 IS PREPARED BY AN OUTSIDE CPA FIRM. THE DIRECTOR OF OPERATIONS REVIEWS THE FORM 990 AND FORWARDS IT TO THE FINANCE AND AUDIT COMMITTEE FOR REVIEW AND APPROVAL.

ONCE THE FINANCE AND AUDIT COMMITTEE HAS APPROVED THE FORM 990, COPIES ARE MADE AVAILABLE TO THE FULL BOARD OF DIRECTORS, AND THE FORM IS FILED WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C: ALL BOARD MEMBERS RECEIVE THE CONFLICT OF INTEREST POLICY ANNUALLY IN THEIR BOARD MANUALS, AND ARE REQUIRED TO SIGN AN ACKNOWLEDGMENT OF RECEIPT OF THE CONFLICT OF INTEREST ALL BOARD MEMBERS ARE ALSO ASKED TO SIGN A DISCLOSURE STATEMENT IN POLICY. WHICH THEY LIST PERCEIVED AND REAL CONFLICTS OF INTEREST WITH ANY ORGANIZATIONS THAT RECEIVE GENERAL SUPPORT GRANTS FROM RACC. FINALLY, AT THE END OF EACH FISCAL YEAR, ALL BOARD MEMBERS AND OFFICERS (INCLUDING EXECUTIVE DIRECTOR AND DIRECTOR OF OPERATIONS/CFO) RECEIVE A BOARD DISCLOSURE QUESTIONNAIRE AND ARE ASKED TO INDICATE ANY FAMILY OR BUSINESS RELATIONSHIPS WITH OFFICERS, TRUSTEES, KEY EMPLOYEES, HIGHEST COMPENSATED EMPLOYEES, AND HIGHEST COMPENSATED PROFESSIONAL AND INDEPENDENT THEY MUST ALSO INDICATE IF THEY HAVE ENAGED IN TRANSACTIONS CONTRACTORS. WITH THE ORGANIZATION OR IF THEY HAVE RECEIVED COMPENSATION IN EXCESS OF 1% OF THE ORGANIZATION'S REVENUES. STAFF FOLLOW-UP WITH BOARD MEMBERS MULTIPLE TIMES TO ENSURE THE ORGANIZATION RECEIVES AS MANY COMPLETED

QUESTIONNAIRES AS POSSIBLE.

### **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

Employer identification number Name of the organization 93-1059037 REGIONAL ARTS & CULTURE COUNCIL FORM 990, PART VI, SECTION B, LINE 15: EACH YEAR, THE EXECUTIVE DIRECTOR COMPLETES A SELF-EVALUATION AND HAS AN INFORMAL MEETING WITH THE BOARD CHAIR. NEXT, THE EXECUTIVE DIRECTOR HAS A FORMAL MEETING WITH THE BOARD CHAIR AND VICE-CHAIR TO REVIEW HER PERFORMANCE EVALUATION AND SET NEW GOALS FOR THE UPCOMING FISCAL YEAR. IN EXECUTIVE SESSION, THE EXECUTIVE COMMITTEE AND FULL BOARD REVIEW AND APPROVE THE EXECUTIVE DIRECTOR'S PERFORMANCE EVALUATION AND GOALS, AND COMPENSATION IS BASED UPON THE FULL BOARD'S APPROVAL OF THOSE ITEMS. THE BOARD CHAIR THEN ISSUES A FORMAL LETTER CONFIRMING THIS INFORMATION TO THE EXECUTIVE DIRECTOR. COMPENSATION FOR KEY EMPLOYEES IS DETERMINED BASED UPON ANNUAL PERFORMANCE REVIEWS CONDUCTED BY THE EXECUTIVE DIRECTOR. FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE TO THE PUBLIC UPON REQUEST. THE FINANCIAL STATEMENTS ARE MADE AVAILABLE THROUGH THE ANNUAL REPORT, WHICH IS MAILED TO CONTRIBUTORS AND POSTED ON THE RACC WEBSITE FOR THE GENERAL PUBLIC.

Form **8868**(Rev. April 2009)
Department of the Treasury
Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

• If yo	u are filing for an Automatic 3-Month Extension, complete only Part I and check this box u are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this complete Part II unless you have already been granted an automatic 3-month extension on a previously fi		<b>&gt;</b> X		
Part					
A corp	pration required to file Form 990-T and requesting an automatic 6-month extension - check this box and cominity		•		
	er corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an Income tax returns.	exten	sion of time		
noted I (not au you mu	onic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic tomatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consist submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic files.	cally if	(1) you want the additional ated Form 990-T. Instead,		
Туре о	Name of Exempt Organization	Empl	oyer identification number		
print	REGIONAL ARTS & CULTURE COUNCIL	a	3-1059037		
File by th due date filing you	Number, street, and room or suite no. If a P.O. box, see instructions.		<u> </u>		
instruction					
Check	type of return to be filed (file a separate application for each return):	-			
	Form 990 Form 990-T (corporation) Form 47 Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 52 Form 990-EZ Form 990-T (trust other than above) Form 60 Form 990-PF Form 1041-A Form 88	227 069			
CINDY KNAPP  • The books are in the care of ▶ 108 N.W. 9TH AVE., SUITE 300 - PORTLAND, OR 97209  Telephone No.▶ (503) 823-5111  • If the organization does not have an office or place of business in the United States, check this box  • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box  ▶ □ . If it is for part of the group, check this box ▶ □ and attach a list with the names and EINs of all members the extension will cover.					
_	request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unt <a href="#">FEBRUARY 15, 2011</a> , to file the exempt organization return for the organization named as for the organization's return for:    calendar year		The extension		
2 I	f this tax year is for less than 12 months, check reason: Initial return Final return		Change in accounting period		
	this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any				
_	ionrefundable credits. See instructions.	3a	\$		
	f this application is for Form 990-PF or 990-T, enter any refundable credits and estimated ax payments made. Include any prior year overpayment allowed as a credit.	3b	\$		
-	Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,	JD	<b>y</b>		
	leposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System)				
	See instructions.	3c	\$ <u>N/A</u>		

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

Form 886	8 (Rev. 1-2011)					Page 2	
<ul><li>If you a</li></ul>	are filing for an Additional (Not Automatic) 3-Month Ex	ctension, c	complete only Part II and check this b	ox		<u>▶ X</u>	
	ly complete Part II if you have already been granted an a				8868		
	are filing for an Automatic 3-Month Extension, comple						
Part II	Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the original (no o	opies r	needed)		
Type or	Name of exempt organization			Emp	loyer identificat	tion number	
print	REGIONAL ARTS & CULTURE COU	NCTI.		۹	3-105903	7	
File by the	Number, street, and room or suite no If a P O box, s		tions	<u>, , , , , , , , , , , , , , , , , , , </u>	3 103303		
due date for filing your return See instructions  City, town or post office, state, and ZIP code For a foreign address, see instructions  PORTLAND, OR 97209  Enter the Return code for the return that this application is for (file a separate application for each return)  0 1							
			tress see instructions				
		oreigir auc	riess, see instructions				
	FORTHAND, OR 3/203	-			· · · · · ·		
Enter the	Return code for the return that this application is for (file	e a separa	ite application for each return)			0 1	
Applicati	on	Return	Application		···	Return	
ls For		Code	Is For			Code	
Form 990		01					
Form 990	-BL	02	Form 1041-A			08	
Form 990	-EZ	03	Form 4720			09	
Form 990	·PF	04	Form 5227			10	
Form 990	-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11	
Form 990	-T (trust other than above)	06	Form 8870		·	12	
STOP! Do	o not complete Part II if you were not already granted	d an autor	natic 3-month extension on a previou	ısiv file	ed Form 8868.	<u> </u>	
	ooks are in the care of > 108 N.W. 9TH A						
	ione No ▶ (503) 823-5111		FAX No ▶				
<ul> <li>If the c</li> </ul>	organization does not have an office or place of busines.	s in the Ur	nited States, check this box			<b>▶</b> □	
	s for a Group Return, enter the organization's four digit			ns is fo	r the whole arou	p. check this	
box ▶ [	If it is for part of the group, check this box	_	· · · · · · · · · · · · · · · · · · ·			•	
4 I re	quest an additional 3-month extension of time until		15, 2011 .				
5 For	calendar year, or other tax year beginning	JUL 1		JUN	30, 201	0	
	ne tax year entered in line 5 is for less than 12 months, o			Final r			
	Change in accounting period						
7 Sta	te in detail why you need the extension						
TH	E INFORMATION NECESSARY TO	PREPA	RE A COMPLETE AND AC	CUR	ATE TAX	RETURN	
IS	NOT YET AVAILABLE.					<del>-</del>	
8a If th	nis application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any				
	refundable credits. See instructions			8a	\$	0.	
b If th	nis application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated				
tax	payments made include any prior year overpayment al	llowed as	a credit and any amount paid				
pre	eviously with Form 8868			8b	s	0.	
c Bal	ance due. Subtract line 8b from line 8a Include your pa	ayment wi	th this form, if required, by using				
EF1	PS (Electronic Federal Tax Payment System) See instr	uctions		8c	s	0.	
			nd Verification		• • • • • • • • • • • • • • • • • • • •	<del></del>	
Under pena	alties of perjury, I declare that I have examined this form, includ	ding accomi		e best o	f my knowledge ar	nd belief.	
it is true, c	orrect, and com <u>plete,</u> and that I am authorized to prepare this fo	orm.	A		- 10	11.	
Signature	Title ▶	CAP #	<u></u>	Date	≥ 2/8.	///	
		· ·				(Rev 1-2011)	