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Form 990

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 2009

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

			1 9 1			
	For the	e 2009 calendar year, or tax year beginning 9/01 , 2009, and	d ending	8/31	, 20	10
В	Check if	applicable C		D Employ	er Identificatio	n Number
	Add	dress change Please use Cincinnati Institute of Fine Arts		31-0	537138	
	Nan	me change or print dba ArtsWave		E Telepho		
	\vdash	See 20 East Central Pkwy #200		513	871 278	9 7
	\vdash	Mistruc- Cincinnati, OH 45202			071 27	
	\vdash	mination tions.			,	35 544 000
	⊢ Ame	ended return		G Gross re		<u>35,714,889.</u>
	App	olication pending F Name and address of principal officer Mary McCullough-Huds		this a group return		Yes X No
		Same As C Above	1	re all affiliates incli 'No,' attach a list		Yes No
	_ Tax-	exempt status X 501(c) (3) (insert no) 4947(a)(1) or 5	527 "	140, attacir a list	(see instruction	15)
J	Web	site: ► theartswave.org	H(c) G	roup exemption nu	mber ►	
K	Form o	of organization X Corporation Trust Association Other► L Year of			tate of legal do	omicile OH
Pa	rt I	Summary		7	toto or roger de	
		Briefly describe the organization's mission or most significant activities <u>We_a</u>	re a les	dor and	catalwa	+
_	' -	advancing the vitality and vibrancy of our communi	ition bu	mobilizi	rararia	<u></u>
JCe				_1110DTTT5T	ng the	crearine"
Governance		energy_of_our_entire_region				
ķ	2 -	Check this box ► I if the organization discontinued its operations or disposed				-
ဗိ		Number of voting members of the governing body (Part VI, line 1a)	a ot more tha	an 25% of its a	_ 1	4.4
ACTIVITIES &		Number of voting members of the governing body (Fart VI, line 1a)	`	-	3 4	44
2		Total number of employees (Part V, line 2a)	,	ł	5	<u>44</u> 29
2		Total number of employees (raft v, life 2a) Total number of volunteers (estimate if necessary)		}	6	1,482
ACI		Total gross unrelated business revenue from Part VIII, column (C), line 12			7a	1,482
		Net unrelated business taxable income from Form 990-T, line 34		-	7b	0.
+	<u> </u>	ver unrelated business taxable income from Form 930-1, line 34		1		
			<u> </u>	Prior Year		Current Year
:		Contributions and grants (Part VIII, line 1h)		12,436,0		12,483,604.
		Program service revenue (Part VIII, line 2g)		22,5		25,317.
		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		-354,5	91.	251,684.
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)				
	12 T	Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 1	2)	12,104,0	72.	12,760,605.
1	13 G	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		10,332,9	04. 1	10,392,265.
ı	14 E	Benefits paid to or for members (Part IX, column (A), line 4)				
		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10	0)	1,918,8	68	2,045,289.
ses		Professional fundraising fees (Part IX, column (A), line 11e)	" 			2,010,205.
٥						·
Expenses		Total fundraising expenses (Part IX, column (D), line 25) 1,302,	711.			
-	17 C	Other expenses (Part IX, column (A), lines 11a-11d 11f-24		1,616,4	40.	1,684,448.
	18 T	Other expenses (Part IX, column (A), lines 11a-11d 11f-24p (A), lines 15-17 (must equal Part IX, column (A), line 25-D	7 [13,868,2	12. 1	14,122,002.
-		Revenue less expenses Subtract line 18 from line il2.		-1,764,1		-1,361,397.
;]	-		181 18	eginning of Ye		
Balances	20 T	Total assets (Part X, line 16)	ĢI ⊢B	83,608,9		End of Year 35, 152, 229.
ā		Total liabilities (Part X, line 26)	RS-0S(43,155,8		13,673,725.
ڐؚ		1 0(11)=11	≒			
Ľ		let assets or fund balances Subtract line 21 from line 20	ļ <u> </u>	40,453,0	41. 4	11,478,504.
1	rt II	Signature Block	<i>-</i>			 -
		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules true, correct, and complete Declaration of preparer (other than officer) is based on all information of which	and statements,	and to the best of	my knowledge	and belief, it is
		index, sorrect, and complete Decaration of preparer (other than officer) is based on all information of which	ich preparer nas	any knowledge		
ig	n ′e	Non Me hilled - Ilso		D.O.	12 2	2011
		Signature of officer	-	Date	- /	
		► Mary McCullough-Hudson	Pre	esident &	CEO	
		Type or print name and title		estaene a	CEO	
	d	Date		Obs. 1	Preparer's	identifying number
,;	Ч	Date		Check if self-	(see instru	s identifying number uctions)
ı	u -	Preparer's		employed -	<u></u> ,	
C ar	er's	Self-Prepared Self-Prepared				
aı Se		Firm's name (or]		
n		yours if self- employed),	-] EIN ► [
- • •	,	address, and ZIP + 4		Phone no		1
/av	the IR:	S discuss this return with the preparer shown above? (see instructions)			(V)	Yes No

	n 290 (2009) Cincinnati Institute of Fine Arts	31-05	<u> 3713</u>	18		Page 2
Par	t III Statement of Program Service Accomplishments					
• 1	Briefly describe the organization's mission			-		
	We are a leader and catalyst advancing the vitality and vibrancy of	our	comm	unit	ies	
	by mobilizing the creative energy of our entire region.				==-	
	at morning the effective energy of our control region.					
	Did the eventual to the control of t					
2	Did the organization undertake any significant program services during the year which were not listed on the	e prior				
	Form 990 or 990-EZ? See Schedule O		X	Yes	Lì	No
	If 'Yes,' describe these new services on Schedule O		_			
3	Did the organization cease conducting, or make significant changes in how it conducts, any program service	es?		Yes	X	No
	If 'Yes,' describe these changes on Schedule O					
4	Describe the exempt purpose achievements for each of the organization's three largest program services by and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and a	expens	es Se	ction 5	01(c)	(3)
	and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and a expenses, and revenue, if any, for each program service reported	llocation	s to otl	ners, t	he tot	al
	expenses, and revenue, it any, for each program service reported					
4 a	(Code:) (Expenses \$ 10,645,123. including grants of \$ 10,392,265.) (Re	venue	\$	1	3,6	40.)
	Grantmaking and Services: Distribution of unrestricted operating su	pport	to	arts		
	organizations throughout the greater Cincinnati region to help them					
	arts scene and all the community-wide benefits that come with that-					
	vitality to a greater sense of connectedness for the people who liv			10111	<u>-</u>	
	Distribution of smaller project grants to support emerging arts gro					
	building grants and support for arts and culture groups that arise				<u>act</u>	
	diverse populations to create a more vibrant arts environment that	refle	<u>cts</u>	<u>and</u>		
	benefits the community in all its diversity.	. 				
	~	. <i>– –</i> .			_	
4.	(0.1)		^			
40	(Code) (Expenses \$ 519,463. including grants of \$) (Re)
	Awareness and Accessibility. Organization of a weekend of free samp					
	and performing arts at multiple venues across the regional communit					
	of community engagement events that connect people through the arts			:		
	new strategy to build broad support for the arts, including new org	aniza	<u>tion</u>	nam	e <u>, </u>	
	brand, and website.					
			- -			
				:		
	,					
4 c	(Code: (Expenses \$ 393,387. including grants of \$ (Re)
	Connection and Engagement: Provision of technical support to grante	e org	<u>aniz</u> a	atio	ns_	
	through best practice sharing and training, networking with and rec	ruitm	ent (of		
	diverse board and committee members, and promoting growth and viabi	lity	of			
	multicultural arts organizations and community-based arts centers.					
		. – – – -				
		. – – – -				
4 d	Other program services (Describe in Schedule O) See Schedule O					
	(Expenses \$ 254,595. including grants of \$) (Revenue \$)	
4 e	Total program service expenses ► 11,812,568.					

Pa	rt IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4	Х	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? It 'Yes,' complete Schedule D, Part V	10	Х	
11	Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	Х	
•	• Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI			
•	• Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII			
•	• Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII			
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX			
	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X			
•	• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If 'Yes,' complete Schedule D, Part X			
	Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12	х	
12	AWas the organization included in consolidated, independent audited financial statement for the tax year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional Yes No			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
Ŀ	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		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		Х
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		Х

Part IV Checklist of Required Schedules (continued) No Yes Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II X 21 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III 22 X 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 X Schedule J 23 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25 24a Х 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c 24d d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a Х disqualified person during the year? If 'Yes,' complete Schedule L, Part I 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I 25b Х 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II Х 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III Χ 27 Was the organization a party to a business transation with one of the following parties (see Schedule L. Part IV instructions for applicable filing thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28a Х **b** A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Х Schedule L, Part IV 28b c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV X 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M. 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M 30 Х Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II 32 Χ 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 X 33 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 Χ 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 35 Χ Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related Χ organization? If 'Yes,' complete Schedule R, Part V, line 2 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI 37 Х Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? 38 Note. All Form 990 filers are required to complete Schedule O 38 X

BAA

Form 990 (2009)

	Total Moderning Carlot into I mings and Tax Compilation			
			Yes	No
	a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U S Information Returns Enter -0- if not applicable			
	b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	х	
2	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 29			
2	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)			
3	a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		Х
	b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule Q	3b		
4	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Х	
	olf 'Yes,' enter the name of the foreign country Cayman Islands			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Χ
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
•	of 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5с		
6	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		Х
1	o If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
i	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Х	
ı	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b	Х	
•	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7с		X
	if 'Yes,' indicate the number of Forms 8282 filed during the year 7d			
•	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
ı	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7 h		
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?	8		
9	Sponsoring organizations maintaining donor advised funds.			
ć	Did the organization make any taxable distributions under section 4966?	9a		
I	Did the organization make any distribution to a donor, donor advisor, or related person?	9Ь		
10	Section 501(c)(7) organizations. Enter:			
ä	Initiation fees and capital contributions included on Part VIII, line 12			
ı	Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		1	
11	Section 501(c)(12) organizations. Enter:			
	Gross income from other members or shareholders		ł	
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
l	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			
		_		

Governing Body and Management

1a Enter the number of voting members of the governing body

Section A.

44

No

Yes

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.

	b Enter the number of voting members that are independent	1b 44						
2	Did any officer, director, trustee, or key employee have a family relationship or a business re officer, director, trustee or key employee? See Schedule 0	lationship with any other	2	Х				
3	3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?							
4	Did the organization make any significant changes to its organizational documents		4		X			
	since the prior Form 990 was filed?							
5	Did the organization become aware during the year of a material diversion of the organization	n's assets?	5		<u>X</u>			
6	Does the organization have members or stockholders? .		6		X			
	a Does the organization have members, stockholders, or other persons who may elect one or n governing body?		7a		Х			
	b Are any decisions of the governing body subject to approval by members, stockholders, or ot	her persons?	7b		X			
8	Did the organization contemporaneously document the meetings held or written actions unde the following.	rtaken during the year by						
	a The governing body?		8a	Х				
	b Each committee with authority to act on behalf of the governing body?		8 b	X				
9	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who car organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	nnot be reached at the	9		X			
Sec	ction B. Policies (This Section B requests information about policies not r	equired by the Internal						
Rev	enue Code)							
		,		Yes	No			
	a Does the organization have local chapters, branches, or affiliates?		10a		<u>X</u>			
	b If 'Yes,' does the organization have written policies and procedures governing the activities of and branches to ensure their operations are consistent with those of the organization?	f such chapters, affiliates,	10b					
11	Has the organization provided a copy of this Form 990 to all members of its governing body by	pefore filing the form?	11		X			
11.	ADescribe in Schedule O the process, if any, used by the organization to review this Form 990	. See Schedule O		Х				
12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13								
1	• Are officers, directors or trustees, and key employees required to disclose annually interests to conflicts?	that could give rise	12b	Х				
•	Does the organization regularly and consistently monitor and enforce compliance with the pol Schedule O how this is done See Schedule O	ıcy? If 'Yes,' describe in	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	<u>X</u>				
15	Did the process for determining compensation of the following persons include a review and a persons, comparability data, and contemporaneous substantiation of the deliberation and dec	approval by independent ision?						
i	a The organization's CEO, Executive Director, or top management official See Schedule	0	15a	Х				
I	Other officers of key employees of the organization		15b		X			
	If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions)				ì			
16	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar entity during the year?	arrangement with a taxable	16a		X			
ı	o If 'Yes,' has the organization adopted a written policy or procedure requiring the organization in joint venture arrangements under applicable federal tax law, and taken steps to safeguard status with respect to such arrangements?	to evaluate its participation the organization's exempt	16b					
Sec	tion C. Disclosures	<u> </u>						
	List the states with which a copy of this Form 990 is required to be filed ► OH KY							
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) a inspection. Indicate how you make these available. Check all that apply								
	X Own website X Another's website X Upon request							
19	Describe in Schedule O whether (and if so, how) the organization makes its governing docum statements available to the public See Schedule O	ents, conflict of interest poli	cy, an	d fina	ncıal			
20								

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 organizations'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 employees'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if the organization did no	ot compen	sate a	any o	curre	ent (officer	, dır	ector, or trustee		
(A)	(B)			(c)			(D)	(E)	(F)
Name and Title	Average hours		tion (check	k all t	that app		Reportable compensation from	Reportable	Estimated amount of other
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099 MISC)	amount or other compensation from the organization and related organizations
Too A Cartor	<u> </u>		_		_	<u> </u>	<u> </u>			
Lee A. Carter Chairman	5	X		Х				0.1	0.	0.
Ellen Van Der Horst			\vdash	^	\vdash	-				
Vice Chair	1	Х		Х				0.	0.	0.
Edgar L. Smith Jr.	 		\vdash					0.		<u> </u>
Secretary	2	X		Х				0.	0.	0.
Karen M. Hoguet								0.		
Treasurer	1	X		Х				o.	0.	0.
John F. Barrett	<u> </u>	<u> </u>						· · ·		<u></u>
Trustee	0	X						0.	0.	0.
Karen R. Bowman										
Trustee	1	Х						0.	0.	0.
Margaret Buchanan				_						
Trustee	0	х						0.	0.	0.
Otto M. Budig, Jr.										
Trustee	1	X						0.	0.	0.
Paul W. Chellgren										
Trustee	0	Х						0.	0.	0.
Alfonso Cornejo										
Trustee	0	Х						0.	0.	0.
Cathy Crain										
Trustee	0	Х						0.	0.	0.
Daniel B. Cunningham										
Trustee	11	Х						0.	0.	0.
Nancy Heffner Donovan					. !				ŀ	
Trustee	0	Х						0.	0.	<u> </u>
Kenneth Goldhoff										
Trustee	11	Х						0.	0.	0.
Stephen L. Hightower										
Trustee	1	Х						0.	0.	0.
Doris S. Jackson	_								_	_
Trustee	1	Х						0.	0.	0.
<u>Julie S. Jansen</u>		,						_	_	-
Trustee	3	X				(3.0)00		0.	0.	0. Form 990 (2009)

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Form 990 (2009) Cincinnati Institute of F	ine A	Art	s						31-053713		Page 8
Part VII Section A. Officers, Directors, Trus	tees, k	Сеу	En	ıplo	oye	es,	an	d Highest Cor	npensated Emp	loyees (co	ont)
(A)	(B)			(c)			(D)	(E)	(F)	-
Name and Title	Average hours							Reportable	Reportable	Estimate	ed
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099 MISC)	amount of o compensa from the organizate and relat organizate	tion e ion ted
Judge Nathaniel R. Jones (Ret)								_			
Trustee	0	X			1			0.	0.		0.
Kevin T. Kabat										_	
Trustee	0	X						0.	0.		0.
Jan-Michele Lemon Kearney											
Trustee	1	X						0.	0.		0.
Robert Lawrence										•	
Trustee	0	X						0.	0.		0.
Dr. Mitchel D. Livingston Trustee	2	Х						0.	0.		0.
Jean Lydon-Rodgers											
Trustee	1	X						0.	0.		0.
Timothy Maloney Trustee	0	Х						0.	0.		0.
David S. Meyer											
Trustee	1	Х						0.	0.		0.
James A. Miller											
Trustee	0	Χ						0.	0.		0.
Marjorie Motch	,										
Trustee	0	X						0.	0.		0.
Thomas Neyer, Jr.											
Trustee	0	X						0.	0.		0.
Mikio Nishizu											
Trustee	1	X						0.	0.		0.
Evans N. Nwankwo											
Trustee	0	X						0.	0.,		0.
1 b Total							•	501,014.	0.	51,	809.
2 Total number of individuals (including but not limited	d to tho	se lis	sted	abo	ove)	who	o re	ceived more than	\$100,000 in reporta	able compen	sation
from the organization 🕨 3							., .				
										Yes	No
										1 1	1 -

3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual	3	i	X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual	4	Х	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services	- 5		Y

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of Services	(C) Compensation
Topos Partnership 1865 Broad St Providence, RI 02905	Strategic consulting	137,500.
		
2 Total number of independent contractors (including but not limited to thos \$100,000 in compensation from the organization ► 1		

(A) (B) Total revenue Related or exempt function	business excluded from tax revenue under sections
revenue	512, 513, or 514
Ta Federated campaigns b Membership dues c Fundraising events. d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contribns included in lns 1a-1f. h Total. Add lines 1a-1f 2a Admissions b c d e f All other program service revenue g Total. Add lines 2a-2f Add lines 2a-2f	
similar amounts not included above 1f 12,483,604. g Noncash contribns included in lns 1a-1f. \$ 167,584. h Total. Add lines 1a-1f 12,483,604.	
Business Code 713990 25,317. 25,31	.7.
C	
3 Investment income (including dividends, interest and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties	820,480.
(i) Real (ii) Personal 6a Gross Rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss)	
7a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) (i) Securities (ii) Other 22385488. 22954284. -568,796.	~5.68,796.
8a Gross income from fundraising events (not including \$	300,750.
9a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities	
10 a Gross sales of inventory, less returns and allowances a b Less cost of goods sold b	
c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11a	
b c d All other revenue	
e Total. Add lines 11a-11d 12 Total revenue. See instructions ► 12,760,605. 25,31	7. 0. 251,684.

Form 990 (2009) Cincinnati Institute of Fine Arts

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	(B), (C), and (D).
--	--------------------

Do 6b.	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	10,392,265.	10,392,265.	3	
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16		-		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	427,376.	170,415.	166,221.	90,740.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages.	1,303,814.	524,599.	157,019.	622,196.
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	93,390.	39,196.	12,786.	41,408.
9	Other employee benefits	105,581.	35,801.	19,247.	50,533.
10	Payroll taxes	115,128.	47,661.	17,068.	50,399.
11	Fees for services (non-employees)	210,120.	1,,001.	1.,000.	
	a Management				
	o Legal	20,116.	16,335.	3,131.	650.
	C Accounting	17,595.	==,===	17,595.	
	d Lobbying				
	Prof fundraising svcs See Part IV, In 17				
	Investment management fees	104,284.		104,284.	
	g Other	367,236.	211,420.	145,742.	10,074.
_	Advertising and promotion	44,140.	6,250.		37,890.
13	Office expenses	94,547.	27,525.	8,928.	58,094.
14	Information technology	130,923.	38,091.	33,196.	59,636.
15	Royalties		· · · · · ·	<u>' ' </u>	<u>, , , , , , , , , , , , , , , , , , , </u>
16	Occupancy	97,445.	34,902.	13,421.	49,122.
17	Travel	19,330.	9,640.	6,251.	3,439.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	41,144.	13,080.	24,456.	3,608.
20	Interest	23,092.		23,092.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	58,376.		58,376.	
	Insurance Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)	19,292.		19,292.	i ,
a	Community engagement programmı	224,800.	224,800.		
ŀ	Uncollectible pledge expense	188,851.			188,851.
c	Furniture and equipment	168,261.	3,059.	161,109.	4,093.
c	Recognition	29,692.	1,490.	311.	27,891.
E	Miscellaneous	22,718.	3,433.	15,198.	4,087.
f	All other expenses	12,606.	12,606.		
	Total functional expenses Add lines 1 through 24f	14,122,002.	11,812,568.	1,006,723.	1,302,711.
26	Joint costs. Check here if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
BAA					Form 990 (2009)

Pa	<u>ırt X</u>	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing				1	
	2	Savings and temporary cash investments			798, <u>093</u> .	2	3,248,352.
	3	Pledges and grants receivable, net			4,757,686.	3	4,829,429.
	4	Accounts receivable, net		4			
	5	Receivables from current and former officers, director and highest compensated employees. Complete Part	rs, truste II of Scl	ees, key employees, hedule L		5	_
	6	Receivables from other disqualified persons (as defin	ed unde	r section 4958(f)(1))			
		and persons described in section 4958(c)(3)(B) Com		6			
S	7	Notes and loans receivable, net				7	
A S E T S	8	Inventories for sale or use				8	
S	9	Prepaid expenses and deferred charges			19,542.	9	29,996.
	10 a	Land, buildings, and equipment cost or other basis	10a	682,076.			
		Complete Part VI of Schedule D					
	b	Less: accumulated depreciation	10 Ь	136,210.	53,751.	10 c	545,866.
	11	Investments — publicly-traded securities			69,999,698.	11_	65,940,093.
	12	Investments - other securities See Part IV, line 11		ĺ	5,337,565.	12	7,772,380.
	13	Investments - program-related See Part IV, line 11			1,550.	13	23,650.
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11 .			2,641,048.	15	2,762,463.
	16	Total assets Add lines 1 through 15 (must equal line	34)		83,608,933.	16	85,152,229.
	17	Accounts payable and accrued expenses		·	180,016.	17	216,380.
	18	Grants payable	221,978.	18	176,277.		
	19	Deferred revenue		19			
L	20	Tax-exempt bond liabilities				20	
A B	21	Escrow or custodial account liability Complete Part I		21			
L	22	Payables to current and former officers, directors, tru highest compensated employees, and disqualified per	stees, ke rsons. C	ey employees, omplete Part II			
Ī		of Schedule L				22	<u></u>
E S	23	Secured mortgages and notes payable to unrelated the	nırd partı	ies		23	435,199.
	24	Unsecured notes and loans payable to unrelated third	l parties			24	
	25	Other liabilities Complete Part X of Schedule D			42,753,898.	25	42,845,869.
	26	Total liabilities. Add lines 17 through 25.			43,155,892.	26	43,673,725.
Ņ F		Organizations that follow SFAS 117, check here ►	X and	complete lines			
		27 through 29 and lines 33 and 34.				_	
Ą	27	Unrestricted net assets			8,725,031.	27	9,084,319.
S T S	28	Temporarily restricted net assets		Į.	22,563,311.	28	23,000,730.
	29	Permanently restricted net assets			9,164,699.	29	9,393,455.
O R		Organizations that do not follow SFAS 117, check he	ere 🟲	and complete			
FUZD	50	lines 30 through 34. Capital stock or trust principal, or current funds				20	
	30	·				30	
Ã	31	Paid-in or capital surplus, or land, building, and equip		+		31	
B4し420Eの	32	Retained earnings, endowment, accumulated income,	, or otne	r iunas	40 4E2 041	32	/1 /70 EO/
Ę	33	Total net assets or fund balances		ŀ	40,453,041.	33	41,478,504.
	34	Total liabilities and net assets/fund balances.			83,608,933.	34	85,152,229.

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Form **990** (2009)

Form 990 (2009) Cincinnati Institute of Fine Arts	31-0537138		Pa	ge 12
Part XI Financial Statements and Reporting				
· ·			Yes	No
1 Accounting method used to prepare the Form 990: Cash X Accrual Other				_
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O		į)	
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
b Were the organization's financial statements audited by an independent accountant?		2b	X	
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for overs review, or compilation of its financial statements and selection of an independent accountant?	sight of the audit,	2 c	Х	
If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	aın			
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year w consolidated basis, separate basis, or both	vere issued on a			
X Separate basis Consolidated basis Both consolidated and separate basis		- 1		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set fort Audit Act and OMB Circular A-133?	th in the Single	3a		Х
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo or audits, explain why in Schedule O and describe any steps taken to undergo such audits	the required audit	3b		

BAA

Form **990** (2009)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Schedule A (Form 990 or 990-EZ) 2009

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name of	the o	ganization Cinc	innati Institu	ite of Fine Arts	;		·		Employe	r identifica	ation number	
			ArtsWave						1	53713		
Part		Reason for Pu	blic Charity Statu	ıs (All organızatıons	must o	comple	ete this	s part.) See i	nstruc	tions	
The or	ganı	zation is not a pri	vate foundation becal	use it is (For lines 1 thro	ugh 11,	check c	nly one	box)				
1	A church, convention of churches or association of churches described in section 170(b)(1)(A)(i).											
2	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)											
3 [A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii).											
4	4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's											
	n	ame, city, and sta	ate.									
5 [170(b)(1)(A)(iv). (Complete Part II)											
6 7												
8	A	community trust	described in section	170(b)(1)(A)(vi). (Comple	te Part I	1)						
9 [fr fr	om activities relate ivestment income	ed to its exempt function	more than 33-1/3 % of its in a subject to certain excess taxable income (less complete Part III)	eptions.	and (2) r	no more	than 33-	1/3 % of	its supp	ort from aro	SS
10 [A	n organization or	ganized and operated	exclusively to test for pu	ıblıc saf	ety See	section	n 509(a)	(4).			
11 [An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h											
	a ☐ Type I											
e [
f	lf cl	the organization heck this box	received a written det	termination from the IRS	that is a	Type I	, Type I	l or Typ	e III sup	porting	organizatio	n, [
g	S	ınce August 17, 2	006, has the organiza	ition accepted any gift o	r contrib	ution fr	om any	of the f	ollowing	persons	s?	
												Yes No
	(i	below, the go	overning body of the s	controls, either alone or upported organization?	together	with pe	ersons d	escribe	d ın (ıı)	and (III)	11 g (i)	
	(i	•	iber of a person desc	**							11 g (ii)	
	•		-	described in (i) or (ii) al							11 g (iii)	
<u> </u>	<u> </u>	rovide the followi	ng information about t	the supported organization	ns		r					
	(i) N	ame of Supported Organization	(ii) EIN	(III) Type of organization (described on lines 1 9 above or IRC section (see instructions))	organizat (i) listed gove	s the ion in col I in your rning nent?	the organ	(i) of	(vi) Is the organization in col (i) organized in the US?		(vii) Amoun	t of Support
					Yes	No	Yes	No	Yes	No		
							-					
			:									
Total		-										
lotai					l .		I					

BAA 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 Cincinnati Institute of Fine Arts 31-0537138

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.)

	(Complete only if you check	ed the box on line	5, 7, or 8 of Par	(1)				
Sec	tion A. Public Support				, · · · · · · · · · · · · · · · · · · ·			
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total	
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants')	13171476.	12162955.	13113552.	12436071.	12483604.	63,367,658.	
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf	-					0.	
	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.						0.	
4	Total. Add lines 1-through 3	13171476.	12162955.	13113552.	12436071.	12483604.	63,367,658.	
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						5,363,600.	
6	Public support. Subtract line 5 from line 4						58,004,058.	
Sec	tion B. Total Support							
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total	
7	Amounts from line 4	13171476.	12162955.	13113552.	12436071.	12483604.	63,367,658.	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	2,218,143.	2,123,866.	1,413,708.	1,123,705.	820,480.	7,699,902.	
9	Net income from unrelated business activities, whether or not the business is regularly carried on	321,347.					321,347.	
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						0.	
11	Total support. Add lines 7 through 10						71,388,907.	
12	Gross receipts from related activ	rities, etc (see ins	structions)			12	0.	
13	First five years. If the Form 990 organization, check this box and		ation's first, seco	nd, third, fourth,	or fifth tax year as	s a section 501(c)	(3)	
	tion C. Computation of Pu							
	Public support percentage for 20			ne 11, column (f)		14	81.3%	
15	Public support percentage from	2008 Schedule A,	Part II, line 14			15	82.2%	
16 a	33-1/3 support test — 2009. If the and stop here. The organization	e organization did qualifies as a put	not check the boolicly supported o	ox on line 13, and rganization	d the line 14 is 33	-1/3 % or more, c	heck this box	
ł	33-1/3 support test — 2008. If the and stop here. The organization	e organization did qualifies as a pub	not check a box blicly supported o	on line 13, or 16a rganization	a, and line 15 is 3	3-1/3% or more, o	check this box	
17 a	10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts	meets the 'facts-a	and-circumstance	s' test, check this	box and stop her	e. Explain in Part	t IV how	
	b 10%-facts-and-circumstances test — 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.							
	Private foundation. If the organi	zation did not che	eck a box on line,	13, 16a, 16b, 17a				
RAA					Sc	nedule A (Form 9	90 or 990-EZ) 2009	

Schedule A (Form 990 or 990-EZ) 2009 Cincinnati Institute of Fine Arts 31-0537138 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I) Section A. Public Support Calendar year (or fiscal yr beginning in) ► (a) 2005 **(b)** 2006 (c) 2007 (d) 2008 **(e)** 2009 (f) Total Gifts, grants, contributions and membership fees received (Do not include 'unusual grants') Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 3 received from disqualified persons **b** Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year c Add lines 7a and 7b 8 Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal yr beginning in) ► (a) 2005 **(b)** 2006 **(c)** 2007 (d) 2008 (e) 2009 (f) Total 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources **b** Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b Net income from unrelated business activities not included inline 10b. whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support. (add Ins 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) • organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)). 15 % 16 Public support percentage from 2008 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 17 % 18 Investment income percentage from 2008 Schedule A, Part III, line 17 18 % 19a 33-1/3 support tests -- 2009. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33-1/3 support tests - 2008. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Schedulè /	A (Form	n 990 or	990-E	Z) 2009	Ci	ncin	nati	In	sti	tute	of	Fine	Arts	1	31	-0537	138	P	age 4
Part IV	Supi	olemer	ntal Ir	ıforma	tion.	Com	plete	this	pari	t to p	rovid	e the	explar	nations	required	by P	art II.	line 10:	
·	Part	ll, line	17a	or 17b	; and	Part	'III, lı	ne 1	Ż. P	rovid	e any	othe	r addi	tional in	formati	on. Se	e insti	line 10; ructions	
							·												
												·							
	_																		
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TEEA0404L 02/05/10

Schedule A (Form 990 or 990-EZ) 2009

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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

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.

Open to Public Inspection

if the organization answered Yes, to Form 990, Part IV, line 3, or Forn	1 990-EZ, Part VI, line 46 (Political Campaign Activities), then
• Section 501(c)(3) organizations: complete Parts I-A and B Do not of	complete Part I-C
• Section 501(c) (other than section 501(c)(3)) organizations: comple	to Parts I A and C below Do not complete Part I.B

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

	-	,' to Form 990, Part IV, line 5 (Proxy Tax), irganizations Complete Part III	then						
	of organization	inganizations Complete Fait III		Employer identification	ation number				
	ncinnati Institute	of Fine Arts		31-053713					
		rganization is exempt under secti	on 501(c) or is a						
		organization's direct and indirect political							
	Political expenditures	organization o an oot and man oot pointed it	pa.g., ast	▶ \$	}				
	Volunteer hours			,					
		rganization is exempt under secti	on 501(c)(3).	-					
		use tax incurred by the organization under		▶ \$	0.				
	•	sise tax incurred by organization managers		▶ \$	0.				
	•	a section 4955 tax, did it file Form 4720 for			Yes No				
	a Was a correction made?		•		Yes No				
ł	b If 'Yes,' describe in Part IV.								
Par	rt I-C Complete if the or	rganization is exempt under secti	on 501(c) , excep	t section 501(c)(3).					
		pended by the filing organization for section							
2	Enter the amount of the filing function activities	g organization's funds contributed to other	organizations for sec	ction 527 exempt					
3	3 Total of exempt function expenditures Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b								
4	Did the filing organization file	e Form 1120-POL for this year?			Yes No				
5	Enter the names, addresses made. For each organization contributions received that w	and employer identification number (EIN) is listed, enter the amount paid from the filipere promptly and directly delivered to a sege (PAC). If additional space is needed, pr	ng organization's fund parate political organ	ds Also enter the amou	int of political				
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-				
	-			-					

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

Schedule C (Form 990 or 990-EZ) 2009

Schedule C (Form 990 or 990-EZ) 2009		n is exempt under sec		31-053 /	
Part II-A Complete if t section 501(ne organizatioi h)).	i is exempt under sec	ction 501(c)(5) and	illied Form 5/66 (ei	ection under
A Check ► If the film	g organization belo	ongs to an affiliated group.			
B Check ► If the filin	g organization che	cked box A and 'limited coi	ntrol' provisions apply		
(The term '	Limits on Lobbyir expenditures' mea	ng Expenditures – ns amounts paid or incurr	ed.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditu	res to influence pu	blic opinion (grass roots lo	bbying).	14.	
b Total lobbying expenditu	ires to influence a l	egislative body (direct lobb	ying).	1,444.	
c Total lobbying expenditu	ires (add lines 1a a	nd 1b)		1,458.	0.
d Other exempt purpose e	xpenditures			14,120,544.	
e Total exempt purpose ex	kpenditures (add lir	nes 1c and 1d)		14,122,002.	0.
f Lobbying nontaxable am both columns	ount. Enter the am	ount from the following tab	ole in	856,100.	
If the amount on line 1e, colu	ımn (a) or (b) ıs	The lobbying nontaxable a	mount is:		
Not over \$500,000		20% of the amount on line 1e			
Over \$500,000 but not over \$1,0	000,000	\$100,000 plus 15% of the excess	over \$500,000.		
Over \$1,000,000 but not over \$1	1,500,000	\$175,000 plus 10% of the excess	over \$1,000,000.		
Over \$1,500,000 but not over \$1	17,000,000	\$225,000 plus 5% of the excess of	over \$1,500,000		
Over \$17,000,000		\$1,000,000			
g Grassroots nontaxable a	214,025.	0.			
h Subtract line 1g from line	0.	0.			
i Subtract line 1f from line	0.	0.			
j If there is an amount oth section 4911 tax for this		her line 1h or line 1i, did t	he organization file For	m 4720 reporting	Yes No
(Some	e organizations tha	4-Year Averaging Period U t made a section 501(h) elo s below. See the instruction	ection do not have to c	complete all of the five h 2f.)	
	Lobb	ying Expenditures During	4-Year Averaging Peri	od	
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying non-taxable amount	853,52	2. 873,303.	843,411.	856,100.	3,426,336.
b Lobbying ceiling amount (150% of line 2a, column (e))					5,139,504.
c Total lobbying expenditures	1,60	2. 1,778.	1,440.	1,458.	6,278.
d Grassroots nontaxable amount	213,38	1. 218,326.	210,853.	214,025.	856,585.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,284,878.

f Grassroots lobbying expenditures BAA

Schedule C (Form 990 or 990-EZ) 2009

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14.

14.

Schedule C (Form 990 or 990-EZ) 2009 Cincinnati Institute of Fine Arts Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).		-053 I For i	
(election under Section 301(ii)).	(a	n)	(b)
	Yes	No	Amount
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements?			-
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities? If 'Yes,' describe in Part IV	-		
j Total Add lines 1c through 1: 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	1	1	· · ·
b If 'Yes,' enter the amount of any tax incurred under section 4912			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912	-	Ì	
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	- 1		
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5)	or s	ection 501(c)(6).
			Yes No
1 Were substantially all (90% or more) dues received nondeductible by members?			1
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2
3 Did the organization agree to carryover lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)	-V5\	or s	action 501(c)(6)
if BOTH Part III-A, questions 1 and 2 are answered 'No' OR if Part III-A, line 3	is a	ıswe	red 'Yes.'
1 Dues, assessments and similar amounts from members		1	
2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).			
a Current year		2a	
b Carryover from last year		2b	
c Total	}	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues]	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and politic expenditure next year?	cal	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	ŀ	5	
Part IV Supplemental Information			
Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5, and Also, complete this part for any additional information	d Part	II-B, I	ine 1i

Schedule C (Form 990 or 990-EZ) 2009 Cincinnati Institute of Fine Arts	31-0537138	Page 4
Schedule C (Form 990 or 990-EZ) 2009 Cincinnati Institute of Fine Arts Part IV Supplemental Information (continued)		
- artir cappionionial information (continuos)		
		
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SCHEDULE D (Form 990)

Supplemental Financial Statements

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

► Attach to Form 990. ► See separate instructions

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Inspection Name of the organization Employer Identification number Cincinnati Institute of Fine Arts 31-0537138 dba ArtsWave Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or for any other purpose conferring impermissible private benefit?? Part II | Conservation Easements Complete if the organization answered 'Yes' to Form 990. 1 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Preservation of certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Year 2a a Total number of conservation easements **b** Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2с d Number of conservation easements included in (c) acquired after 8/17/06 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax vear ► Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easement it holds? No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items a Revenues included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

					2.5	1 0507100	5
Schedule D (Form 990) 2009 Cinci						1-0537138	
Part III Organizations Mainta	ining Colle	ctions of Art, His	torical I	reasures, o	r Otner Simil	ar Assets (continuea)
3 Using the organization's acquisition items (check all that apply)	ion accession	and other records, cl	neck any of	the following	that are a signif	cant use of its	collection
a Public exhibition		d Loa	n or exchai	nge programs			
b Scholarly research		e Oth					
c Preservation for future gener	ations						
4 Provide a description of the orga		ections and explain h	low they fu	rther the orga	nızatıon's exemp	t purpose in	
5 During the year, did the organiza assets to be sold to raise funds r	tion solicit or ather than to	receive donations of be maintained as pai	art, historic	al treasures, janization's co	or other similar ollection?	Yes	s No
Part IV Escrow and Custodia 9, or reported an amo	I Arrangem unt on Forn	ients Complete if n 990, Part X, lin	organıza e 21.	ition answe	red 'Yes' to F	orm 990, Pa	art IV, line
1 a Is the organization an agent, trus included on Form 990, Part X?	stee, custodiai	n, or other intermedia	ary for cont	ributions or ot	her assets not	Yes	s No
b If 'Yes,' explain the arrangement						<u>ا</u>	ا ا
2 ii 100, explain the altangement	are are year a	ina compicto the fond	mig table			Amour	nt
c Beginning balance					1 c		
d Additions during the year					1 d		
e Distributions during the year					1 e		
f Ending balance					1 f		
•		000 Davit V I.ma 2	10		<u>''</u>	Yes	s No
2a Did the organization include an a		m 990, Part X, line 2	17			1 es	, INO
b If 'Yes,' explain the arrangement					00 D 1/ 1	10	
Part V Endowment Funds Co							
	(a) Current			(c) Two years bad	k (d) Three ye	ars back (e)	Four years back
1 a Beginning of year balance	36,009,						
b Contributions	275,	528. 747,	716.				
c Net Investment earnings, gains, and losses	2,463,	8694,047,	793.				
d Grants or scholarships							
e Other expenditures for facilities and programs	2,489,	275. 2,187,	650.				
f Administrative expenses							
g End of year balance	36,260,	023. 36,009,	901.				
2 Provide the estimated percentage	e of the year of	end balance held as.					
a Board designated or quasi-endov	_	20.00%					
b Permanent endowment ►	 	_					
	.00 %						
3a Are there endowment funds not a organization by	n the possess	sion of the organization	on that are	held and adm	ınıstered for the		Yes No
(i) unrelated organizations						3a(i)	Х
(ii) related organizations						3a(ii)	Х
b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R? 3b							
4 Describe in Part XIV the intended uses of the organization's endowment funds See Part XIV							
Part VI Investments—Land, B							
Description of investment		(a) Cost or other base (investment)	s (b) Co	st or other s (other)	(c) Accumula Depreciatio		Book Value
1a Land		(1 230	X- <u></u> , -, -/			
b Buildings	ŀ						·
<u> </u>	L						

25,686. 513,717. 488,031. c Leasehold improvements **d** Equipment 57,835. 168,359. 110,524. Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) 545,866.

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Schedule'D (Form 990) 2009 Cincinnati Institute of Fine Arts

31-0537138

Page 3

_		-05	5/136 Page 4
	Reconciliation of Change in Net Assets from Form 990 to Financial Statements		10.760.605
1	Total revenue (Form 990, Part VIII,column (A), line 12)		12,760,605.
2	Total expenses (Form 990, Part IX, column (A), line 25)		14,122,002.
3	Excess or (deficit) for the year Subtract line 2 from line 1		-1,361,397.
4	Net unrealized gains (losses) on investments		2,262,509.
5	Donated services and use of facilities		6,256.
6	Investment expenses .		
7	Prior period adjustments		104 050
8	Other (Describe in Part XIV) See Part XIV		124,350.
9	Total adjustments (net) Add lines 4 through 8		2,393,115.
10			1,031,718.
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Re		
1	Total revenue, gains, and other support per audited financial statements	1	15,233,985.
	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
	Net unrealized gains on investments 2a 2,262,509.		
	Donated services and use of facilities 2b 86, 521.		
	Recoveries of prior year grants	!	
	Other (Describe in Part XIV) See Part XIV 2d 124,350.	. '	
	Add lines 2a through 2d	<u> 2e</u>	2,473,380.
	Subtract line 2e from line 1	3	12,760,605.
	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
	ı İnvestments expenses not included on Form 990, Part VIII, line 7b.		
	Other (Describe in Part XIV)		
C	Add lines 4a and 4b .	4c	
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	12,760,605.
	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Retu	
1	Total expenses and losses per audited financial statements	1	14,202,267.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities 2a 80, 265.		
þ	Prior year adjustments 2b		
c	Other losses 2c		
d	Other (Describe in Part XIV) . 2d	. 1	
e	Add lines 2a through 2d	2e	80,265.
3	Subtract line 2e from line 1	3	14,122,002.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investments expenses not included on Form 990, Part VIII, line 7b.		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	
	Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18)	5	14,122,002.
Par	t XIV Supplemental Information		
line 4	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, 1, Part X, line 2, Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this pamation Part V, Line 4 - Intended Uses Of Endowment Fund	lines rt to p	1b and 2b, Part V, provide any additional
	The spending rate distribution from unrestricted endowment and board	 des:	ignated funds
	suppports a healthy arts sector in the region through grants to arts		
	and programs as well as through support of ArtsWave's operating budge	:t. 	
	The spending rate distribution from restricted endowment funds is expanded accordance with the donor's wishes.	ende	ed in
	<u></u>		

Schedule D (Form 990) 2009 Cincinnati Institute of Fine Arts Part XIV Supplemental Information (continued)	31-0537138	Page 5
Part X - FIN 48 Footnote		
ArtsWave_adopted_the_provision_of_FASB_Accounting_Standards_Cod	ification ("ASC")	. _
	tain_income_tax	
positionsAdoption of ASC 740 had no effect on the accompanyi	ng financial	.
statements. ArtsWave evaluates its uncertain tax positions as	to whether it is mon	r <u>e</u>
likely_than_not_a_tax_position_could_be_sustained_in_the_event_	of an audit by the	 _
applicable taxing authority. Accordingly, a loss contingency is	recognized when it	- -
is probable that a liability has been incurred as of the date of	of the financial	 _
statements and the amount of the loss can be reasonably estimat	ed. The amount	. _
recognized is subject to estimate and management judgment with	respect to the like	ју
outcome_of_each_uncertain_tax_position. The amount that is ult	<u>imately sustained fo</u>	o <u>r</u>
an individual uncertain tax position or for all uncertain tax p	ositions in the	
aggregate could_differ from the amount recognized		_
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Schedule D	(Form 990) 2009 Cincinnati Institute of Fine Arts	31-053/138	Page 5
Part XIV	Supplemental Information (continued)		
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TEEA3305L 07/10/09

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2009	Schedule D, Part 2 Cincin	XIV - Supplemental Info nati Institute of Fine Arts dba ArtsWave	ormation	Page 4
Schedule D, F Other Change	art XI, Line 8 s In Net Assets Or Fund Balan	ices		
Beneficial	interest value change		Total \$	124,350. 124,350.
Schedule D, P Other Revenu	art XII, Line 2d e Included In F/S But Not Inclu	ıded On Form 990		
Beneficial	int. value change		Total \$	124,350. 124,350.

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22. ► Attatch to Form 990.

OMB No 1545-0047

Open to Public Inspection

Employer identification number 31-0537138 **2**

X

Part | General Information on Grants and Assistance Cincinnati Institute of Fine Arts

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use See Part IV

Part IV and Schedule I-1 (Form 990) if additional space is needed

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1 (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
Art Opportunities Inc.							
20 E. Central Parkway, Suite 100							Operating
Cincinnati, OH 45202	31-1665900		44,120.	0.			Support
Ballettech Ohlo							
6543 Montgomery Road							Operating
Cincinnati, OH 45213	31-1579484		54,921.	0.			support
Bi-Okoto Drum & Dance							
7030 Reading Rd. #662							Operating
Cincinnati, OH 45237	31-1440549		32,401.	0.			Support
Carnegie Center							
1028 Scott Blvd.							Operating
Covington, KY 41012	61-0897319		25,247.	0.			Support
Center for the Arts, Wyoming							
322 Wyoming Avenue							Operating
Wyoming, OH 45215	31-1454096		10,338.	0.			support
Children's Theatre of Cincinnati							
5020 Oaklawn Drive #2000							Operating
Cincinnati, OH 45227	31-6026285		95,020.	0.			Support
Cincinnati Art Club							
1021 Parkside Plac							Arts
Cincinnati, OH 45202	31-0599379		5,780.	0.			programming
Cincinnati Ballet							
1555 Central Parkway							Operating
Cincinnati, OH 45214	31-6050354		888,254.	0.			Support

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

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

TEEA3901L 02/10/10

Schedule I (Form 990) 2009

Page 2 'Yes' to Form 990, Part IV, line 22. (f) Description of non-cash assistance Part IV | Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered Use Part IV and Schedule I-1 (Form 990) if additional space is needed. Recipients of operating and are ___every_spring_on_their_past_year's_operations.__Allocation_Committees,_comprised_of Awards are paid out on a monthly basis for the eight largest grants and a guarterly ___present_for_oral_interviews_of_applicant_leadership_before_awards_are_finalized.__ ___Grantees_who_receive_annual_operating_support_submit_an_annual_performance_review ___basis_for_the_smaller_grants_throughout_the_fiscal_year._Grantees_are_required_to The ArtsWave Grants Program Committee, comprised of community volunteers, review ___community_volunteers,_review_the_submitted_materials,_conduct_site_visits_and_ (d) Amount of non-cash assistance submissions at joint meetings held three times per year. (c) Amount of cash grant ___ Part I, Line 2 - Grantmaker's Description of How Grants are Used Cincinnati Institute of Fine Arts submit interim financial reports during the year. (b) Number of recipients (a) Type of grant or assistance Schedule I (Form 990) 2009 Part III BAA

2009

Schedule I, Part IV - Supplemental Information

Page 3 31-0537138

Cincinnati Institute of Fine Arts dba ArtsWave

Part I, Line 2 - Grantmaker's Description of How Grants are Used (continued)

project grant support from the Grants Program are required to complete and submit an "Evaluation Plan" with their letters of acceptance. Upon the receipt of the confirmation and the "Evaluation Plan, ArtsWave mails the award check along with a copy of an "Evaluation Report" which is submitted back to ArtsWave at the conclusion of the grant period. A comparison of the "Evaluation Plan" and the "Evaluation Report" helps determine key outcomes from the program/project and pinpoints areas for future improvement.

SCHEDULE I-1 (Form 990)

Department of the Treasury Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)

OMB No 1545-0047

Open to Public Inspection

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

(h) Purpose of grant or assistance Operating Support Employer identification number (Form 990), Part II.) (g) Description of non-cash assistance 31-0537138 (f) Method of valuation (book, FMV, appraisal, other) Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule (e) Amount of non-cash assistance 3,075,409. (d) Amount of cash grant 6,000. 1,820,226. 358,840. 1,054,513. 41,313. 32,389. 13,600. 46,107. 1,206,112 (c) IRC section if applicable 20-2814659 31-0349044 31-1413229 31-0537080 31-1793396 31-0865998 31-0536653 31-0584309 31-1383061 31-0624790 (p) EIN Cincinnati Institute of Fine Arts (a) Name and address of organization or government Cincinnati Musical Festival Asso Cincinnati Black Theatre Company <u>Cincinnati Playhouse in the Park</u> Cincinnati Landmark Productions 105 W. 4th Street #810 ----962 Mt. Adams Circle ______ Cincinnati Shakespeare Festival Cincinnati Symphony Orchestra Cincinnati Museum Association Cincinnati Chamber Orchestra 5919 Hamilton Avenue_ Cincinnati Boychoir_ 4501 Allison Street Cincinnati, OH 45202 Cincinnati, OH 45224 Cincinnati, OH 45212 Cincinnati, OH 45202 Cincinnati, OH 45238 953 Eden Park Drive Cincinnati, OH 45202 Cincinnati, OH 45202 4990 Glenway Avenue Cincinnati, OH 45202 Cincinnati, OH 45202 Cincinnati, OH 45220 Cincinnati Opera_ 717_Race_Street 1241 Elm Street 1243 Elm Street Name of the organization 1241 Elm St.

SCHEDULE 1-1 (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 and Part III.

2009

OMB No 1545-0047

Open to Public Inspection

Name of the organization						Employer identification number	n number
Cincinnati Institute of Fine	le Arts					31-0537138	
Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule	d Other Assistanc	e to Governments	and Organization	s in the United Stat	tes (Schedule I	(Form 990), Part II.	t II.)
(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
Clifton Cultural Arts Center 3711 Clifton Avenue Cincinnati, OH 45220	20-2383576		30,755.				Operating Support
Contemporary Arts Center 44 E. 6th Street Cincinnati, OH 45202	31-0590095		478,919.				Operating Support
Contemporary Dance_Theater, Inc	23-7431573		12,000.				Operating Support
Creative Aging Cincinnati	31-1129571		10,000.				Operating Support
Elementz	04-3698700		26,000.				Operating support
Ensemble_Theatre_of Cincinnati	31-1220252		99,052.				Operating Support
Eye of the Artists Foundation	83-0395169		47,036.				Operating support
Fitton Center for Creative Art 101 S. Monument Ave. Hamilton, OH 45011	31-0736673		59,622.				Operating Support
Friends of SCPA 108 West Central Parkway Cincinnati, OH 45202	31-6000758		6,775.				Student performance
ues Soc	31-1311304		10,000.				Blues Fest

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 and Part III.

2009

OMB No 1545-0047

Open to Public Inspection

Name of the organization	S					Employer identification number	ın number
Cincinnati Institute of Fine Arts	e Arts					31-0537138	
Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule	I Other Assistanc	e to Governments	and Organization	s in the United Stat	tes (Schedule I	(Form 990), Part	rt II.)
(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
a <u>ti Found</u>							Onerating
Cincinnati, OH 45201	31-0669700		7,500.				Support
Kennedy Heights Arts Center							Operating
	45-0477749		13,720.				Support
hestra _							Operating
Newport, KY 41072	31-1190635		56,918.				Support
Inc.							Operating
Cincinnati, OH 45202	31-1666206		17,000.				Support
Linton_Inc.							
Music Hall, 1241 Elm Street							Operating
Cincinnati, OH 45202	31-1401052		8,000.				Support
Madcap Productions Puppet Theatr							
3316 Glenmore Avenue	6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6						Operating
Madisonville Arts Center	0166711-16		.027,260				Support
5021 Whetsel Ave.							Art
Cincinnati, OH 45227	30-0063421		5,150.				programming
Manifest_Creative Gallery							
PO Box 6218							Operating
Cincinnati, OH 45206	42-1640342		8,000.				Support
Media Bridges Cincinnati, Inc.							Creation of
1100 Race Street							documentary
Cincinnati, OH 45202	31-1262229		10,000.				film
My Nose Turns Red Theatre Co PO Box 120307							Operating
Covington, KY 41012	31-1203908		6,000.				Support

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Department of the Treasury Internal Revenue Service

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

Continuation Sheet for Schedule I (Form 990)

2009

OMB No 1545-0047

Open to Public Inspection

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Name of the organization Cincinnian・ti Trotiffit	; ; ;					Employer identification number	n number
nistitude of	1 Other Accietance	to Governments	and Organization	and Organizations in the United States (Schedule	Let (Schedule 1	(Form 990) Part	
	יייין איייין איייין איייין	יל נס מסאבווווויבווני		מוויכם סווויכם סיפו	i annanana (
(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
New Edgecliff Theatre							
1612 Otte Ave.							Art
5223	31-1644558	:	6,000.				programming
#1 2							Onerating
Oxford, OH 45056	31-1761141		7,125.				support
Peaslee Neighborhood Center							
215_E. 14th_Street	31-1268160		7 074				Music
Pyramid Hill Sculpture Park & Mu							6111
1763 Hamilton-Cleves Road							Operating
Cincinnatı, OH 45013	31-1439692		7,000.				Support
Queen City Performing Arts Organ							
PO Box 3061							Concert
Cincinnati, OH 45201	31-1374671		7,500.				Series
School House Symphony							
PO Box 36494							Operating
Cincinnati, OH 45236	31-0885557		6,000.				Support
Taft Museum of Art							
316 Pike Street							Operating
Cincinnati, OH 45262	20-5148617		376,575				Support
Visionaries & Voices							
3841 Spring Grove Avenue							Operating
Cincinnati, OH 45223	30-0178314		10,000.				Support
Vocal Arts Ensemble of Cincinnat							
PO Box 8404							Choral
Cincinnati, OH 45208	31-0960571		8,000.				performance
Woman's Art Club of Cincinnati							
698U Cambridge Ave.	20-5433630		7				Operating
	cocc+c-07		1.007.0			_	Support

SCHEDULE 1-1 (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 and Part III.

OMB No 1545-0047

Open to Public Inspection

collaboration (h) Purpose of grant or assistance competition Pianıst Employer identification number (Form 990), Part II.) (g) Description of non-cash assistance 31-0537138 (f) Method of valuation (book, FMV, appraisal, other) Part | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule (e) Amount of non-cash assistance (d) Amount of cash grant 8,475. 7,500 (c) IRC section if applicable 31-1697279 31-0711243 (b) EIN Cincinnati Institute of Fine Arts (a) Name and address of organization or government Women Writing for (a) Change Foundation, 6906 Plainfield Rd. World Plano Competition, Inc. -441_Vine_Street_#1030 1 11111 OH 45236 Cincinnati, OH 45202 1 1 Name of the organization 1 1 11111 Cincinnati,

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization answered 'Yes' to Form 990, Part IV, line 23.
 Attach to Form 990.
 See separate instructions.

Open to Public Inspection

Name of the organization

Cincinnati Institute of Fine Arts

Part I Questions Regarding Compensation

Employer identification number
31-0537138

			Yes	No
1	a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence	1		
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
	b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain .	1 b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply			
	X Compensation committee			
	Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			ı
	a Receive a severance payment or change-of-control payment?	4a		Χ
	b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
	c Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	_		
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of.			_ '
	a The organization?	5a		X
	b Any related organization?	5 b		_X
	If 'Yes' to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			,
	a The organization?	6a		_X_
	b Any related organization?	6Ь		Χ
	If 'Yes' to line 6a or 6b, describe in Part III			
7	For person listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If 'Yes,' describe in Part III	7		Х
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If 'Yes,' describe in Part III	8		_X_
q	If 'Yes' to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations	q		x

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

Cincinnati Institute of Fine Arts Schedule J (Form 990) 2009

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed

Page 2

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

			COLAN COOL VE C VAVA					i i
	3	B) Breakdown o	(b) Breakdown of W-2 and/or 1099-WISC	MISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name	8	(i) Base compensation	(ii) Bonus and incentive compensation	(III) Other reportable compensation	otner deterred compensation	penents	(a)-(i)(a)	Form 990 or Form 990 or Form 990-EZ
Mary McCullough-Hudso	(i)	236, 106.	\vdash		16,160.	.677,7	260,045.	0.
			0.			0	0	
Teresa Haught	(3)	131,328.	12,000.	0.	10,213.	4,733.	158,274.	0.
		0.	0					
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	(ii)							
	()							
	(1)		-					
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	(E)	 	 	! ! ! ! !	1 1 1	 1 1 1 1		
	(ii)							
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DAA				TEEA4102L 02/02/10	/02/10		эспеа	Schedule J (Form 990) 2009

SCHEDULE J-2 (Form 990)

Continuation Sheet for Form 990

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

OMB No. 1545-0047

2009

Department of the Treasury Internal Revenue Service

See instructions for Form 990.

Open to Public Inspection

Name of the Organization Employler Identification number Cincinnati Institute of Fine Arts 31-0537138 Part I Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated **Employees** (A) (B) (C) (D) (E) (F) Position (check all that apply) Name and Title Reportable compensation from the organization (W-2/1099-MISC) Reportable compensation from related organizations (W-2/1099-MISC) Estimated amount of other compensation Average hours per week Officer Individual or director Highest compensated employee Institutional trustee Key employee from the organization and related organizations trustee J. Marvin Quin Trustee 0 Χ 0 0 0. H. Roderick Robinson Trustee 0 Х 0. 0 0. Jack Rouse Trustee 1 Х 0. 0. 0. <u>Lisa Sauer</u> Trustee Х 1 0. 0. 0. Thomas R. Schiff 0 Х Trustee 0 0. 0. Michael T. Schueler Trustee Х 0 0. 0. Kathy Selker Trustee 0 Х 0 0 0. Marilyn Shazor Trustee 0 Х 0 0 0. Robert Sibcy X Trustee 0 0 0 0. <u>Peter S. Strange</u> Trustee 1 X 0. 0. 0. Carol G. Talbot Trustee 1 Х 0. 0 0. Mary Tuuk Trustee Χ 1 0 0. 0. Gail W. Wells Ph.D Trustee 0 Χ 0 0. 0. George H. Vincent Trustee 0 Х 0. 0. 0. Mary McCullough-Hudson President & CEO 50 Χ 236,106. 0. 23,939. Teresa Haught CFO Х 50 0 143,328 14,946. Margy Waller VP/Communications 50 X 121,580 0. 12,924.

SCHEDULE M (Form 990)

Noncash Contributions

► Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

OMB No 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization Cincinnati Institute of Fine Arts dba ArtsWave

Employer identification number 31-0537138

Pai	t I Types of Property							
		(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	Meth	od of	d) determi nues	ning
1	Art-Works of art							
2	Art—Historical treasures				-			
3	Art-Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles	T						
7	Boats and planes							
8	Intellectual property							
9	Securities-Publicly traded	X	93	167,584.	Fair	valu		
10	Securities—Closely held stock							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous	 						
13	Qualified conservation contribution—							
14	Historic structures			·				
14	Qualified conservation contribution—Other							
15	Real estate—Residential				_			
16	Real estate—Commercial	-					_	
17	Real estate—Other		· · · · ·					
18	Collectibles	 					-	
19	Food inventory	 						•
20	Drugs and medical supplies			-				
21	Taxidermy							_
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ► ()							
26	Other ► ()							
27	Other ► ()							
28	Other ► (<u> </u>			
29	Number of Forms 8283 received by the organization completed Form 8283, Part IV, Done	on during the ee Acknowledg	tax year for contributi gement	ons for which the	29			0
							Yes	No
30 a	During the year, did the organization receive by chold for at least three years from the date of the purposes for the entire holding period?	ontribution ar initial contribu	ny property reported in ution, and which is not	Part I, lines 1-28 that required to be used fo	ıt must r exempt	30 a		х
1	olf 'Yes,' describe the arrangement in Part II							- ^•
	Does the organization have a qift acceptance poli	icy that requir	es the review of any n	on-standard contribute	าตร?	31	Х	
	3 , ,		,			<u> </u>		
	Does the organization hire or use third parties or noncash contributions?	related organ	.,	•		32a	X	
	olf 'Yes,' describe in Part II.		See Part II					
33	If the organization did not report revenues in colu	ımn (c) for a t	type of property for wh	iich column (a) is chec	ked,	1		1

describe in Part II

Schedule M (Form 990) 2009 Cincinnati Institute of Fine Ar	
Part II Supplemental Information. Complete this part to provide	the information required by Part I, lines 30b, 32b,
and 33. Also complete this part for any additional informa-	ation.
Part I, Line 32 - Hire and Use of Third Parties	
Gifts of publicly traded stocks are transferred	by the donor or donor's broker
directly_to_a_ArtsWave_account_at_a_bankWhen	received, the shares are immediately
sold through normal brokerage channels by the b	ank
	
	
	
	
	
	
	

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Schedule M (Form 990) 2009

BAA

SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990.

Open to Public Inspection

Name of the organization Cincinnati Institute of Fine Arts dba ArtsWave	Employer identification number 31-0537138	
Form 990 - Additional DBAs		
Antoliarra		
Form 990, Part III, Line 2 - New Services		
	rtnershin as a program	
In our prior tax return, we identified the Arts and Culture Partnership as a program service in which we were determining the future direction of our organization's		
programming. We conducted hundreds of conversations with people from all over the		
region who told us that they see the arts as important because they connect people		
and because they make neighborhoods exciting. This research led us to the		
conclusion that we had to evolve and expand our mission (as shown in Part III, 1).		
To signal this transition, we also changed our doing-business-as name to ArtsWave.		
This name captures the ripple effect of benefits that the arts	create throughout the	
region by embedding the idea of motion and vitality, and of a	novement in which	
everyone can participate.	. 	
	- 	
In_connection_with_these_changes, we also revised our_desired_o	outcomes_and	
categorized our programming to align with these outcomes. The new categories are		
described in Part III.		
Form 990, Part III, Line 4d - Other Program Services Description		
Other programming primarily includes facilitation of an arts in	ntegration project	
wherein art is incorporated in the core curriculum for several	third and fourth	
grade classes. Additionally, we spoke at several events around	the nation to share	
our research of the ripple effect of the arts.		
Form 990, Part VI, Line 2 - Business or Family Relationship of Officers, Director	s, Etc.	
Mitch Livingston was a board member for Fifth Third Bank for which Kevin Kabat		
served as CEO.	·	

compensation for other local nonprofits as well as national peer organizations

coupled with a review of the CEO's performance. The Committee also factors in the

direction the organization is taking and the increased responsibilities that will

entail. The Compensation Committee's recommendation must be approved by the

me of the organization Cincinnati Institute of Fine Arts dba ArtsWave	Employer identification number 31-0537138
Form 990, Part VI, Line 15a - Compensation Review & Approval Process	for CEO, Exec. Dir., or Top Mgtment (contin
Executive Committee.	·
The CEO sets compensation for the management team, incl	uding the COO, after review
of comparative amounts obtained from peer group Form 99	Os and consultation with the
Board Chair.	
Form 990, Part VI, Line 19 - Other Organization Documents Publicly A	vailable
A link to the most recent audited financial statements	is provided on the ArtsWave
website.	
The governing documents as well as the conflict of inte	rest policy are available
upon request.	

Schedule O (Form	990) 2009	Page 2
Name of the organization	Cincinnati Institute of Fine Arts dba ArtsWave	Employer identification number 31-0537138
		
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