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Forn. \$ 990,

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047 2010

Open to Public Inspection

<u>A</u>	For the	2010 calendar year, or tax year beginning 07/01/10, and ending 06/30/2	_1		
В	Check if ap	· •		D Emple	oyer identification number
\sqcup	Address ch			۱ ۸۵	0010115
	Name char	· · · · · · · · · · · · · · · · · · ·	T	 	-0218115
	Initial retur	Number and street (or P O box if mail is not delivered to street address) 136 STATE STREET	Room/suite		hone number 2-828-3291
	Terminated		<u> </u>		. 020 3231
$\overline{\sqcap}$	Amended i	05.600.6004		G Gross rec	eipts \$ 1,737,954
H	Application	E News and address of appeared officer			
Ш	гфрисацоі	Alexander L. Aldrich	H(a) Is this a g	•	
		136 State Street, Drawer 33	H(b) Are all a		
_		Montpelier VT 05633-6001		o," attach a l	ist (see instructions)
<u></u>		mpt status X 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or 527	┥		
<u>, , , , , , , , , , , , , , , , , , , </u>		e: Vermontartscouncil.org rganization X Corporation Trust Association Other L	Year of formation 1	.964	7 777
K	Form of or	rganization X Corporation Trust Association Other ► L Summary	Year of formation	. 504	M State of legal domicile VT
		Briefly describe the organization's mission or most significant activities			
•	į	See Schedule O			
u u					
2000 Section of Governance					
Š	2 (Check this box $lacktriangle$ if the organization discontinued its operations or disposed of more than 25	% of its net asset	s , ,	
≪	3 1	Number of voting members of the governing body (Part VI, line 1a)		3	16
ies	4 1	Number of independent voting members of the governing body (Part VI, line 1b)		4	16
₩ <u>₩</u>	5 7	Total number of individuals employed in calendar year 2010 (Part V, line 2a)		5	13
8	6 1	Total number of volunteers (estimate if necessary)		6	29
ඉ	'"'	Total unrelated business revenue from Part VIII, column (C), line 12		7a 7b	0
\ 1		Net unrelated business taxable income from Form 990-T, line 34	Prior Ye		Current Year
<u>_</u>	8 (Contributions and grants (Part VIII, line 1h)	1,71	7,439	1,622,474
چَے	9 F	Program service revenue (Part VIII, line 2g)		9,254	42,500
6	10 i	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		0,101	18,069
M.	11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		8,434	33,455
Z	12 7	Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		5,228	1,716,498
xpenses@CANNERSvem6T	13 (Grants and similar amounts paid (Part IX, column (A), lines 1–3)	88	9,895	578,896
\mathcal{O}	14 E	Benefits paid to or for members (Part IX, column (A), line 4)	7.6	6,194	706,837
es	15 8	Salaries, other compensation, employee benefits (Part IX, column (A) (ine 15/10)) Professional fundraising fees (Part IX, column (A), line 1 le) Fotal fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a–11d, 11f–24)	/6	0,194	100,631
ens	16a F	Professional fundraising fees (Part IX, column (A), line 1 e)			
EXD		Total fundraising expenses (Part IX, column (D), line 25) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C	32	2,669	278,912
	" \	Fotal expenses Add lines 13–17 (must equal Part IX, column (A), line-25)		8,758	1,564,645
		Revenue less expenses Subtract line 18 from line 12		6,470	
ō	8		Beginning of Cu	rrent Year	End of Year
ssets	<u>ਛੋ</u> 20 ੀ	Total assets (Part X, line 16)		7,918	1,389,117
Net Assets or	필 21 1	Total liabilities (Part X, line 26)		6,308	405,654
		Net assets or fund balances Subtract line 21 from line 20] 83	1,610	983,463
	Part II	Signature Block			and holiof it is
		alties of perjury, I declare that I have examined this return, including accompanying schedules and statements, ct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has a		y knowledge	and belief, it is
_		A hall		T	
Si	gn	Signature of officer		Date	1 /
	ere	Alwander L. Aldric EXECUTIVE DIAS	CTOPL	9	/29/1/
		Type or print name and title		· · · · · ·	
		Print/Type preparer's name Preparer's prature	Date	Check	└
Pa -		GREGORY SARGENT	08/17	//11 self-er	
	eparer	Firm's name > Kittell, Branagan & Sargent, CPA's		Firm's EIN	03-0302296
US	e Only	154 N. Main St.			802-524-9531
-	with a 170	Firm's address > St. Albans, VT 05478		Phone no	
		S discuss this return with the preparer shown above? (see instructions) work Reduction Act Notice, see the separate instructions.			Yes No
DA		non nearther net netter, and the departue mentalities.			λ17 · σ 330 (2010)
				110	/ II 1

Form **990** (2010)

Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes." complete Schedule A X Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions) X 2 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 X Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II X Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, 5 X 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," X complete Schedule D, Part I 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, X the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," X complete Schedule D, Part III 8 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," X complete Schedule D, Part IV 9 10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-X 10 endowments? If "Yes," complete Schedule D, Part V 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," X complete Schedule D, Part VI <u>11a</u> Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more X of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII **11b** Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more X of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 11c Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets X reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 11d X Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses X 11f the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete X 12a Schedule D, Parts XI, XII, and XIII Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional 12b X 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, X business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV 14b 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, Parts II and IV 15 X Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance X to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on X Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 X Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? X 19 If "Yes," complete Schedule G, Part III X 20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H 20a If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)

Checklist of Required Schedules (continued)

-	•				Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations		1	l	_	
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II			21	X	<u></u>
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States					
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		[22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	• •	Ť [+		
	organization's current and former officers, directors, trustees, key employees, and highest compensated		- 1			
	employees? If "Yes," complete Schedule J			23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than		ļ			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	•				
	through 24d and complete Schedule K. If "No," go to line 25			24a		<u> </u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		-	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year					
	to defease any tax-exempt bonds?		,	24c	_~_	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?			24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			i		
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I			25a		<u> </u>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			l		
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?				.	77
	If "Yes," complete Schedule L, Part I			25b		<u> </u>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or					X
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II		. }	26		
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,					
	substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III		ł	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L.					-
20	Part IV instructions for applicable filing thresholds, conditions, and exceptions)					
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			28a		х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete		ľ			_
-	Schedule L, Part IV			28b		x
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	•	•			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV			28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M			29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified		•			
	conservation contributions? If "Yes," complete Schedule M			30		<u>x</u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	,				
	Part I , , , , , , , , , , , , , , , , , ,		. }	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"					
	complete Schedule N, Part II			32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		[
	sections 301.7701-2 and 301.7701-37 If "Yes," complete Schedule R, Part I			33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,		-			
	IV, and V, line 1		}	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	•	.]	35		X
а	Did the organization receive any payment from or engage in any transaction with a					
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R,	гл	₹			ŀ
	Part V, line 2	Yes	X No			İ
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			20		х
	related organization? If "Yes," complete Schedule R, Part V, line 2			36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization					ļ
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			37		х
30	Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	•	1	31		
38	19? Note. All Form 990 filers are required to complete Schedule O			38	х	
	10 HOW. 7 W. LOTTI 300 HIGIS die required to complete ochequie O					(2010)

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Pa	art V Statements Regarding Other IRS Filings and Tax Compliance			
	 Check if Schedule O contains a response to any question in this Part V 			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 62			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and	7		ĺ
	reportable gaming (gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 13	_		Ė
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 (see instructions)			-
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X.
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			1
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	1 1		
	account)?	4a		X.
b	If "Yes," enter the name of the foreign country.		ĺ	İ
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	1 _ 1		.
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5b		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	5c		
va	organization solicit any contributions that were not tax deductible?	6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	- Va		 -
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			Ė
_	and services provided to the payor?	7a	i	x
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			,
0	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		<u> </u>
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			Í
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			ŀ
_	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			ĺ
a	Did the organization make any taxable distributions under section 4966?	9a 9b		
ь 10	Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter	30		<u> </u>
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1		
11	Section 501(c)(12) organizations. Enter:	7		
a	Gross income from members or shareholders			İ
b	Gross income from other sources (Do not net amounts due or paid to other sources	7]		
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			İ
	the organization is licensed to issue qualified health plans	_		ĺ
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X_
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	لبيا	<u> </u>
DAA		Form	n 990	(2010)

Form 990 (2010) VERMONT COUNCIL ON THE ARTS 03-0218115 Page 6 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. Check if Schedule O contains a response to any question in this Part VI X Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 16 Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? X 3 Did the organization delegate control over management duties customanly performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Does the organization have members or stockholders? 6 Does the organization have members, stockholders, or other persons who may elect one or more members X of the governing body? X b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7h Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X The governing body? X Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code No X Does the organization have local chapters, branches, or affiliates? 10a If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b Has the organization provided a copy of this Form 990 to all members of its governing body before filing the 11a X 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990. h X Does the organization have a written conflict of interest policy? If "No," go to line 13 12a Are officers, directors or trustees, and key employees required to disclose annually interests that could give X 12b Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," X describe in Schedule O how this is done 12c X Does the organization have a written whistleblower policy? 13 13 X 14 Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X The organization's CEO, Executive Director, or top management official 15a X 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement X with a taxable entity during the year? 16a If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the 16b organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ None 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available 18 for public inspection. Indicate how you make these available. Check all that apply Own website X Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, 19 and financial statements available to the public. 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization > VT COUNCIL ON THE ARTS 136 STATE ST

VT 05633-6001 802-828-3291

MONTPELIER

Page 7

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- 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, if any. See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order: individual trustees or directors; institutional trustees, officers, key employees, highest compensated employees, and former such persons.

Check this box if neither the organ	nization nor any	relate	d or	gani	zatio	ns con	<u>ipe</u>	nsated any current officer,	director, or trustee	·
(A) Name and Title	(B) Average	Posi	ition ((chec	C) k all 1	that appl	ly)	(D) Reportable	(E) Reportable compensation from	(F) Estimated amount of
	hours per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Eormer	compensation from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) David Carris CHAIR	3.00	x		х				0	0	0
(2) James Clubb	3.00		 	A	-		\dashv			
Secretary/Treasurer	2.00	X		X				0	0	0
(3) Ann DeMarie	0.10	x						0	o	o
(4) Peggy Kannenstin		x						0	0	0
(5) Irwin Gelber			-		╁╴		\dashv		· 	
	0.10	X	_	<u> </u>	<u> </u> _	$\bot\bot$	_	0	0	0
(6) Margaret Lawrence	e 1.00	x						0	О	0
(7) Elizabeth Gordon		x						0	0	0
(8) Gayle Ottmann Vice Chair	1.00	x		x			\neg	0	0	0
(9) Gary Reis	1.00	x			-			0	0	0
(10) Gerianne Smart		Π			\vdash	† †		-		0
Chara Carana	2.00	X	├—	├	├	1-1-	\dashv	0	0	<u> </u>
(11) Steve Swayne	0.50	x		L	_			0	0	0
(12) Caro Thompson	2.00	x						0	0	o
(13) Paul Ugalde	2.00	x		x				0	0	0
(14) Sarah Wendell La	undervi	lle		<u> </u>	\vdash	-	\dashv			
(15) Greg Worden	0.10	X	-	 	-	++	\dashv	0	0	
, , , , , , , , , , , , , , , , , , ,	1.00	x	<u> </u>					0	0	0
(16) Marie Houghton	1.00	x						0	0	0
DAA				'				<u> </u>	·	Form 990 (2010

Page 8

•	, Directors, Trus	tees	, Ke	y En	plo	yees	, and	d Highest Compensated E	mployees (continued)	
(A) Name and Title	(B) Average	Pos	ition		C) kalit	hat a	nnlv)	(D) Reportable	(E) Reportable	(F) Estimated
	hours per week (describe hours for related	Individual trustee or director		Officer	Key employee	employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization
	organizations in Schedule O)	ıstee	trustee		8	pensated				and related organizations
(17) Barbara Morrow Vice Chair	2.00	x		x				0	0	0
(18) Pennie Beach	0.50	x						0	0	0
(19) Carlos Haase	2.00	x						0	0	0
(20) Stephanie Jerome		x						0	0	0
(21) Rob Mermim										
(22) Gloria Bruce	1.00	X						0	0	0
(23) Alexander L. Alc	0.10	X	_		-	-		0	0	0
Executive Director	40.00	ł		x		1		83,667	0	4,342
(24) Elaine Dufresne									_	
Dir of Administratio (25)	40.00	-	-	X	_		-	68,269	0	356
(26)	<u> </u>	-	-				-			
(27)			_	-			-			
(28)			-							
1b Sub-total .	1	L	<u>. </u>	٠.	1		>	151,936		4,698
c Total from continuation shee	ets to Part VII, S	ectio	n A					151,936		4,698
d Total (add lines 1b and 1c) 2 Total number of individuals (increportable compensation from	_		_	iose	liste	d abo	ove)		·	4,050
Teportable compensation from	the organization				_					Yes No
3 Did the organization list any for	-				•	•	•	e, or highest compensated		3 X
 employee on line 1a? If "Yes," For any individual listed on line organization and related organization 	1a, is the sum o	f rep	ortat	ole co	ompe	ensat	tion a		n the	
individual 5 Did any person listed on line 1a									dıvıdual	4 X
for services rendered to the org		s," c	omp	lete :	Sche	dule	J to	r such person		5 X
Complete this table for your five compensation from the organize	e highest compe	nsate	ed in	depe	nde	nt co	ntrac	ctors that received more than	n \$100,000 of	
Name and	(A) business address							Descrip	(B) tion of services	(C) Compensation
							-			
			_						······································	
					_		_		· · · · · · · · · · · · · · · · · · ·	
	···		_							
2 Total number of independent c received more than \$100,000 i	· ·	_						listed above) who	0	
DAA				<u> </u>		<u></u>		***		Form 990 (2010)

Pa	rt V	III Statement of Reve	nue					r age o
•	R				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts nts	1a	Federated campaigns	1a					
Contributions, gifts, grants and other similar amounts	b	Membership dues	1b					
s, c	С	Fundraising events	1c					
gift	d	Related organizations	1d					
a, m	е	Government grants (contributions)	1e	43,256		1		
itioi er s	f	All other contributions, gifts, grants,						
Ş Ş		and similar amounts not included above	1f	1,579,218	^			
nd t	g	Noncash contributions included in lines 1a-	lf :	\$				
O e	h	Total. Add lines 1a-1f		>	1,622,474	·	4 111	
en.				Busn. Code				
ven	2a	ART IN STATE BUILDI	NGS		42,500	42,500		
8	ь							
	C							
Sel	ď							
Ta II	е							
Program Service Revenue		All other program service reven	ue	<u></u>		_,, <u>_</u>	······································	
4		Total. Add lines 2a-2f		<u> </u>	42,500	·····		
	3	Investment income (including d	ividend	ls, interest,				
		and other similar amounts)			18,069			18,069
	4	Income from investment of tax-	exemp	t bond proceeds				
	5	Royalties .		→				
	۰.	(i) Real	-+	(II) Personal				
		Gross Rents						
	b	Less rental exps Rental inc. or (loss)						
	4	Net rental income or (loss)		•	Ť	Ĭ		†
		Gross amount from (i) Securities		(II) Other				
		sales of assets other than inventory						
	ь	·						
		basis & sales exps				1		
	С	Gain or (loss)						1
	ď	Net gain or (loss)		>				
	8a	Gross income from fundraising ever	ts (· · · · · · · · · · · · · · · · · · ·	
enue		(not including \$						
9.6		of contributions reported on line 1c)						
Other Reven		See Part IV, line 18	a	41,940				
Ě		Less: direct expenses	ьĮ	21,456			•	
		Net income or (loss) from fundr	- 1	events >	20,484			20,484
	9a	Gross income from gaming activities	· [1		
		See Part IV, line 19	а					
		Less. direct expenses	b					
		Net income or (loss) from gami	ng actr f	vities				
	TUA	Gross sales of inventory, less	_					
		returns and allowances	a b					
		Less: cost of goods sold Net income or (loss) from sales	- 1	entory >	†	1		1
		Miscellaneous Revenue		Busn. Code				
	11a				12,971	12,971		†
	b	A CHIEF COMICEL THEOMS					<u></u>	
	C			<u> </u>				
	d	All other revenue						
	-	Total. Add lines 11a-11d			12,971			
	12	Total revenue. See instruction	S	_	1,716,498	55,471		0 38,553
_								990 (2010)

Form 990 (2010) **Statement of Functional Expenses**

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	All other organizations must	complete column (A) but are	not required to complete of	columns (B), (C), and (D).	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and		· · · · · · · · · · · · · · · · · · ·		0.000
_	organizations in the U S See Part IV, line 21	476,837	476,837		* *
2	Grants and other assistance to individuals in				-
	the U.S. See Part IV, line 22	102,059	102,059		
3	Grants and other assistance to governments,				-
	organizations, and individuals outside the	ł	1	`	
	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	156,634	34,289	122,070	275
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salanes and wages	376,979	268,454	77,618	30,907
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	28,842	16,195	10,919	1,728
9	Other employee benefits	103,724	59,612	32,819	11,293
10	Payroll taxes	40,658	23,053	15,318	2,287
11	Fees for services (non-employees):				
а	Management				
b	Legal				
C	Accounting	6,500		6,500	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other	66,372	66,372		
12	Advertising and promotion	12,797	12,797	6 100	0 500
13	Office expenses	35,238	20,636	6,100	8,502 369
14	Information technology	30,252	23,338	6,545	369
15	Royalties	10 160		10 460	
16	Occupancy	12,468	20,763	12,468	330
17	Travel	26,559	20,163	5,466	330
18	Payments of travel or entertainment expenses			1	
	for any federal, state, or local public officials	49 270	42,792	4,826	761
	Conferences, conventions, and meetings	48,379 1,829	1,829	4,020	701
20	Interest	1,029	1,029		
21 22	Payments to affiliates Depreciation, depletion, and amortization	11,326		11,326	
	· ' ' ' ' '	3,951	2,073	1,878	
23 24	Other expenses Itemize expenses not covered	3,331	2,0,3		
44	above (List miscellaneous expenses in line 24f. If				
	line 24f amount exceeds 10% of line 25, column			1	
	(A) amount, list line 24f expenses on Schedule O.)				
а	Miscellaneous	12,904	5,796	3,776	3,332
b	Dues	10,337	9,543	794	
c					
d	· · · · · · · · · · · · · · · · · · ·				
e	· · · · · · · · · · · · · · · · · · ·				
f	All other expenses	· · · · · · · · · · · · · · · · · · ·			
25	Total functional expenses. Add lines 1 through 24f	1,564,645	1,186,438	318,423	59,784
26	Joint costs. Check here ▶ ☐ If following				
	SOP 98-2 (ASC 958-720). Complete this line				
	only if the organization reported in column (B) joint costs from a combined educational				
	campaign and fundraising solicitation				
DAA					Form 990 (2010)

Part :		-0218115	Page 11
	. Dailance Oneet	(A) Beginning of year	(B) End of year
1	Cash—non-interest bearing	100 1	
2	Savings and temporary cash investments	695,791 2	
3	Pledges and grants receivable, net	428,117 3	225
4	Accounts receivable, net	3,960 4	330,330
5	Receivables from current and former officers, directors, trustees, key		
	employees, and highest compensated employees. Complete Part If of		
	Schedule L	5	
6	Receivables from other disqualified persons (as defined under section		<u> </u>
	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing		
	employers and sponsoning organizations of section 501(c)(9) voluntary		
İ	employees' beneficiary organizations (see instructions)	6	, †
7 8 8	Notes and loans receivable, net	7	-
8 8	Inventories for sale or use	. 8	
₹ 9	Prepaid expenses and deferred charges	8,834 9	=
10a	Land, buildings, and equipment cost or		
	other basis Complete Part VI of Schedule D 10a 234,312		
b	Less: accumulated depreciation 10b 205, 493	29,876 10	28,819
11	Investments—publicly traded securities	111,240 1	
12	Investments—other securities. See Part IV, line 11	1:	
13	Investments—program-related See Part IV, line 11	1:	3
14	Intangible assets	14	4
15	Other assets See Part IV, line 11	1!	5
16	Total assets. Add lines 1 through 15 (must equal line 34)	1,277,918 10	
17	Accounts payable and accrued expenses	31,649 17	
18	Grants payable	358,475 18	
19	Deferred revenue	19	9
20	Tax-exempt bond liabilities	20	0
	Escrow or custodial account liability. Complete Part IV of Schedule D	2.	1
≝ ₂₂	Payables to current and former officers, directors, trustees, key		
<u>ā</u> (employees, highest compensated employees, and disqualified persons.		
Liabilities 22 22 22 22 22 22 22 22 22 22 22 22 22	Complete Part II of Schedule L	2:	2
23	Secured mortgages and notes payable to unrelated third parties	2:	3
24	Unsecured notes and loans payable to unrelated third parties	24	
25	Other liabilities Complete Part X of Schedule D	56,184 2	
26	Total liabilities. Add lines 17 through 25	446,308 2	405,654
ဖွ	Organizations that follow SFAS 117, check here ▶ X and complete		
ဗို ၂	lines 27 through 29, and lines 33 and 34.		
<u>e</u> 27	Unrestricted net assets	663,362 2	
Ralances 27 28	Temporanly restricted net assets	54,491 2	
면 29	Permanently restricted net assets	113,757 2	9 135,597
<u> </u>	Organizations that do not follow SFAS 117, check here ▶ ☐ and		į
5	complete lines 30 through 34.		•
တ္က 30	Capital stock or trust principal, or current funds	3(0
8 31	Paid-in or capital surplus, or land, building, or equipment fund	3	1
₩ 32	Retained earnings, endowment, accumulated income, or other funds	3:	
Net Assets or Fund 30 31 32 33 34	Total net assets or fund balances	831,610 3	
Ž 34	Total liabilities and net assets/fund balances	1,277,918 ₃ ,	4 1,389,117

Form **990** (2010)

orm	990 (2010) VERMONT COUNCIL ON THE ARTS 03-0218115			Pa	ge 12
Pa	rt XI Reconciliation of Net Assets			<u></u>	3
-	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	11	1,7	16,	498
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,5	64,	645
3	Revenue less expenses. Subtract line 2 from line 1	3	1	51,	853
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	8:	31,	610
5	Other changes in net assets or fund balances (explain in Schedule O)	5			
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33,				
	column (B))	6	98	83,	463
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
			,	Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u>X</u>
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 oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in				-
	Schedule O				
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were				
	issued on a separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				ł
	the Single Audit Act and OMB Circular A-133?		3a	_ <u>X</u>	<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				1
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b	X	<u> </u>
			Form	n 990	(2010)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

► See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

VERMONT COUNCIL ON THE ARTS d\b\a VERMONT ARTS COUNCIL

Employer identification number 03-0218115

		····											
	art I			y Status (All organizations			this p	<u>art.) S</u>	<u>ee ins</u>	tructio	ns.		
The	orgar	nization is not a	a private foundation becau	se it is: (For lines 1 through 11, che	eck only or	ne box)							
1	\sqcup	A church, con	vention of churches, or as	sociation of churches described in	section 1	70(b)(1)(<i>/</i>	A)(i).						
2		A school desc	cribed in section 170(b)(1)(A)(ii). (Attach Schedule E)									
3	П	A hospital or a	a cooperative hospital serv	rice organization described in secti	on 170(b)	(1)(A)(iii)							
4				ed in conjunction with a hospital de				(A)(iii).	Enter th	ne hospit	al's name.		
	_	city, and state	-	,							,		
5		•		of a college or university owned or	operated	by a gove	emmenta	i unit de	scribed	ın			
-	ш		b)(1)(A)(iv). (Complete Pa			-, - 5							
6		-		governmental unit described in sec	tion 170(h)(1)(A)(v	1						
7	X		_	substantial part of its support from				the go	noral nu	iblio			
•	نعت	_	· ·	•	i a goveili	memar un	it or iton	i tile gei	nerai pu	IDIIC			
	\Box		section 170(b)(1)(A)(vi). (·									
8	H	-		170(b)(1)(A)(vi). (Complete Part II		. 4 - 7 4							
9				(1) more than 33 1/3% of its support									
		•		mpt functions—subject to certain e						its			
				and unrelated business taxable inco			11 tax) fr	om busi	nesses				
	$\overline{}$		•	30, 1975. See section 509(a)(2). (-								
10	\square	_	•	exclusively to test for public safety		-							
11		•	•	exclusively for the benefit of, to pe				•					
				rted organizations described in sec						tion			
		509(a)(3). Ch	eck the box that describes	the type of supporting organization			11e thr	_					
	_	a Type		c Type IIIFunctions			d		e III-Ot				
е				ganization is not controlled directly									
		other than fou	indation managers and oth	ner than one or more publicly suppo	orted orgai	nizations o	describe	d in sect	ion 509	(a)(1)			
		or section 509	9(a)(2)										
f		If the organiza	ation received a written de	termination from the IRS that it is a	Type I, Ty	pe II, or T	ype III s	upportin	g				
		organization,	check this box										
g		Since August	17, 2006, has the organiz	ation accepted any gift or contribute	on from a	ny of the							
Ī		following per	sons?										
				controls, either alone or together wi	th persons	s describe	d in (II) a	and				Yes	No
		(III) belov	v. the governing body of th	e supported organization?							11g(i)		
			member of a person desc	· · · · · · · · · · · · · · · · · · ·	•				•		11g(ii)		
				described in (i) or (ii) above?							11g(iii)		
h		• •		the supported organization(s)	•	•				•	ريبي ا	•	
	Nam	e of supported	(ii) EIN	(iii) Type of organization	(iv) Is the	organization	(v) Did v	ou notify	(vi)	Is the	(vii) Am	ount of	
(*)		janization	(11) 2.11	(described on lines 1–9		sted in your	the organ	nization in	organiza	tion in col	supp		
				above or IRC section	governing	document?		of your port?		ized in the S			
				(see Instructions))	Yes	No	Yes	No	Yes	No			
					163	110	163	-100	1.63				
(A)					Ì			1					
					┼───	 	 	<u> </u>	├	 			
(B)			}	j	1	1		ł	1	1 1			
					 	 		 -	 -	 			
(C)									1	1 1			
			<u> </u>					ļ	 	 	 .		
(D)													
					<u> </u>	 	ļ	<u> </u>	 -				
(E)													
					 	 	 	<u> </u>	 				
	. 1		[1								
Tota	41		1	+	t	1	1	3	i	, ,			

Schedule A (Form 990 or 990-EZ) 2010 VERMONT COUNCIL ON THE ARTS

03-0218115

Page 2

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2006 (b) 2007 (e) 2010 (c) 2008 (d) 2009 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.") 1,717,439 1,299,473 1,357,305 1,705,164 1,622,474 7,701,855 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 Total. Add lines 1 through 3 1,299,473 1,357,305 1,705,164 1,717,439 1,622,474 7,701,855 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) 7,701,855 Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (b) 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total (a) 2006 Amounts from line 4 7,701,855 1,299,473 1,357,305 1,705,164 1,717,439 1,622,474 Gross income from interest, dividends. payments received on securities loans, rents, royalties and income from similar 31,463 29,913 6,957 20,101 18,069 106,503 sources Net income from unrelated business activities, whether or not the business 19,484 19,484 is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets 3,856 10,430 15,182 29,468 (Explain in Part IV.) Total support. Add lines 7 through 10 7,857,310 11 Gross receipts from related activities, etc. (see instructions) 12 55,471 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 14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) 98.02% Public support percentage from 2009 Schedule A, Part II, line 14 15 98.06% 15 33 1/3% support test-2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this 16a box and stop here. The organization qualifies as a publicly supported organization 33 1/3% support test-2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test-2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test-2009. 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 organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

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Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.

Sec	tion A. Public Support	quality under	the tests listed	below, pleas	e complete Fai	<u>t II.)</u>	
	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(4) 2000	(2, 233)	(6) 2000	- (4, 2000	(0) 20.0	(i) Total
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						
	ction B. Total Support			,		, 	
Cale	ndar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6		<u> </u>		 	 	
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b		<u> </u>		<u> </u>		
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on			<u></u>			
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)		<u>l</u>	<u> </u>	<u> </u>	11	
14	First five years. If the Form 990 is for the organization, check this box and stop here	-	second, third, fourt	h, or fifth tax year	as a section 501(c)	(3)	▶ [
Sec	ction C. Computation of Public Su	ipport Percent	tage			·	
15	Public support percentage for 2010 (line 8,	column (f) divided	by line 13, column	(f))		15	<u>%</u>
<u>16</u>	Public support percentage from 2009 Sche					16	%
	ction D. Computation of Investme						
17	Investment income percentage for 2010 (lin			olumn (f))		17	
18	Investment income percentage from 2009 S					18	<u>%</u>
19a	33 1/3% support tests—2010. If the organ						⊾ [
L	17 is not more than 33 1/3%, check this bo		=				- [_
b	33 1/3% support tests—2009. If the organ line 18 is not more than 33 1/3%, check this						▶ □
			=		and acc instructions		-

Schedule A (Form 990 or 990-EZ) 2010 VERMONT COUNCIL ON THE ARTS 03-0218115 Page 4 Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions). Part II, Line 10 - Other Income Detail 29,468 Fees and Other Misc Income

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

▶ See separate instructions.

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

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

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

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

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

• 8	Section 501(c)(4), (5), or (6) organizations: Complete Part III.	0 (1 10xy 10x) 01 1 01111 000 22,	· art •, • • • •	roxy ruxy, then	
Nar	ne of organization VERMONT COUNCIL ON TI			Employer identifi	
Pa	t I-A Complete if the organization is exem	pt under section 501(c)	or is a sectio	n 527 organizatio	n
1	Provide a description of the organization's direct and indirect	t political campaign activities in F	Part IV		
2	Political expenditures			> \$	
3	Volunteer hours				
Par	t I-B Complete if the organization is exem	npt under section 501(c)	(3).		 _
1	Enter the amount of any excise tax incurred by the organizar			▶ \$ _	
2	Enter the amount of any excise tax incurred by organization	managers under section 4955		· > \$ _	
3	If the organization incurred a section 4955 tax, did it file For	m 4720 for this year?			Yes No
4a	Was a correction made?				Yes No
	If "Yes," describe in Part IV.				
Pa	rt I-C Complete if the organization is exem	npt under section 501(c)	<u>, except secti</u>	on 501(c)(3).	
1	Enter the amount directly expended by the filing organization	n for section 527 exempt function	ו		
	activities			▶ \$ _	
2	Enter the amount of the filing organization's funds contribute	ed to other organizations for sect	ion		
_	527 exempt function activities		-	▶ \$ _	
3	Total exempt function expenditures. Add lines 1 and 2. Ente	er here and on Form 1120-POL,		. .	
_	line 17b			▶\$	Yes No
4	Did the filing organization file Form 1120-POL for this year?		tion! organizations	to which the films	☐ res ☐ no
5	Enter the names, addresses and employer identification nur organization made payments. For each organization listed, (=	· · · · · · · · · · · · · · · · · · ·	
	the amount of political contributions received that were pron	· · · · · · · · · · · · · · · · · · ·			
	as a separate segregated fund or a political action committee		•	-	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	(a) Hallo	(0) / (05)	(0, 2	filing organization's	contributions received and
				funds If none, enter -0-	promptly and directly
		1			delivered to a separate political organization If
			1		none, enter -0-
(1)					
(2)					
(3)					
(4)					<u> </u>
			<u> </u>		
(5)					
101		1		1	

. • Schedule C (Form 990 or 990-EZ) 2010 VI	ERMONT COUNC	CIL ON THE	ARTS	03-0218	115 Page 2
Part II-A Complete if the organ					· agc n
section 501(h)).					
A Check ▶ 🔲 if the filing organiz					
B Check ▶ ☐ if the filing organiz	ation checked box	A and "limited co	ontrol" provisi	ons apply.	
Limits on L	obbying Expendit	tures		(a) Filing	(b) Affiliated
(The term "expenditures	" means amounts p	paid or incurred.)		organization's totals	group totals
1a Total lobbying expenditures to influence p	oublic opinion (grass roo	ots lobbying)			
b Total lobbying expenditures to influence a	legislative body (direct	lobbying)	. L		
c Total lobbying expenditures (add lines 1a	and 1b)	,		· · · · · · · · · · · · · · · · · · ·	
d Other exempt purpose expenditures			. L		
e Total exempt purpose expenditures (add	lines 1c and 1d)		Ĺ		
f Lobbying nontaxable amount Enter the a	mount from the followin	g table in both			
columns.					
If the amount on line 1e, column (a) or (b) is:	The lobbying nonta	exable amount is:			
Not over \$500,000	20% of the amount of	n line 1e			!
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% o	f the excess over \$500,00	0		ŧ
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% o	f the excess over \$1,000,	000		‡
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of	the excess over \$1,500,0	00	* :	!
Over \$17,000,000	\$1,000,000				<u> </u>
g Grassroots nontaxable amount (enter 25	% of line 1f)				
h Subtract line 1g from line 1a If zero or le	ss, enter -0-				
i Subtract line 1f from line 1c If zero or les	s, enter -0-		. L		
j If there is an amount other than zero on e	other line 1h or line 11, o	lid the organization file	Form 4720		
reporting section 4911 tax for this year?					Yes No
	A-Vear Averagi	ng Period Under	Section 501(h)	
(Some organizations t					the five
	elow. See the ins				
				· · · · · · · · · · · · · · · · · · ·	
Lo	bbying Expenditu	res During 4-Yea	ar Averaging	<u>Period</u>	
Calendar year (or fiscal year					
beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
	<u> </u>		ļ		
2a Lobbying nontaxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column(e))	<u> </u>				
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount		`	1		
(150% of line 2d, column (e))					
f Grassroots lobbying expenditures		1			

Schedule C (Form 990 or 990-EZ) 2010

		(a)	(b)	_
		Yes	No	Amo	unt	
1	Dunng 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		1			
	referendum, through the use of		1			
а	Volunteers?	x [
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	х				
С	Media advertisements?		X			
d	Mailings to members, legislators, or the public?	х			1,	365
9	Publications, or published or broadcast statements?	X				485
f	Grants to other organizations for lobbying purposes?		X			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	х			17,	897
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	х				064
	Other activities? If "Yes," describe in Part IV		X	****		
j	Total. Add lines 1c through 1i				27,	811
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		х			-
	If "Yes," enter the amount of any tax incurred under section 4912					
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Pa	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(501(c)(6).	(5), c	r secti	on 		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	<u></u>	<u> </u>
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2_		<u> </u>
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3	L	<u>L</u>
Pa	rt III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5) 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines "Yes."					
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political					
	expenses for which the section 527(f) tax was paid).		- 1			
а	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 political expenditure next year?		4			
5			5			
	rt IV Supplemental Information					

LOBBYING ACTIVITIES MAINLY RELATED TO DIRECT CONTACT BY STAFF AND CONSTITUENTS WITH STATE LEGISLATORS REGARDING STATE LEGISLATIVE BILLS FOR COUNCIL FUNDING, CULTURAL FACILITIES, AND TAX ISSUES. CONSTITUENTS WERE ALSO ENCOURAGED THROUGH PHONING, MAILING, EMAIL AND A SEMINAR TO CONTACT THEIR STATE LEGISLATORS ON THESE ISSUES. STAFF MADE SOME CONTACT WITH THE Supplemental Information (continued)

VERMONT CONGRESSIONAL DELEGATION TO THANK THEM FOR THEIR SUPPORT OF FEDERAL ARTS FUNDING, AND ENCOURAGED OTHERS TO DO THE SAME.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 Open to Public

Inspection Name of the organization Employer identification number VERMONT COUNCIL ON THE ARTS d\b\a VERMONT ARTS COUNCIL 03-0218115 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, (b) Funds and other accounts (a) Donor advised funds 1 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 can be used only for chantable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements, Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure 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 Tax Year Total number of conservation easements 2a 2b Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 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 Yes No violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 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) Yes No (i) and section 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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), 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 (ASC 958), 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 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 (ASC 958) relating to these items Revenues included in Form 990, Part VIII, line 1

	OUNCIL ON TH		03-02		Page 2
					continued)
 - 3 •Using the organization's acquisition, accession collection items (check all that apply) 	, and other records, chec	k any of the following the	hat are a significant u	se of its	
a Public exhibition	d Loan	or exchange program	s		
b Scholarly research	e 💹 Othe	r			
c Preservation for future generations					
4 Provide a description of the organization's colle XIV.	ections and explain how the	ney further the organiza	ation's exempt purpos	se in Part	
			Abor oursiles		
3 ··· /··· · · · · · · · · · · · · · · ·					
assets to be sold to raise funds rather than to be Part IV Escrow and Custodial Arra				/os" to Form OC	Yes No
line 9, or reported an amour	nt on Form 990, Pa	rt X, line 21.			
1a Is the organization an agent, trustee, custodian	or other intermediary for	contributions or other	assets not		
included on Form 990, Part X?					Yes No
b If "Yes," explain the arrangement in Part XIV ar	nd complete the following	table			
				<u> </u>	Amount
c Beginning balance				1c	
d Additions during the year				1d	
e Distributions during the year				1e	<u> </u>
f Ending balance				1f	
2a Did the organization include an amount on For	m 990, Part X, line 21?				Yes No
b If "Yes," explain the arrangement in Part XIV					
Part V Endowment Funds. Compl	ete if organization a	inswered "Yes" to			, ···
	(a) Current year	(b) Pnor year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	117,087	112,366	125,61	6	
b Contributions	21,840	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
c Net investment earnings, gains, and					
losses	17,162	10,721	-13,25	0	
d Grants or scholarships		6,000			
e Other expenditures for facilities and					
programs					
f Administrative expenses					
g End of year balance	156,089	117,087	112,36	6	
2 Provide the estimated percentage of the year e	end balance held as.				
a Board designated or quasi-endowment ▶	%				
b Permanent endowment ► 100.00 %					
c Term endowment ▶ %					
3a Are there endowment funds not in the possess	ion of the organization th	at are held and adminis	stered for the		
organization by:					Yes No
(i) unrelated organizations					3a(i) X
(ii) related organizations	•				3a(ii) X
b If "Yes" to 3a(ii), are the related organizations I	isted as required on Sche	edule R?			3b
4 Describe in Part XIV the intended uses of the o			·		
Part VI Land, Buildings, and Equip).		
Description of investment	(a) Cost or other basis			umulated	(d) Book value
	(investment)	(other)	depre	eciation	
1a Land					
b Buildings					
c Leasehold improvements				- 1	
d Equipment		234	,312	205,493	28,819
e Other					
Total. Add lines 1a through 1e (Column (d) must eq	ual Form 990, Part X, col	umn (B), line 10(c))		>	28,819

Schedule D (Form 990) 2010 VERMONT COUNCIL ON THE		03-0218115	Page 3
Part VII Investments—Other Securities. See Form 990	, Part X, line 12.		
(a) Description of security or category	(b) Book value	(c) Method of valuation	
(including name of security)		Cost or end-of-year market value	
(1) Financial derivatives			·
(2) Closely-held equity interests			
(3) Other .			
(A) ·			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
(I)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See Form 990). Part X. line 13.		
(a) Description of investment type	(b) Book value	(c) Method of valuation	
		Cost or end-of-year market value	
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)	 		
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, line 15.	I		·····
(a) Description		(b) Bool	value
(1)		(-,	
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)		•	
Part X Other Liabilities. See Form 990, Part X, line 25			
1. (a) Description of liability	(b) Amount	······································	
(1) Federal income taxes	(4)		
	45,278		
	13,270		
(3)			
(4)			
(5)	 		
(6)	 		
(7)	 		
(8)	 		
(9)	 		
(10)	 		
(11)	45 000		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	45,278		······································
2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the	ne organization's financial sta	itements that reports the	
organization's liability for uncertain tax positions under FIN 48 (ASC 740)			

Sche	edule D (Form 990) 2010 VERMONT COUNCIL ON THE ARTS 03-02181	L 5	Page 4
Pa	art XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statem	ents	
- 1	* Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,716,498
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,564,645
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	151,853
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 through 8	9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	151,853
Pi	art XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	turn	
1	Total revenue, gains, and other support per audited financial statements	1	1,717,398
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.		
a]]	
b	Donated services and use of facilities 2b 900		
С	Recovenes of prior year grants 2c		
d	Other (Describe in Part XIV)]]	
е	Add lines 2a through 2d	2e	900
3	Subtract line 2e from line 1	3	1,716,498
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b] [
b	Other (Describe in Part XIV)]]	
C	Add lines 4a and 4b	4c	
_5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	1,716,498
P	art XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per F	Return	
1	Total expenses and losses per audited financial statements	1	1,565,545
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.		
а	Donated services and use of facilities 2a 900	4 1	
b	Pnor year adjustments 2b	4	
C	Other losses 2c	- 1	
d	Other (Describe in Part XIV.)	4	
е	Add lines 2a through 2d	2e	900
3	Subtract line 2e from line 1	3	1,564,645
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4 1	
b	Other (Describe in Part XIV)	4 1	
C	Add lines 4a and 4b	4c	1 564 645
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	1,564,645

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part IV, lines 1b and 2b, Part V, line 4; Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Part V, Line 4 - Intended Uses for Endowment Funds
THE ORGANIZATIONS' ENDOWMENT FUNDS ARE THREE SEPARATE FUNDS FOR DIFFERENT
PURPOSES. THE DANCE ENDOWMENT FUND IS USED TO FUND GRANTS TO DANCE
ARTISTS. THE COUNCIL ENDOWMENT FUND IS TO SUPPORT GENERAL OPERATIONS AND
PROGRAMMING. THE MARGOT GEORGE FUND IS TO SUPPORT PROGRAMS BENEFITTING
CENTRAL VERMONT NONPROFIT ARTS ORGANIZATIONS.

Part XIV

Supplemental Information

Part XIV Supplemental Information (continued)

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities
Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a
Attach to Form 990 or Form 990-EZ
See separate instructions.

OMB No 1545-0047

2010

Open To Public Inspection

d\b\a VERMONT ARTS					Employer identif 03-02181	
Part 1 Fundraising Activities. Complete if Form 990-EZ filers are not required	the organization			red "Yes" to Form		
1 Indicate whether the organization raised funds through an				eck all that apply		
a Mail solicitations	e Solicitation	of non	-gove	rnment grants		
b Internet and email solicitations	f Solicitation	of gov	ernme	ent grants		
c Phone solicitations	g Special fund	-		-		
d In-person solicitations						
 Did the organization have a written or oral agreement with or key employees listed in Form 990, Part VII) or entity in 6 If "Yes," list the ten highest paid individuals or entities (fun compensated at least \$5,000 by the organization 	connection with pro	fessio to agr	nal fu eeme	indraising services?	draiser is to be	Yes No
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	raiser custor contro	have dy or ol of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in	(vi) Amount paid to (or retained by) organization
	 	Yes			col (i)	
	<u> </u>					<u> </u>
•						
1	ł					
						
ı						
		-				
;						•
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	l .					
,						<u></u>
,						
3						
)						
0						
Total			•			
						

Page 2

P	more than \$15	vents. Complete if the orga ,000 of fundraising event co oss receipts greater than \$5	entributions and gross inco	o Form 990, Part IV, li ome on Form 990-EZ,	ne 18, or reported lines 1 and 6b. List
συ		(a) Event #1 Art Auction (event type)	(b) Event #2	(c) Other events None (total number)	(d) Total events (add col (a) through col (c))
Revenue	Gross receipts Less Charitable contributions Gross income (line 1 minus	41,940			41,940
	line 2) 4 Cash prizes	41,940			41,940
	5 Noncash prizes				
Direct Expenses	6 Rent/facility costs 7 Food and beverages	3,445			3,445
Irect E	8 Entertainment	400			400
	9 Other direct expenses	17,611			17,611
	11 Net income summary Con	Add lines 4 through 9 in column (d)		>	21,456 20,484
P 		plete if the organization ans on Form 990-EZ, line 6a.	wered "Yes" to Form 990,	Part IV, line 19, or rep	orted more
Revenue		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
<u>~</u>	1 Gross revenue				
:beuses	2 Cash prizes				
Direct Exp	Noncash prizes Rent/facility costs				
<u> </u>	5 Other direct expenses				
	6 Volunteer labor	Yes %	Yes %	Yes %	
	7 Direct expense summary	Add lines 2 through 5 in column (d)		•	<u>(</u>
	8 Net gaming income summ	nary Combine line 1, column d, and	line 7		
		organization operates gaming activition operate gaming activities in each of			9a 🗌 Yes 🗍 No
			•		

Schedule G (Form 990 or 990-EZ) 2010

Sch	edule G (Form 990 or 990-EZ) 2010	VERMONT	COUNCIL	ON T	HE ARTS	03-0	218115 Page 3
11	Does the organization operate gaming act	ivities with noni	members?				Yes No
12	Is the organization a grantor, beneficiary of			of a partn	ership or other enti	uty	
	formed to administer charitable gaming?						Yes No
13	Indicate the percentage of gaming activity	operated in					
а	The organization's facility						13a %
þ	An outside facility						13b %
14	Enter the name and address of the person	who prepares	the organization's	s gaming/	special events boo	oks and	
	records.						
	Name ▶						
	Address ▶						
15a	Does the organization have a contract with	n a third party fr	om whom the org	anızatıon	receives gaming		П., ГП.,
h	revenue?	and recovered by	the essentiation				∐ Yes ∐ No
b	If "Yes," enter the amount of gaming rever amount of gaming revenue retained by the		tne organization	•	•	and the	
С	If "Yes," enter name and address of the th		Ψ				
Ī							
	Name ▶						
	Address ▶ .						
16	Gaming manager information.						
	Name ▶						
	Gaming manager compensation ▶ \$						
	Description of services provided ▶						
	Director/officer Empl	oyee	Independer	nt contrac	ctor		
17	Mandatory distributions:						
		w to make char	ntable distribution	s from the	e gaming proceeds	s to	
	retain the state gaming license?						Yes No
b	Enter the amount of distributions required	under state lav	v to be distributed	to other	exempt organizatio	ons or	
	spent in the organization's own exempt ac	tivities during t	he tax year 🕨	\$			
Pa	rt IV Supplemental Informati	on. Comple	te this part to	provide	the explanati	ons required by Par	t I, line 2b,
	columns (iii) and (v), and					b, as applicable. Als	so complete this
	part to provide any additi	onal informa	ation (see ins	truction	is).		
	•			-			
	•						
				•			
		•					

91100 08/09/2011 9 35 AM

Grants and Other Assistance to Organizations,

SCHEDULE 1 (Form 990)

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States

▶ Attach to Form 990.

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2010

Open to Public Inspection

ŝ 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. Part II (h) Purpose of grant or assistance X ≺es 139 Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Employer identification number non-cash assistance (g) Description of 03-0218115 (e) Amount of non-cash (f) Method of valuation (book, FMV, appraisal, other) Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 476,837 (d) Amount of cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States grant (c) IRC section f applicable VERMONT COUNCIL ON THE ARTS General Information on Grants and Assistance d/b/a VERMONT ARTS COUNCIL (p) EIN can be duplicated if additional space is needed Enter total number of section 501(c)(3) and government organizations the selection criteria used to award the grants or assistance? (a) Name and address of organization or government (1) See Attached Department of the Treasury Internal Revenue Service Name of the organization Part! 8 6 9 9 3 ල 3 3

For Paperwork Reduction Act Notice, see the Instructions for Form 990. DAA Enter total number of other organizations

Schedule I (Form 990) (2010)

Schedule Form 990\ (2010) VERMONT COUNCIL ON THE ARTS	CIL ON THE ART		03-0218115		Page 2
Part iii Grants and Other Assistance to Individuals in the	o Individuals in the Un	ited States. Comple	ete if the organizatio	United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.	990, Part IV, line 22.
Part III can be duplicated if additional space is needed	tional space is needed				
(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(e) Method of valuation (book, (f) Description of non-cash assistance
	recipients	cash grant	non-cash assistance	FMV, appraisal, other)	•
1 Development/technical ass	41	19,859			
2 Art in state buildings	7	34,200			
3 Arts Projects	16	48,000			
-		•			
•					
ĸ					

Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. Staff also receiving any funds. A final report (narrative, data and financial report) peer panel reviews the applications and makes funding recommendations that Applicants apply in a vigorous process, providing a narrative, budget and is required before receiving any balance of funds due. Staff review the supporting materials addressing the requirements of the grant programs. must be approved by the Board for larger grants, and by the Executive Grantees must sign a contract before Part I, Line 2 - Procedures for Monitoring the Use of Grant Funds reports to assure they used the funds for the intended purpose. make some visits to see the work being done by grantees. Director for smaller grants. Part IV

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2010
Open to Public Inspection

OMB No 1545-0047

Name of the organization

VERMONT COUNCIL ON THE ARTS d\b\a VERMONT ARTS COUNCIL

Employer Identification number 03-0218115

Form 990 - Organization's Mission or Most Significant Activities

The Council's mission is to advance and preserve the arts at the center of

Vermont communities. It offers grants, workshops, professional development

opportunities and technical advice, collects and disseminates arts

information, and acts as the state's foremost arts advocate.

Form 990, Part III, Line 2

THE ARTS COUNCIL STARTED DEVELOPMENT OF THE VERMONT CULTURAL DATA PROJECT,
IN PARTNERSHIP WITH THE PEW CHARITABLE TRUST AND THE VERMONT COMMUNITY
FOUNDATION. THE PROJECT IS A POWERFUL ONLINE MANAGEMENT TOOL TO HELP ARTS
ORGANIZATIONS IMPROVE THEIR FINANCIAL MANAGEMENT AND SERVICES TO THEIR
COMMUNITIES. CULTURAL ROUTES GRANTS PROGRAM FOR SCHOOLS WAS INITIATED TO
HELP UNDERWRITE THE COST OF TRANSPORTING STUDENTS TO MUSEUMS, HISTORIC
SITES, PERFORMANCES OR OTHER CULTURAL ACTIVITIES. THIS ADDRESSES A GROWING
NEED FOR ARTS-RELATED FIELD TRIPS AS MANY ARTS PROGRAMS ARE REDUCED OR
ELIMINATED DUE TO PRESSURES OF DWINDLING SCHOOL BUDGETS.

Form 990, Part III, Line 3

A) ARTS JOBS GRANTS, ARRA-FUNDED JOB LOSS PREVENTION PROGRAM FOR ARTS NONPROFITS, WAS NOT AVAILABLE AFTER FY 10. B) ART OF ACTION, A PRIVATE/PUBLIC PARTNERSHIP TO COMMISSION ARTISTS TO CREATE WORK ADDRESSING ISSUES IDENTIFIED BY VERMONTERS AS ESSENTIAL TO OUR STATES FUTURE, AND TO TOUR THEIR WORK AROUND THE STATE, COMPLETED ITS TOUR IN JULY. A FOLLOW-UP PROJECT OF A SMALLER SCOPE IS PLANNED.

Form 990, Part III, Line 4a - First Achievement

WRAPPED UP ITS 10-MONTH TOUR IN JULY. SEVERAL PERFORMING ARTS GROUPS WERE SHOWCASED IN THE VERMONT BUILDING AT THE EASTERN STATES EXPOSITION IN SPRINGFIELD, MA. A SEARCH FOR A NEW POET LAUREATE WAS STARTED AS THE END OF THE CURRENT POET'S FOUR-YEAR TERM NEARS.

Form 990, Part III, Line 4c - Third Achievement

VERMONT'S CULTURAL DATA PROJECT, A POWERFUL ONLINE MANAGEMENT TOOL TO HELP

NOT-FOR-PROFITS ARTS IMPROVE THEIR FINANCIAL MANAGEMENT AND SERVICES TO

THEIR COMMUNITIES WAS BEGUN.

Form 990, Part III, Line 4d - All Other Achievements PUBLIC AWARENESS AND ADVOCACY PROGRAM STRIVES TO INCREASE PUBLIC AWARENESS AND SUPPORT OF THE ESSENTIAL ROLE ARTISTS AND ARTS ORGANIZATIONS PLAY IN VERMONT'S ECONOMIC AND COMMUNITY DEVELOPMENT AND QUALITY OF LIFE. ALSO ADVOCATES ON THE LOCAL, STATE AND NATIONAL LEVEL TO INCREASE PUBLIC INVESTMENT IN THE ARTS AND ARTS EDUCATION AND TO PROVIDE INPUT ON PUBLIC POLICIES AFFECTING THE CULTURAL SECTOR. ELECTRONIC PROMOTIONAL OUTREACH INCLUDES AN ONLINE ARTS CALENDAR AND ARTIST DIRECTORY, A BI-WEEKLY E-NEWSLETTER ARTMAIL, ARTS ALERTS AND CONSTITUENT NOTICES VIA LISTSERVS. THE COUNCIL ALSO USES SOCIAL NETWORKING (FACEBOOK, TWITTER, YOUTUBE AND GOOGLE ADS) FOR OUTREACH. AMONG THE ADVOCACY AND AWARENESS PROGRAMS WERE ARTS ACHIEVEMENT DAY AT THE VERMONT STATE HOUSE AND AN ANNUAL MEETING SHOWCASING ARTISTS WHO RECEIVED GRANTS. A PUBLIC AWARENESS COMPAIGN TITLED "ART SUPPORTS ME" WAS DESIGNED AND IMPLEMENTED TO PROMOTE THE ARTS IN VERMONT. THE COUNCIL'S ANNUAL REPORT IS AVAILABLE IN BOTH PRINT AND ONLINE.

Form 990, Part VI, Line 6 - Classes of Members or Stockholders

The organization has board members who are part of the governing body. See
listing of these board members on Part VII.

Form 990, Part VI, Line 7a - Election of Members and Their Rights Members may elect 18 of the 19 board members.

Form 990, Part VI, Line 7b - Decisions Subject to Approval of Members
All major decisions made by Vermont Arts Council are voted on by the board.

Changes to the bylaws may be recommended by the board but are subject to approval by the members.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 Director of Administration reviews the 990 with the board treasurer prior to filing the form with the IRS.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

All board members and employees are required to fill out a conflict of

interest disclosure form at least annually. The forms are reviewed by

the Executive Committee. Board members are asked to disclose possible

conflicts of interest before decisions such as grant approvals are made.

Form 990, Part VI, Line 15a - Compensation Process for Top Official
THE COMPENSATION PROCESS FOR THE EXECUTIVE DIRECTOR INVOLVED ANNUALLY
COLLECTING COMPARABLE SALARY DATA FOR THE EXECUTIVE COMMITTEE TO USE IN
SETTING THE ED'S SALARY. THE EXECUTIVE COMMITTEE IS CHARGED WITH THE ED'S

Name of the organization

VERMONT COUNCIL ON THE ARTS

Employer identification number 03-0218115

ANNUAL PERFORMANCE REVIEW AS WELL AS SALARY REVIEW AND SETTING. ALL SALARY DECISIONS ARE KEPT ON FILE. DUE TO ECONOMIC CONSIDERATIONS, THE ED REFUSED A RAISE FOR FY 10, AND DID NOT RECEIVE ONE FOR FY 11.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST. A FINANCIAL SUMMARY IS INCLUDED IN THE ANNUAL REPORT WHICH IS AVAILABLE ON THE COUNCIL'S WEBSITE AND IN PRINT. SOME ANNUAL REPORTS ARE MAILED TO MEMBERS AND OTHERS. FORM 990'S ARE ALSO AVAILABLE ONLINE IN ANOTHER ORGANIZATIONS WEBSITE.

Schedule 1 Atachment Form 990

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

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s, Inc.	Emp Id								
d/b/a Vermont Arts Council	Number 03-0218115								
1. (a) Name and address of organization or government	n or governmen		(b) EIN	(c) IRC section if	Ĭ,	(e) Amount of non-cash	(e) Amount (f) Method of of non-cash valuation	(g) Description	(h) Purpose of grant or assistance
				appiicable	gramit Transfer	assistance		assistance	
Bryan Memorial Gallery	Jeffersonville	VT	03-0287574	501(c)3	\$10,000				Cultural Facilities Grant
Burlington City Arts	Burlington	LA	03-0354963	501(c)3	27,000				Local Arts Partnership
Burlington City Arts	Burlington	ΥŢ	03-0354963	501(c)3	\$3,000				Locals Head Start Program Grant
Burlington City Arts	Burlington	VT	03-0354963	501(c)3	\$5,000				Community Arts Grant (fiscal agent)
Burlington City Arts	Burlington	7	03-0354963	501(c)3	S	\$1,675	Estimate	Work of art	Exhibit of Art of Action artwork
					<u> </u>		based on		
							auction sales		
Estey Organ Museum. Inc.	Brattleboro	ΙΛ	010602627	501(c)3	\$7,625				Cultural Facilities Grant
Flynn Center for the Performing Arts	Burlington	T \	03-0277052	S01(c)3	\$5,000				Community Arts Grant (fiscal agent)
Flynn Center for the Performing Arts	Burlington	VT	03-0277052	501(c)3	\$7,000				Local Arts Partnership
Friends of the Wardsboro	Wardsboro	7	030363268	501(c)3	\$10,250				Cultural Facilities Grant
Frog Hollow Craft Association	Burlington	Λ	03-0228342	501(c)3	000'5\$				Community Arts Grant
Frog Hollow Craft Association	Burlington	VT	03-0228342	501(c)3	008\$				Technical Assistance Grant
Governor's Institutes of Vermont	Montpelier	ΙΛ	30308967	501(c)3	\$7,000				Art in Education Grant
Governor's Institutes of Vermont	Montpelier	ΙΛ	30308967	501(c)3	\$2,500				Art in Education Grant
Jeh Kulu Dance and Drum Theater	Burlington	٧٢	04-3375216	501(c)3	\$500				Artist Development Grant
Jeh Kulu Dance and Drum Theater	Burlington	ΙA	04-3375216	501(c)3	000'5\$				Community Arts Grant
Lost Nation Theater, Inc.	Montpelier	٧T	03-0267568	501(c)3	\$5,000				Community Arts Grant
Lost Nation Theater, Inc.	Montpelier	VT	03-0267568	501(c)3	\$2,500				Locals Head Start Program Grant
LPCTV Corp.	Ludiow	٧T	03-0370616	501(c)3	\$20,000				Cultural Facilities Grant
Morristown Centennial Library	Morrisville	LΛ	6856110-60	501(c)3	\$20,000				Cultural Facilities Grant
New England Foundation for the Arts	Boston	MA	MA 04-2593591	501(c)3	\$12,500				Regional performing arts support
Paramount Center, Inc.	Rutland	ΙΛ	22-2528303	501(c)3	\$5,000				Community Arts Grant

Schedule I Atachment Form 990

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

rs Council Number 13-0218115 Ga-0218115 Inc. Rutland VT Incil Woodstock VT Incil Woodstock VT Incil Morrisville VT Ind Museum Bellows Falls VT Ange Bennington VT Itheater East Burke VT Inter, Inc. Johnson VT Inter, Inc. Johnson VT Inter, Inc. Johnson VT Inter, Inc. Johnson VT Inter, Inc. Johnson VT Inter, Inc. Johnson VT Inter, Inc. Johnson VT							
address of organization or government r, Inc. Rutland VT nunity Center, Inc. Rochester VT rrisville, Inc. Morrisville VT rrisville, Inc. Morrisville VT rrisville, Inc. Morrisville VT s and Museum Bellows Falls VT change North VT change Rest Burke VT nent of Buildings & Montpelier VT Center, Inc. Johnson VT Center, Inc. Johnson VT Center, Inc. Johnson VT							
ouncil Woodstock VT nunity Center, Inc. Rochester VT rrisville, Inc. Morrisville VT rrisville, Inc. Morrisville VT rrisville, Inc. Morrisville VT sand Museum Bellows Falls VT change Essex VT change Bennington VT nent of Buildings & Montpelier VT Center, Inc. Johnson VT Center, Inc. Johnson VT Center, Inc. Johnson VT Center, Inc. Johnson VT	(b) EIN	(c) IRC section if applicable	(d) Amount (o of cash of grant	(e) Amount of non-cash assistance	(e) Amount (f) Method of of non-cash valuation assistance	(g) Description of non-cash	(h) Purpose of grant or assistance
nunity Center, Inc. Rochester VT rrisville, Inc. Morrisville VT rrisville, Inc. Morrisville VT rand Museum Bellows Falls VT Essex VT change North VT Bennington North VT nent of Buildings & Montpelier VT Center, Inc. Johnson VT Center, Inc. Johnson VT Center, Inc. Johnson VT Center, Inc. Johnson VT Center, Inc. Johnson VT	22-2528303	501(c)3	\$2,000			HONDING CO.	Locals Head Start Program Grant
rrisville, Inc. Morrisville VT rrisville, Inc. Morrisville VT s and Museum Bellows Falls VT change Essex VT change North VT n's Theater East Burke VT nent of Buildings & Montpelier VT Center, Inc. Johnson VT Center, Inc. Johnson VT Center, Inc. Johnson VT Center, Inc. Johnson VT	03-0237479	501(c)3	\$7,000				Local Arts Partnership
rrisville, Inc. Morrisville VT rrisville, Inc. Morrisville VT s and Museum Bellows Falls VT change Essex VT change North VT Bennington n's Theater East Burke VT nent of Buildings & Montpelier VT Center, Inc. Johnson VT Center, Inc. Johnson VT Center, Inc. Johnson VT	03-0371284	501(c)3	\$9,810				Cultural Facilities Grant
rrisville, Inc. s and Museum Bellows Falls VT Essex VT change North North VT Bennington N's Theater Bennington Center, Inc. Johnson VT Center, Inc. Johnson VT Center, Inc. Johnson VT Center, Inc. Johnson VT	03-0368569	501(c)3	\$7,000				Local Arts Partnership
tand Museum Essex VT Change North North North North North North Seast Burke North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North North	6958980-60	501(c)3	\$1,500				Locals Head Start Program Grant
change Benington VT n's Theater East Burke VT nent of Buildings & Montpelier VT Center, Inc. Johnson VT Center, Inc. Johnson VT Center, Inc. Johnson VT	93-0368205	501(c)3	\$7,000				Local Arts Partnership
change North VT n's Theater East Burke VT nent of Buildings & Montpelier VT Center, Inc. Johnson VT Center, Inc. Johnson VT Center, Inc. Johnson VT Center, Inc. Johnson VT	2680009-60		\$20,000				Cultural Facilities Grant
n's Theater East Burke VT nent of Buildings & Montpelier VT Center, Inc. Johnson VT Center, Inc. Johnson VT Center, Inc. Johnson VT	03-0343015	501(c)3	\$7,000				Local Arts Partnership
Center, Inc. Center, Inc. Johnson VT Center, Inc. Johnson VT Center, Inc. Johnson VT	03-0327401	S01(c)3	\$15,518				Cultural Facilities Grant
Johnson VT Johnson VT Johnson VT			\$0	\$8,225	Estimates based on auction sales	Works of an	Works of an Exhibit of An of Action anwork
Johnson VT	22-2478074	50105	C3 400				Att Lorming Com!
Johnson VT	22-2478074	501(c)3	\$20,000				Cultural Facilities Grant
	22-2478074	501(c)3	\$810				Technical Assistance Grant
VSA Vermont, Inc. Winooski VI 03	03-0307529	501(c)3	\$7,000				Local Arts Partnership
	03-6007735	£(0)105	\$20,000				Cultural Facilities Grant
	22-2970343	£01(c)3	\$5,000				Community Arts Grant
Weston Playhouse Theatre Company Weston VT 22	22-2970343	501(c)3	\$450				Technical Assistance Grant
Wilder Club and Library White River VT 03	030219169	501(c)3	\$20,000				Cultural Facilities Grant
Town Hall Theater, Inc. Middlebury VT 03	03-0358794	501(c)3	\$2,875				Cultural Facilities Grant
Town Hall Theater, Inc. Middlebury VT 03	03-0358794	501(c)3	\$5,000				Community Arts Grant (fiscal agent)