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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ 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

A For the 2010 calendar year, or tax year beginning 07-01-2010 and ending 06-30-2011

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
ARTS PLACE INC

Doing Business As

Number and street (or P O box if mail is not delivered to street address)
131 E WALNUT STREET

Room/suite

City or town, state or country, and ZIP + 4
PORTLAND, IN 47371

D Employer identification number
35-1379424

E Telephone number
(260) 726-4809

G Gross receipts $ 755,151

F Name and address of principal officer
ERIC ROGERS
131 E WALNUT STREET
PORTLAND,IN 47371

H(a) Is this a group return for affiliates? ☐ Yes ☑ No

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW ARTSLAND ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ | **L** Year of formation 1983 | **M** State of legal domicile IN

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
ARTS PLACE NURTURES THE CREATIVE SPIRIT BY MAKING ARTS EXPERIENCES, EDUCATION, AND SERVICES ACCESSIBLE TO THE REGION'S RESIDENTS, ARTISTS, AND CULTURAL ORGANIZATIONS

2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	15
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	15
5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	16
6	Total number of volunteers (estimate if necessary)	6	600
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	565,474	651,553
	9	Program service revenue (Part VIII, line 2g)	100,491	89,731
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	17,597	13,865
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	0
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	683,562	755,149
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	137,490	144,967
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	287,723	259,246
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶60,426		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	347,845	362,930
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	773,058	767,143
	19	Revenue less expenses Subtract line 18 from line 12	-89,496	-11,994

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	2,798,299	2,754,938
	21	Total liabilities (Part X, line 26)	698,695	573,623
	22	Net assets or fund balances Subtract line 21 from line 20	2,099,604	2,181,315

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

****** | 2011-10-18
Signature of officer | Date

ERIC ROGERS EXECUTIVE DIRECTOR
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check if self-employed ▶ ☐	PTIN
SCOTT A BOLLENBACHER CPA	SCOTT A BOLLENBACHER CPA	2011-10-18		

Firm's name ▶ BOLLENBACHER & ASSOCIATES LLC | Firm's EIN ▶

Firm's address ▶ 215 E PEARL ST PO BOX 702
PORTLAND, IN 47371 | Phone no ▶ (260) 726-4207

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III . . . . ☑

1 Briefly describe the organization's mission

ARTS PLACE NURTURES THE CREATIVE SPIRIT BY MAKING ARTS EXPERIENCES, EDUCATION, AND SERVICES ACCESSIBLE TO THE REGION'S RESIDENTS, ARTISTS, AND CULTURAL ORGANIZATIONS

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . ☐ Yes ☑ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . ☐ Yes ☑ No

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ 178,999 including grants of $ 144,967) (Revenue $)

REGIONAL ARTS PARTNERSHIP ARTS PLACE TOOK A LEAD ROLE IN ESTABLISHING THE REGIONAL ARTS PARTNERSHIP SYSTEM FOLLOWING DISCUSSIONS BEGINNING IN 1996 WITH A NUMBER OF POTENTIAL "REGIONAL PARTNERS," THE INDIANA ARTS COMMISSION ACTED IN 1997 TO APPOINT ARTS PLACE, ALONG WITH 11 OTHER PARTNERS TO WORK WITH THE COMMISSION TO ENHANCE ITS ABILITY TO REACH ALL COUNTIES IN INDIANA WITH A SIGNIFICANT LEVEL OF ARTS PROGRAMS AND SERVICES INITIALLY, THE REGIONAL ARTS PARTNERS WORKED WITH THE COMMISSION TO PROVIDE GRANTSMAKING, TECHNICAL ASSISTANCE, CULTURAL NEEDS ASSESSMENT, AND ARTS INFORMATION SERVICES IN COLLABORATION WITH THE STATE ARTS AGENCY IN THE LAST TWO YEARS OF THE PROGRAM, CULTURAL NEEDS ASSESSMENT AND ARTS INFORMATION SERVICES WERE REMOVED FROM THE ROLES OF REGIONAL ARTS PARTNERS ARTS PLACE WAS CHARGED WITH SERVING REGION FIVE, A 12-COUNTY AREA THAT INCLUDES ADAMS, BLACKFORD, DELAWARE, FAYETTE, GRANT, HENRY, JAY, MADISON, RANDOLPH, RUSH, UNION, AND WAYNE COUNTIES DURING THE PAST FISCAL YEAR, ARTS PLACE SOLICITED GRANT APPLICATIONS FROM ORGANIZATIONS IN THE 12-COUNTY AREA ADVISORY PANELS WERE APPOINTED TO REVIEW THE APPLICATIONS SUBMITTED FOR THE APRIL 2011 DEADLINE MORE THAN $144,000 WAS GRANTED TO 21 ORGANIZATIONS FOR FISCAL YEAR 2011 APPLICATIONS WERE RECEIVED FROM 34 ORGANIZATIONS THE AWARDS WERE MADE POSSIBLE BY A BLOCK GRANT FROM THE INDIANA ARTS COMMISSION SPECIFICALLY RESTRICTED TO REGRANTING ARTS PLACE TECHNICAL ASSISTANCE THROUGH THE REGIONAL ARTS PARTNERSHIP INCLUDED NUMEROUS CONSULTATIONS WITH ARTS ORGANIZATIONS, AS WELL AS WORKSHOPS FOR ARTISTS ARTS PLACE PROVIDED SIGNIFICANT ASSISTANCE TO ARTS GROUPS IN CRISIS, AS WELL AS EMERGING CULTURAL ORGANIZATIONS

4b (Code) (Expenses $ 169,061 including grants of $) (Revenue $ 9,308)

FACILITY OPERATIONS-PORTLAND THE PORTLAND FACILITY WAS ORIGINALLY ACQUIRED IN 1983 AND RENOVATED THROUGH A $500,000 CAPITAL CAMPAIGN ARTS PLACE COMPLETED A $2 9 MILLION PROJECT IN DECEMBER 2000 THAT TRIPLED THE SPACE OF THE ORIGINAL STRUCTURE THE EXPANDED CENTER INCLUDES A 283-SEAT THEATRE, THREE GALLERIES, A RECEPTION AND DINING AREA KNOWN AS GOODRICH HALL, MUSIC AND VISUAL ART STUDIOS, REHEARSAL AND MEETING ROOMS, AND OFFICE SPACE THE GROUNDS INCLUDE TWO PARKING LOTS, AN ARTS PARK, AND A STRUCTURE HOUSING A 3,000 LB GAS KILN A PROMINENT FEATURE OF THE PORTLAND CENTER IS ITS PUBLIC ART THESE WORKS INCLUDE THE MASSIVE TILE RELIEF MURAL, LANDSCAPES LEGACY BY CLEVELAND ARTIST RHONDA FRANKLIN THIS CERAMIC INSTALLATION WAS THE RESULT OF A THREE-YEAR PROJECT THAT INCLUDED OVER 40 APPRENTICES AND VOLUNTEERS ON THE GROUNDS MAY BE FOUND THE BRONZE SCULPTURE AUTUMN BY HAROLD TUCK LANGLAND OF GRANGER, INDIANA ALSO ON THE GROUNDS IS A GLASS AND STONE SCULPTURE OBLIO IN BLUE BY ROCKFORD, OHIO ARTIST JAMES MICHAEL KAHLE THE WOOD SCULPTURE, AMAZON, WAS CREATED BY THE LATE ARTHUR HARSHMAN, THE CHIEF DESIGNER FOR INDIANA GLASS AND A MEMBER OF THE ARTS PLACE BOARD IN ITS EARLY YEARS THE PORTLAND FACILITY IS HOME TO AN INTENSIVE YEAR-ROUND OFFERING OF EXHIBITS, PERFORMANCES, AND ARTS INSTRUCTION THE FACILITY ALSO PROVIDES A UNIQUE TEACHING, MEETING AND CELEBRATION SPACE FOR COMMUNITY GROUPS, AS WELL AS LOCAL BUSINESS AND INDUSTRY ATTENDANCE AT THE PORTLAND FACILITY WAS ESTIMATED AT WELL OVER 30,000 VISITORS IN THE FISCAL YEAR ENDED JUNE 30, 2011 THE BOARD OF DIRECTORS HAS DESIGNATED THAT THE INCOME FROM THE ANN H GOODRICH ENDOWMENT BE USED FOR COSTS RELATING TO FACILITY OPERATIONS THREE FUNDS AT THE PORTLAND FOUNDATION HAVE BEEN ESTABLISHED TO PROVIDE FOR VARIOUS COSTS OF ARTS PLACES PORTLAND CENTER THESE INCLUDE THE MAXWELL AND CORNELIA NAAS ARTS COUNCIL FUND AT THE PORTLAND FOUNDATION THAT SERVES AS AN ENDOWMENT FOR MAJOR RENOVATIONS AND REPAIRS TO THE PORTLAND FACILITY ANOTHER ENDOWMENT FOR THE MAINTENANCE OF THE FACILITY WAS ESTABLISHED THROUGH A BEQUEST BY THE LATE HELEN BARRENBRUGGE IN THE FISCAL YEAR 2008 INCOME FROM THIS FUND BECAME AVAILABLE IN FISCAL YEAR 2010 ALSO AT THE PORTLAND FOUNDATION, THE HAWKINS COMMUNITY TRUST FUND PROVIDES OPERATING SUPPORT FOR THE PORTLAND FACILITY

4c (Code) (Expenses $ 85,146 including grants of $) (Revenue $ 45,334)

MUSICWORKS INSPIRED BY THE MUSIC SETTLEMENT MOVEMENT, ARTS PLACE BEGAN THIS MUSIC EDUCATION PROGRAM IN 1983 INDIVIDUAL AND GROUP INSTRUCTION IS AVAILABLE IN BRASS, GUITAR, HARP, PERCUSSION, PIANO, ORCHESTRAL STRINGS, AND WOODWINDS ENSEMBLES OFFERED INCLUDE MULTIPLE CHOIRS, AS WELL AS PERCUSSION, BRASS, ORCHESTRAL STRINGS, AND FLUTE ENSEMBLES INTRODUCTORY MUSIC INSTRUCTION FOR PRESCHOOLERS WAS ALSO OFFERED THROUGH THE MUSIC DA CAPO AND MUSIC EXPLORERS CLASSES MOST STUDENTS RECEIVE A WEEKLY INDIVIDUAL LESSON AND MANY PARTICIPATE IN A WEEKLY ENSEMBLE THE SECOND SUMMER OF THE JAY COUNTY COMMUNITY BAND SAW A SIGNIFICANT INCREASE IN PARTICIPATION AND IN THE NUMBER OF CONCERTS PERFORMED BY THIS NEW ADULT ENSEMBLE THE PROGRAM CONTINUES TO BE OFFERED IN BLACKFORD AND JAY COUNTIES IN INDIANA AND AUGLAIZE AND MERCER COUNTIES IN OHIO A SIGNIFICANT MARKETING CHANGE FOR THE PROGRAM WAS MADE IN THE SPRING OF 2011 MUSICWORKS, ALONG WITH THE INNOVATIONS PROGRAM, WILL BE MARKETED AS A PART OF OUR CREATIVEWORKS OFFERINGS, WHICH ENCOMPASSES ALL OF OUR ARTS INSTRUCTIONAL ACTIVITIES

4d Other program services (Describe in Schedule O) **See also Additional Data for Description**

(Expenses $ 185,310 including grants of $) (Revenue $ 35,087)

4e **Total program service expenses**▶$ 618,516

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		No
4	**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*	4	Yes	
5	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 98-19? *If "Yes," complete Schedule C, Part III*	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8	Yes	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	Yes	
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			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line10? *If "Yes," complete Schedule D, Part VI.*	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII.*	11b	Yes	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII.*	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX.*	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X.*	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X.*	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12a	Yes	
b	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		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, and program service activities outside the United States? *If "Yes," complete Schedule F, Parts I and IV*	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the U S ? *If "Yes," complete Schedule F, Parts II and IV*	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the U S ? *If "Yes," complete Schedule F, Parts III and IV*	16		No
17	Did the organization report a total of more than $15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I (see instructions)*	17		No
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		No
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20a	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? **Note.** Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Part IV **Checklist of Required Schedules** *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	Yes	
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		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b–24d and complete Schedule K. If "No," go to line 25*	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		No
c	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		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
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		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	33		No
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		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		No
a	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, Part V, line 2* ☐ **Yes** ☑ **No**			
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	Yes	

Part 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	37			
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 reportable gaming (gambling) winnings to prize winners?			1c		
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	16			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	Yes	
	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		No
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 over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a		No
b	If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?			6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h		
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			8		
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	**Section 501(c)(7) organizations.** Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
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	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O			13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			14b		

Part VI **Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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 . . . . ☑

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	1a 15			
b	Enter the number of voting members included in line 1a, above, who are independent	1b 15			
2	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?		2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		No
6	Does the organization have members or stockholders?		6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?		8a	Yes	
b	Each committee with authority to act on behalf of the governing body?		8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ▶IN

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you make these available Check all that apply

☐ Own website ☐ Another's website ☑ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table

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

ERIC R ROGERS EXECUTIVE DIR
131 EAST WALNUT STREET PORTLAND IN
PORTLAND, IN 47371
(260) 726-4809

Part VII **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 . . . .

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees 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 organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) SARA FARRIS DIRECTOR	1 00	X						0	0	0
(2) ANNI MCCLUNG DIRECTOR	1 00	X						0	0	0
(3) MARGIE JETTER DIRECTOR	1 00	X						0	0	0
(4) DANIEL ORR DIRECTOR	1 00	X						0	0	0
(5) LYNETTE WHITESELL DIRECTOR	1 00	X						0	0	0
(6) JEANNE FRANK DIRECTOR	1 00	X						0	0	0
(7) MINDY WEAVER DIRECTOR	1 00	X						0	0	0
(8) JAMES FORCUM TREASURER	2 00			X				0	0	0
(9) REBECCA HINKLE PRESIDENT	4 00			X				0	0	0
(10) PATRICK MILLER SECRETARY	2 00			X				0	0	0
(11) CONNIE ROBERTS 1ST VICE PRESIDENT	2 00			X				0	0	0
(12) CAROL TRIMMER 2ND VICE PRESIDENT	2 00			X				0	0	0
(13) ERIC R ROGERS EXECUTIVE DIRECTOR	45 00				X			71,275	0	0

Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** (continued)

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
1b Sub-Total ▶										
c Total from continuation sheets to Part VII, Section A ▶										
d Total (add lines 1b and 1c) ▶								0	0	0

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 in reportable compensation from the organization ▶0

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	4		No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	5		No

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization ▶0

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	197,916				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	453,637				
	g Noncash contributions included in lines 1a-1f $		12,977				
	h **Total.** Add lines 1a-1f			651,553			
Program Service Revenue			Business Code				
	2a CLASS AND LESSON FEES		900099	65,126	65,126		
	b MISCELLANEOUS		900099	15,114	15,114		
	c TICKET SALES		900099	8,031	8,031		
	d OTHER FEES		900099	1,460	1,460		
	e						
	f All other program service revenue						
	g **Total.** Add lines 2a–2f			89,731			
	3 Investment income (including dividends, interest and other similar amounts)			13,867			13,867
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
		(i) Real	(ii) Personal				
	6a Gross Rents						
	b Less rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss)						
		(i) Securities	(ii) Other				
	7a Gross amount from sales of assets other than inventory						
	b Less cost or other basis and sales expenses		2				
	c Gain or (loss)		-2				
	d Net gain or (loss)			-2	-2		
Other Revenue	8a Gross income from fundraising events (not including $ ______ of contributions reported on line 1c) See Part IV, line 18	a					
	b Less direct expenses	b					
	c Net income or (loss) from fundraising events						
	9a Gross income from gaming activities See Part IV, line 19	a					
	b Less direct expenses	b					
	c Net income or (loss) from gaming activities						
	10a Gross sales of inventory, less returns and allowances	a					
	b Less cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
	Miscellaneous Revenue		Business Code				
	11a						
	b						
	c						
	d All other revenue						
	e **Total.** Add lines 11a–11d						
	12 **Total revenue.** See Instructions			755,149	89,729	0	13,867

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	**(A)** Total expenses	**(B)** Program service expenses	**(C)** Management and general expenses	**(D)** Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	144,967	144,967		
2	Grants and other assistance to individuals in the U S See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	71,275	30,718	27,447	13,110
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	145,029	92,356	24,816	27,857
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	4,172	2,052	1,034	1,086
9	Other employee benefits	21,155	8,502	4,223	8,430
10	Payroll taxes	17,615	9,326	5,007	3,282
a	Fees for services (non-employees) Management				
b	Legal				
c	Accounting				
d	Lobbying				
e	Professional fundraising services *See Part IV, line 17* . .				
f	Investment management fees				
g	Other	126,283	120,150	4,645	1,488
12	Advertising and promotion	21,192	18,941	1,076	1,175
13	Office expenses	18,601	13,130	4,229	1,242
14	Information technology				
15	Royalties . .				
16	Occupancy	11,780	11,000	332	448
17	Travel	6,294	6,019	143	132
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	34,353	28,984	5,369	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	69,724	67,804	1,920	
23	Insurance	7,329	7,329		
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	UTILITIES	25,685	25,685		
b	MAILING AND POSTAGE	11,720	9,458	632	1,630
c	MAINTENANCE AND REPAIRS	8,862	7,798	1,064	
d	PRIZES AND AWARDS	6,979	6,979		
e	TELEPHONE	5,186	4,379	690	117
f	All other expenses	8,942	2,939	5,574	429
25	**Total functional expenses.** Add lines 1 through 24f	767,143	618,516	88,201	60,426
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				

Part X Balance Sheet

					(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing			80,808	1	66,944
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net			96,436	3	99,461
	4	Accounts receivable, net			1,874	4	1,411
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L				5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Schedule L				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			2,105	9	1,914
	10a	Land, buildings, and equipment cost or other basis *Complete Part VI of Schedule D*	10a	2,990,207			
	b	Less accumulated depreciation	10b	1,394,475	1,664,458	10c	1,595,732
	11	Investments—publicly traded securities				11	
	12	Investments—other securities See Part IV, line 11			910,113	12	945,927
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			42,505	15	43,549
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)			2,798,299	16	2,754,938
Liabilities	17	Accounts payable and accrued expenses			78,789	17	62,571
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability *Complete Part IV of Schedule D*				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons *Complete Part II of Schedule L*				22	
	23	Secured mortgages and notes payable to unrelated third parties			584,972	23	511,052
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D			34,934	25	0
	26	**Total liabilities.** Add lines 17 through 25			698,695	26	573,623
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**					
	27	Unrestricted net assets			1,112,918	27	1,107,031
	28	Temporarily restricted net assets			120,600	28	208,178
	29	Permanently restricted net assets			866,086	29	866,106
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			2,099,604	33	2,181,315
	34	Total liabilities and net assets/fund balances			2,798,299	34	2,754,938

Part XI Reconcilliation of Net Assets

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) . . .	1	755,149
2	Total expenses (must equal Part IX, column (A), line 25)	2	767,143
3	Revenue less expenses Subtract line 2 from line 1	3	-11,994
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . .	4	2,099,604
5	Other changes in net assets or fund balances (explain in Schedule O)	5	93,705
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	2,181,315

Part 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 ☑ 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		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c		No
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 ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separated basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits . .	3b		

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SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 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

Name of the organization
ARTS PLACE INC

Employer identification number
35-1379424

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☑ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9 ☐ An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a ☐ Type I **b** ☐ Type II **c** ☐ Type III - Functionally integrated **d** ☐ Type III - Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?	**11g(i)**		
(ii) a family member of a person described in (i) above?	**11g(ii)**		
(iii) a 35% controlled entity of a person described in (i) or (ii) above?	**11g(iii)**		

h Provide the following information about the supported organization(s)

(i) Name of supported organization	**(ii)** EIN	**(iii)** Type of organization (described on lines 1- 9 above or IRC section **(see instructions)**)	**(iv)** Is the organization in col (i) listed in your governing document? Yes	No	**(v)** Did you notify the organization in col (i) of your support? Yes	No	**(vi)** Is the organization in col (i) organized in the U S ? Yes	No	**(vii)** Amount of support
Total									

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I 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	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	594,713	723,787	628,294	565,474	651,553	3,163,821
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	594,713	723,787	628,294	565,474	651,553	3,163,821
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public Support.** Subtract line 5 from line 4						3,163,821

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	594,713	723,787	628,294	565,474	651,553	3,163,821
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	33,311	15,685	7,024	17,597	13,865	87,482
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	8,018	-43,248	-81,601	51,135	93,705	28,009
11 **Total support** (Add lines 7 through 10)						3,279,312

12 Gross receipts from related activities, etc (See instructions) | 12 | 507,308

13 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 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)) | 14 | 96 480 %

15 Public Support Percentage for 2009 Schedule A, Part II, line 14 | 15 | 99 300 %

16a **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 box and **stop here.** The organization qualifies as a publicly supported organization ▶☑

b **33 1/3% support test—2009.** If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

17a **10%-facts-and-circumstances test—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 ▶☐

b **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 ▶☐

18 **Private Foundation** If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions ▶☐

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. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar 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 ")						
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						
c Add lines 7a and 7b						
8 **Public Support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6						
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						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
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)						

14 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15	
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2010** (line 10c column (f) divided by line 13 column (f))	17	
18 Investment income percentage from **2009** Schedule A, Part III, line 17	18	

19a **33 1/3% support tests—2010.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support tests—2009.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

20 **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions ▶☐

Part IV **Supplemental Information.** 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).

Facts And Circumstances Test

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493306010301

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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.

OMB No 1545-0047

2010

Open to Public Inspection

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

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization	Employer identification number
ARTS PLACE INC	35-1379424

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV

2 Political expenditures ▶ $ 0

3 Volunteer hours 0

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ $

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ $

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ $

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities ▶ $

3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ $

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	**(b)** Address	**(c)** EIN	**(d)** Amount paid from filing organization's funds If none, enter -0-	**(e)** Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

Part II-A **Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

A Check ☐ if the filing organization belongs to an affiliated group
B Check ☑ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		**(a)** Filing Organization's Totals	**(b)** Affiliated Group Totals
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)	1,187	
b	Total lobbying expenditures to influence a legislative body (direct lobbying)		
c	Total lobbying expenditures (add lines 1a and 1b)	1,187	
d	Other exempt purpose expenditures	767,143	
e	Total exempt purpose expenditures (add lines 1c and 1d)	768,330	
f	Lobbying nontaxable amount Enter the amount from the following table in both columns	140,250	

If the amount on line 1e, column (a) or (b) is:	**The lobbying nontaxable amount is:**
Not over $500,000	20% of the amount on line 1e
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000
Over $17,000,000	$1,000,000

		(a)	(b)
g	Grassroots nontaxable amount (enter 25% of line 1f)	35,063	
h	Subtract line 1g from line 1a If zero or less, enter -0-	0	
i	Subtract line 1f from line 1c If zero or less, enter -0-	0	

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ **Yes** ☐ **No**

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period

	Calendar year (or fiscal year beginning in)	**(a)** 2007	**(b)** 2008	**(c)** 2009	**(d)** 2010	**(e)** Total
2a	Lobbying non-taxable amount	148,494	153,690	140,959	140,250	583,393
b	Lobbying ceiling amount (150% of line 2a, column(e))					875,090
c	Total lobbying expenditures	1,283	1,457	1,412	1,187	5,339
d	Grassroots non-taxable amount	37,124	38,423	35,240	35,063	145,850
e	Grassroots ceiling amount (150% of line 2d, column (e))					218,775
f	Grassroots lobbying expenditures	1,283	1,457	1,412	1,187	5,339

Part II-B **Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

		(a) Yes	(a) No	(b) Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities? If "Yes," describe in Part IV			
j	Total lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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

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

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

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

Part IV **Supplemental Information**

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

Identifier	Return Reference	Explanation
ORGANIZATIONS DIRECT AND INDIRECT POLITICAL CAMPAIGN ACTIVITIES	PART I-A, LINE 1	GRASSROOTS LOBBYING IN SUPPORT OF ARTS PROGRAMMING

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

2010

Open to Public Inspection

Name of the organization
ARTS PLACE INC

Employer identification number
35-1379424

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 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? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit ☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

- ☐ Preservation of land for public use (e g , recreation or pleasure)
- ☐ Preservation of an historically importantly land area
- ☐ Protection of natural habitat
- ☐ Preservation of a certified historic structure
- ☐ Preservation of open space

2 Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	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	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ ______

4 Number of states where property subject to conservation easement is located ▶ ______

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 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 ▶ $ ______

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

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

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

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

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ 0

(ii) Assets included in Form 990, Part X ▶ $ 34,900

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

a Revenues included in Form 990, Part VIII, line 1 ▶ $ ______

b Assets included in Form 990, Part X ▶ $ ______

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a ☑ Public exhibition
b ☐ Scholarly research
c ☑ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ **Yes** ☑ **No**

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part 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 and complete the following table

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ **Yes** ☐ **No**

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current Year	(b) Prior Year	(c) Two Years Back	(d) Three Years Back	(e) Four Years Back
1a Beginning of year balance	875,179	841,875	949,908		
b Contributions	20	1,420	100		
c Investment earnings or losses	107,574	68,732	-70,318		
d Grants or scholarships					
e Other expenditures for facilities and programs	36,846	36,848	37,815		
f Administrative expenses					
g End of year balance	945,927	875,179	841,875		

2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment ▶

b Permanent endowment ▶

c Term endowment ▶

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

		Yes	No
(i) unrelated organizations	3a(i)	Yes	
(ii) related organizations	3a(ii)		No
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		112,015		112,015
b Buildings		2,622,995	1,170,880	1,452,115
c Leasehold improvements				
d Equipment		255,197	223,595	31,602
e Other				
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				1,595,732

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) ENDOWMENT FUND	554,848	F
(B) PORTLAND FOUNDATION	391,079	F
Total. *(Column (b) should equal Form 990, Part X, col (B) line 12)* ▶	945,927	

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
Total. *(Column (b) should equal Form 990, Part X, col (B) line 13)* ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
Total. *(Column (b) should equal Form 990, Part X, col.(B) line 15.)* . . . . ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1 (a) Description of Liability	(b) Amount
Federal Income Taxes	
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	

2. Fin 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC740)

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	755,149
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	767,143
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-11,994
4	Net unrealized gains (losses) on investments	4	93,705
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 - 8	9	93,705
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	81,711

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	848,854
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	93,705		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines **2a** through **2d**			2e	93,705
3	Subtract line **2e** from line **1**			3	755,149
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	0
5	Total Revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12)			5	755,149

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	767,143
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines **2a** through **2d**			2e	0
3	Subtract line **2e** from line **1**			3	767,143
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	0
5	Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18)			5	767,143

Part XIV Supplemental Information

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, 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

Identifier	Return Reference	Explanation

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
ARTS PLACE INC

Employer identification number
35-1379424

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . ☑ Yes ☐ No

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

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Part II can be duplicated if additional space is needed. . . . ▶ ☐

1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

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

3 Enter total number of other organizations . . . ▶

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

(a) Type of grant or assistance	**(b)** Number of recipients	**(c)** Amount of cash grant	**(d)** Amount of non-cash assistance	**(e)** Method of valuation (book, FMV, appraisal, other)	**(f)** Description of non-cash assistance

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	**Return Reference**	**Explanation**
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 WHEN A GRANT IS AWARDED TO A NOT-FOR-PROFIT ORGANIZATION, THE ORGANIZATION HAS PROCEDURES IN PLACE TO ENSURE PROPER USAGE OF THE GRANT FUNDS THE RECIPIENT ORGANIZATION MUST SHOW PROOF OF EXPENDITURE FOR THE PROJECT, AND THEN MUST SIGN A GRANT AGREEMENT, WHEREBY THEY AGREE TO USE THE GRANT FUNDS ONLY FOR THE PROJECT FOR WHICH THE GRANT WAS AWARDED ONCE THE GRANT FUNDS ARE EXPENDED, THE RECIPIENT ORGANIZATION MUST COMPLETE A WRITTEN FINAL GRANT REPORT, WHICH DETAILS THE USAGE OF THE GRANT FUNDS FINALLY, THE ORGANIZATION MAY CONDUCT ON-SITE VISITS WITH RECIPIENT ORGANIZATIONS AS A WAY TO FURTHER ENSURE PROPER USAGE OF GRANT FUNDS

Additional Data

Return to Form

Software ID:
Software Version:
EIN: 35-1379424
Name: ARTS PLACE INC

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
ANDERSON CENTER FOR THE ARTSPO BOX 1218 ANDERSON,IN 46015		501(C)(3)					SUPPORT FOR ORGANIZATION'S PROGRAMS AND PROJECTS
ANDERSON SYMPHONY ORCHEST1124 MERIDIAN ST ANDERSON,IN 46015		501(C)(3)	10,681				SUPPORT FOR ORGANIZATION'S PROGRAMS AND PROJECTS
ANDERSON YOUTH BALLET 29 YOUNG DRIVE ANDERSON,IN 46016		501(C)(3)	6,888				SUPPORT FOR ORGANIZATION'S PROGRAMS AND PROJECTS
ART ASSOC RANDOLPH CNTY115 N HOWARD STREET UNION CITY,IN 47390		501(C)(3)					SUPPORT FOR ORGANIZATION'S PROGRAMS AND PROJECTS
BALL STATE DEPT THEATRECONTRACTS GRANTS OFF AC 119 MUNCIE,IN 47306		501(C)(3)					SUPPORT FOR ORGANIZATION'S PROGRAMS AND PROJECTS
BERNE COMMUNITY DEVELOPMENT CORP110 S JEFFERSON ST BERNE,IN 46711		501(C)(3)					SUPPORT FOR ORGANIZATION'S PROGRAMS AND PROJECTS
COMMUNITY EDUCATION COALITION3013 VIRGINIA AVE CONNERSVILLE,IN 47331		501(C)(3)					SUPPORT FOR ORGANIZATION'S PROGRAMS AND PROJECTS
CORNERSTONE CENTER FOR THE ART520 E MAIN ST MUNCIE,IN 47305		501(C)(3)	22,211				SUPPORT FOR ORGANIZATION'S PROGRAMS AND PROJECTS
EARLHAM COLLEGE801 NATIONAL ROAD WEST RICHMOND,IN 47374		501(C)(3)	6,888				SUPPORT FOR ORGANIZATION'S PROGRAMS AND PROJECTS
MARION PHILHARMONIC 215 S ADAMS ST PO BOX 272 MARION,IN 46952		501(C)(3)	7,018				SUPPORT FOR ORGANIZATION'S PROGRAMS AND PROJECTS
MINNETRISTA CULTURAL FOUND1200 N MINNETRISTA PARKWAY MUNCIE,IN 47302		501(C)(3)					SUPPORT FOR ORGANIZATION'S PROGRAMS AND PROJECTS
MISSISSINEWA VALLEY BAND806 W KICKAPOO ST HARTFORD CITY,IN 47348		501(C)(3)					SUPPORT FOR ORGANIZATION'S PROGRAMS AND PROJECTS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MUNCIE CHILDREN'S MUSEUM515 SOUTH HIGH STREET MUNCIE,IN 47305		501(C)(3)					SUPPORT FOR ORGANIZATION'S PROGRAMS AND PROJECTS
MUNCIE CIVIC&COLLEGE SYMPHONY2000 UNIVERSITY AVE MUNCIE,IN 47306		501(C)(3)	11,028				SUPPORT FOR ORGANIZATION'S PROGRAMS AND PROJECTS
NCGLNAC4950 N 750 E ATTICA,IN 47918		501(C)(3)	7,030				SUPPORT FOR ORGANIZATION'S PROGRAMS AND PROJECTS
NORTH ADAMS COMMUNITY SCHOOLS625 STADIUM DRIVE DECATUR,IN 46733		501(C)(3)	6,935				SUPPORT FOR ORGANIZATION'S PROGRAMS AND PROJECTS
RICHMOND ART MUSEUM 350 HUB ETCHISON PARKWAY RICHMOND,IN 47374		501(C)(3)	16,126				SUPPORT FOR ORGANIZATION'S PROGRAMS AND PROJECTS
RICHMOND CIVIC THEATRE1003 E MAIN ST RICHMOND,IN 47374		501(C)(3)	9,760				SUPPORT FOR ORGANIZATION'S PROGRAMS AND PROJECTS
RICHMOND COMM SCHOOLS380 HUB ETCHISON PARKWAY RICHMOND,IN 47374		501(C)(3)					SUPPORT FOR ORGANIZATION'S PROGRAMS AND PROJECTS
RICHMOND SYMPHONY ORCHPO BOX 982 RICHMOND,IN 47374		501(C)(3)	11,534				SUPPORT FOR ORGANIZATION'S PROGRAMS AND PROJECTS
RUSH COUNTY CHORALE INCPO BOX 144 RUSHVILLE,IN 46173		501(C)(3)					SUPPORT FOR ORGANIZATION'S PROGRAMS AND PROJECTS
SWISS HERITAGE SOCIETY 1200 SWISS WAY BERNE,IN 46711		501(C)(3)					SUPPORT FOR ORGANIZATION'S PROGRAMS AND PROJECTS
UNION COUNTY PUBLIC LIBRARY2 E SEMINARY ST LIBERTY,IN 47353		501(C)(3)					SUPPORT FOR ORGANIZATION'S PROGRAMS AND PROJECTS
VSA ARTS OF INDIANA 4105 N WALNUT ST MUNCIE,IN 47303		501(C)(3)					SUPPORT FOR ORGANIZATION'S PROGRAMS AND PROJECTS

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Schedule L (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ. ▶See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
ARTS PLACE INC

Employer identification number
35-1379424

Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1 (a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
		Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 . . . . ▶ $

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . ▶ $

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
Total . . . . ▶ $										

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of grant or type of assistance

Part IV Business Transactions Involving Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) ANDREW BRIGGS	DIRECTOR - PRESIDENT OF BANK	34,353	MORTGAGE HELD AT BANK		No
(2) LYNETTE WHITESELL	DIRECTOR - EMPLOYEE OF ORGANIZATION	22,211	ARTS PLACE GRANTS MONEY TO ORGANIZATION		No
(3) SAM RACSTER	DIRECTOR - CO-OWNER OF BUSINESS	4,171	EMPLOYER CONTRIBUTIONS TO EMPLOYEE'S SIMPLE IRA ACCOUNTS		No

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier	Return Reference	Explanation

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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 to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
ARTS PLACE INC

Employer identification number
35-1379424

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6		THE ORGANIZATION HAS GREATER THAN 700 MEMBERSHIPS

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A		OFFICERS ELECTED BY MEMBERSHIP

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B		DECISIONS OF THE GOVERNING BOARD ARE SUBJECT TO APPROVAL BY MEMBERS

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		FORM 990 IS PROVIDED TO THE GOVERNING BODY DURING A BOARD MEETING TO BE REVIEWED AND APPROVED BEFORE BEING SUBMITTED

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	CONFLICT OF INTEREST STATEMENTS ARE REVIEWED BY THE BOARD AT LEAST ANNUALLY

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	THE REVIEW AND APPROVAL OF COMPENSATION IS PERFORMED BY TRUSTEES THE TRUSTEES REVIEW VARIOUS DATA AND DETERMINE IF THE COMPENSATION IS REASONABLE

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS ON INVESTMENTS 93,705

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Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization

(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

OMB No 1545-0172

2010

Attachment Sequence No **67**

Name(s) shown on return	Business or activity to which this form relates	Identifying number
ARTS PLACE INC	FORM 990 PAGE 10	35-1379424

Part I **Election To Expense Certain Property Under Section 179**

Note: *If you have any listed property, complete Part V before you complete Part I.*

1 Maximum amount See the instructions for a higher limit for certain businesses	1	500,000
2 Total cost of section 179 property placed in service (see instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,000,000
4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	4	
5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions	5	

6 (a) Description of property	(b) Cost (business use only)	(c) Elected cost

7 Listed property Enter the amount from line 29	7			
8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7			8	
9 Tentative deduction Enter the **smaller** of line 5 or line 8			9	
10 Carryover of disallowed deduction from line 13 of your 2009 Form 4562			10	
11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)			11	
12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11			12	
13 Carryover of disallowed deduction to 2011 Add lines 9 and 10, less line 12 ▶	13			

Note: *Do not use Part II or Part III below for listed property. Instead, use Part V.*

Part II **Special Depreciation Allowance and Other Depreciation (Do not** include listed property **)** (See instructions)

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	69,724

Part III **MACRS Depreciation (Do not** include listed property.**)** (See instructions.)

Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2010	17	
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ▶ ☐		

Section B—Assets Placed in Service During 2010 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27 5 yrs	MM	S/L	
			27 5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part IV **Summary** (see instructions)

21 Listed property Enter amount from line 28			21	
22 **Total.** Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions			22	69,724
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23			

Part V **Listed Property** (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: *For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.*

Section A—Depreciation and Other Information (Caution: *See the instructions for limits for passenger automobiles.*)

24a Do you have evidence to support the business/investment use claimed? Yes No | **24b** If "Yes," is the evidence written? Yes No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation/ deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)						25		
26 Property used more than 50% in a qualified business use								
		%						
		%						
		%						
27 Property used 50% or less in a qualified business use								
		%				S/L -		
		%				S/L -		
		%				S/L -		

28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 . **28**

29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 . . . . **29**

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person

If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
30 Total business/investment miles driven during the year (**do not** include commuting miles) . .												
31 Total commuting miles driven during the year .												
32 Total other personal(noncommuting) miles driven												
33 Total miles driven during the year Add lines 30 through 32												
	Yes	**No**	**Yes**	**No**	**Yes**	**No**	**Yes**	**No**	**Yes**	**No**	**Yes**	**No**
34 Was the vehicle available for personal use during off-duty hours?												
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use? .												

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **are not** more than 5% owners or related persons (see instructions)

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions)		
Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles		

Part VI **Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2010 tax year (see instructions)					
43 Amortization of costs that began before your 2010 tax year				43	
44 Total. Add amounts in column (f) See the instructions for where to report . .				44	

Additional Data

Software ID:
Software Version:
EIN: 35-1379424
Name: ARTS PLACE INC

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services

(Code) (Expenses $ 185,310 including grants of $) (Revenue $ 35,087)

FACITITY OPERATIONS - ST MARYS THE RENTED SPACE INCLUDES A CLASSROOM, A GALLERY, AND OFFICE SPACE LOCAL INPUT FOR THE OPERATIONS OF THE COLLECTIVE CENTER IS PROVIDED BY AN ADVISORY COMMUNITY BOARD THAT REPORTS TO THE ARTS PLACE CORPORATE BOARD THE ARTS PLACE DIRECTOR OF EDUCATION IS BASED FROM THIS FACILITY, OVERSEEING THE OPERATIONS OF THE COLLECTIVE CENTER, IN ADDITION TO THIS INDIVIDUALS RESPONSIBILITIES FOR ARTS PLACE EDUCATIONAL PROGRAMS ARTS IN THE PARKS THIS POPULAR PROGRAM WAS LAUNCHED IN 1977 AND CONTINUES TO PROVIDE ACCESS TO THE ARTS FOR CHILDREN DURING THE SUMMER MONTHS OVER 13,000 CHILDREN HAVE PARTICIPATED IN THE PROGRAM SINCE ITS INCEPTION AS ARTS IN THE PARKS IS CONDUCTED IN JUNE AND JULY, THE PROGRAM BRIDGES TWO FISCAL YEARS THIS PAST SUMMER, 15 COMMUNITIES IN 5 COUNTIES IN INDIANA AND OHIO WERE SERVED THE WORKSHOPS ARE DESIGNED FOR CHILDREN AGES 7 THROUGH 14 AND PROVIDE INTENSIVE INTRODUCTIONS TO SPECIFIC ARTS MEDIUMS WORKSHOPS ARE TYPICALLY LED BY PROFESSIONAL ARTISTS AND ARTS EDUCATORS, WHO ARE REFERRED TO AS TEACHING ARTISTS THE SESSIONS ARE OFFERED FOR A VERY MODEST FEE, WITH SCHOLARSHIP ASSISTANCE AVAILABLE THE SUMMER 2011 PROGRAM INCLUDED WEEK-LONG (FIVE-DAY) CLASSES, DAY-LONG ARTS CAMPS, AS WELL AS FAMILY SESSIONS DESIGNED TO ALLOW ENTIRE FAMILIES TO PARTICIPATE CREATIVEWORKS THIS PROGRAM IS DESIGNED TO PROVIDE SEQUENTIAL CLASS INSTRUCTION IN DANCE AND THE VISUAL AND LITERARY ARTS TO BOTH CHILDREN AND ADULTS INSTRUCTION IS LONGER TERM AND MORE INTENSIVE THAN IN ARTS IN THE PARKS, WITH AN APPROACH AND CURRICULUM PHILOSOPHY SIMILAR TO THE MUSICWORKS PROGRAM CLASS OFFERINGS INCLUDED SUCH ARTS FORMS AS CERAMICS, DRAWING, PAINTING, POETRY WRITING, AND MIDDLE EASTERN DANCING, AS WELL AS TECHNICAL ASSISTANCE WORKSHOPS FOR PRACTICING ARTISTS AND ARTS ORGANIZERS THE PROGRAM IS OFFERED AT BOTH THE PORTLAND AND ST MARYS CENTERS THE COMPONENTS OF INNOVATIONS WILL BE MARKETED AS A PART OF OUR CREATIVEWORKS PROGRAM, WHICH ENCOMPASSES ALL OF OUR ARTS INSTRUCTION THE VISUAL ARTS, FOR EXAMPLE, WILL BE PROMOTED AS ARTWORKS, WHILE THE LITERARY ARTS WILL BE PROMOTED AS PENWORKS EXHIBITS THIS PROGRAM IS CONDUCTED AT BOTH THE PORTLAND AND ST MARYS LOCATIONS EXHIBITS AT THE PORTLAND CENTER ARE PRESENTED IN THE HUGH N RONALD GALLERY, AND TWO SMALLER GALLERIES, PROVIDING A HIGHLY FLEXIBLE EXHIBITION SPACE IN 2010-2011, TWO ONE-PERSON SHOWS WERE PRESENTED FEATURING MARGARET LUMP, A PAINTER, AND CATHY JEFFERS, A TEXTILE ARTIST SEVERAL SHOWS WERE THEME-ORIENTED, INCLUDING THE HOLIDAY SHOW AND ART-O-LOGY, AND THE BALL STATE UNIVERSITY CERAMICS FACULTY AND STUDENTS SHOW AN ANNUAL THEME SHOW, THE REGIONAL STUDENT ART EXHIBITION, INCLUDED ENTRIES BY OVER 138 STUDENTS FROM 14 SCHOOLS IN INDIANA AND OHIO THIS EXHIBIT WAS PRESENTED SIMULTANEOUSLY AT THE PORTLAND AND ST MARYS GALLERIES ARTS PLACE ALSO ONCE AGAIN HOSTED A QUILT EXHIBIT ORGANIZED BY THE STITCH N CHATTER QUILT CLUB ARTISTS AND EXHIBIT PROJECTS FOR THE PORTLAND CENTER ARE SELECTED BY A CITIZEN PANEL CONSISTING OF ARTISTS AND COMMUNITY REPRESENTATIVES SIX EXHIBITS WERE ORGANIZED FOR THE COLLECTIVE CENTER, INCLUDING THREE ONE-PERSON SHOWS BY ELIZABETH KAUFMAN, BARB SAILOR, AND RALPH STUCKMAN THE GALLERY ALSO FEATURED THE FOLLOWING THEME SHOWS THE HOLIDAY SHOW, WALK WITH NATURE YOUTH PHOTOGRAPHY EXHIBIT, AND THE REGIONAL STUDENT ART EXHIBITPERFORMANCES PRESENTING PERFORMING ARTISTS HAS BEEN A CENTRAL PART OF ARTS PLACE PROGRAMMING SINCE THE ORGANIZATIONS FOUNDING IN 1967 THE 2010-2011 PERFORMANCE SERIES AT HALL-MOSER THEATRE INCLUDED THE BLUEGRASS/JAZZ FUSION GROUP, THE ALISON BROWN QUARTET, RANI ARBO AND DAISY MAYHEM, INTERNATIONAL GUITAR NIGHT, CHIC GAMINE, VIOLINISTS BORIS KUCHARSKY AND VALERIA TOTH, AND THE DAVE BENNETT QUINTET IN ADDITION TO PRESENTING TOURING ARTISTS AT THE PORTLAND CENTER, ARTS PLACE ALSO PRESENTED JAY COUNTY NATIVE KINSEY FENNIG, A SINGER/SONGWRITER WORKING TO ESTABLISH A CAREER IN NASHVILLE, TENNESSEE ARTS PLACE ALSO PRESENTED A RECITAL BY MUSICWORKS FACULTY PIANIST AMY CHAPLIN, ALONG WITH NUMEROUS MUSICWORKS STUDENT RECITALS AND ENSEMBLE CONCERTS ARTS PLACE ALSO PRESENTED PERFORMING ARTISTS AT OTHER VENUES AROUND ITS SERVICE AREA IN THE FALL OF 2010, ARTS PLACE CO-PRESENTED THE QUEBECOIS FOLK BAND, MAUVAIS SORT WITH THE OHIO ARTS COUNCIL PERFORMANCES WERE PRESENTED IN WAPAKONETA AND ST MARYS IN ADDITION, ARTS PLACE PRESENTED INTERNATIONAL GUITAR NIGHT IN A SECOND PERFORMANCE THAT TOOK PLACE IN JANUARY 2011 AT THE BLACKFORD HIGH SCHOOL THEATRE IN JUNE 2011, ARTS PLACE LAUNCHED A MAJOR NEW PRESENTING EFFORT WITH THE DEDICATION PERFORMANCE AT THE HUDSON FAMILY PARK AMPHITHEATRE IN PORTLAND THE OPENING EVENT WAS CO-PRESENTED BY THE CITY OF PORTLAND AND ARTS PLACE AND FEATURED NEWFOUND ROAD, A BLUEGRASS/GOSPEL BAND, ALONG WITH THE JAY COUNTY COMMUNITY BAND PLANS FOR TWO MORE CONCERTS AT THE AMPHITHEATRE WERE ALSO MADE FOR LATER IN THE SUMMER OF 2011 ARTISTS IN RESIDENCE IN 2011, MAUVAIS SORT CONDUCTED RESIDENCIES IN SEVERAL SCHOOLS IN AUGLAIZE AND MERCER COUNTIES AS PART OF THE OHIO ARTS COUNCILS IMPACT TOUR ARTS PLACE WAS SELECTED BY THE STATE ARTS AGENCY TO SERVE AS THE AREA PRESENTER TWO VIOLINISTS, BORIS KUCHARSKY AND VALERIA TOTH, WORKED WITH HUNDREDS OF STUDENTS IN THE BLACKFORD COUNTY ELEMENTARY SCHOOLS IN MARCH 2011 WEB SERVICES AND ONLINE COMMUNICATIONS ARTS PLACE PROVIDED ARTS INFORMATION SERVICES FOR INQUIRIES ON ARTISTS, ARTS EVENTS, ARTS ORGANIZATIONS AND SERVICES IN BOTH THE SERVICE AREA AND WELL BEYOND WEB SERVICES WERE THE PRIMARY TOOL FOR PROVIDING THIS INFORMATION ARTS PLACE OWNS AND OPERATES THREE WEBSITES DESIGNED TO PROVIDE A WIDE RANGE OF INFORMATION ON THE ARTS THE CORPORATION ALSO PUBLISHES TWO ONLINE NEWSLETTERS THE MAIN ARTERY IS A REGIONALLY ORIENTED ONLINE PUBLICATION DESIGNED TO PROMOTE ARTISTS, ARTS ORGANIZATIONS AND EVENTS IN EAST CENTRAL INDIANA AND WEST CENTRAL OHIO THE ARTS CONNECTION IS A MONTHLY ONLINE PUBLICATION INTENDED TO PROMOTE ARTS ACTIVITIES AT THE PORTLAND AND ST MARYS CENTERS AND PROGRAMS AND SERVICES DIRECTLY PROVIDED BY ARTS PLACE THE ONLINE PUBLICATIONS DRIVE TRAFFIC TO THE WEBSITES THROUGH THE FREQUENT USE OF LINKS INDIANAARTS ORG ARTS PLACE IS THE LEADER IN PROVIDING WEB-BASED INFORMATION ON THE ARTS IN INDIANA SINCE 1997, ARTS PLACE HAS BEEN THE LEAD CONSORTIUM MEMBER OF THE REGIONAL PARTNERS FOR THE DEVELOPMENT AND MAINTENANCE OF A STATEWIDE ELECTRONIC ARTS DATABASE LAUNCHED IN APRIL 2000, WWW INDIANAARTS ORG IS OWNED AND OPERATED BY ARTS PLACE AND TODAY PROVIDES STATEWIDE DATABASES ON ARTS EVENTS, ARTISTS, ARTS PROVIDER ORGANIZATIONS, AS WELL AS EMPLOYMENT AND ADVANCEMENT OPPORTUNITIES FOR ARTISTS ARTS PLACE CONTINUED TO ADD ITS ARTS CONNECTION ENGINE (ACE) FEATURE TO A NUMBER OF WEBSITES OVER THE COURSE OF THE FISCAL YEAR THE ACE FEATURE ALLOWS OTHER WEBSITES TO DISPLAY FILTERED INFORMATION FROM ARTS PLACE WEBSITES A NUMBER OF ORGANIZATIONS BOTH WITHIN THE ARTS PLACE SERVICE AREA AND AROUND INDIANA NOW UTILIZE THIS FEATURE FOR AGGREGATED CONTENTDISPLAY, INCLUDING THE INDIANA ARTS COMMISSION THROUGH A GRANT FROM THE TIPPECANOE ARTS FEDERATION AND THE NORTH CENTER HEALTH SERVICES, ARTS PLACE WAS ABLE TO IMPROVE THE SEARCH FEATURES ON INDIANAARTS ORG AND TO HEAVILY PROMOTE THE SITE THROUGH THE PUBLICATION OF 60,000 RACK CARDS AND 10,000 BROCHURES OHIOARTS ORG THIS SITE IS INTENDED AS A MIRROR SERVICE TO INDIANAARTS ORG FOR ARTISTS AND ARTS PROVIDER ORGANIZATIONS IN WESTERN OHIO THE SITE WAS LAUNCHED IN THE LATE SPRING OF 2006 ALL SERVICES AVAILABLE ON INDIANAARTS ORG ARE AVAILABLE AT OHIOARTS ORG THIS PROJECT REMAINS EMBRYONIC DUE TO LIMITED FUNDING FOR IMPLEMENTATION FUNDAMENTALLY, THE SYSTEM CURRENTLY ALLOWS ARTS PLACE TO PROVIDE INFORMATION AND REFERRAL SERVICES TO ITS CONSTITUENTS IN WESTERN OHIO ARTSLAND ORG AS A COROLLARY TO WWW INDIANAARTS ORG AND WWW OHIOARTS ORG ARTS PLACE MAINTAINS A CENTRAL HOME SITE, WWW ARTSLAND ORG IN ADDITION TO INCLUDING INFORMATION ON THE ARTS PLACE FACILITIES, PROGRAMS, AND SERVICES, THE WEBSITE ALSO INCLUDES A NUMBER OF AGGREGATED CONTENT FEATURES FROM THE OTHER TWO WEBSITES SERVICES AND ORGANIZATIONS SUPPORT THIS PROGRAM REPRESENTS ACTIVITIES THAT ARE FUNDED THROUGH PRIVATE GIFTS OR THE GENERAL FUND, THUS ALLOWING ARTS PLACE THE FLEXIBILITY TO MEET COMMUNITY NEEDS THAT MAY NOT BE ANSWERED THROUGH THE INDIANA ARTS COMMISSION FUNDED REGIONAL ARTS PARTNERSHIP, INCLUDING ARTS PLACE SERVICES IN WESTERN OHIO