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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

2010

OMB No 1545-0047

ZUIU

Open to Public Inspection

A For the 2010 calendar year, or tax year beginning 07-01-2010 and ending 06-30-2011 D Employer identification number C Name of organization B Check if applicable Association of Performing Arts Presenters 39-1131995 Address change Doing Business As Name change E Telephone number Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite (202)833-2787 1211 Connecticut Avenue NW No 200 Terminated G Gross receipts \$ 5,190,540 _ Amended return City or town, state or country, and ZIP + 4 Washington, DC 20036 Application pending Name and address of principal officer **H(a)** Is this a group return for affiliates? Yes Mario Durham 1211 Connecticut Avenue NW No 200 H(b) Are all affiliates included? Washington, DC 20036 If "No," attach a list (see instructions) H(c) Group exemption number ► **▼** 501(c)(3) Tax-exempt status **Website:** ► www artspresenters org **M** State of legal domicile WI K Form of organization ✓ Corporation ✓ Trust ✓ Association ✓ L Year of formation 1957 Part I Summary Briefly describe the organization's mission or most significant activities The Association of Performing Arts Presenters develops and support a robust performing arts presenting field and the professionals who work in it Activities & Governance 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) . . 22 Number of independent voting members of the governing body (Part VI, line 1b) . 21 4 Total number of individuals employed in calendar year 2010 (Part V, line 2a) . 5 23 6 0 Total number of volunteers (estimate if necessary) . 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 132.015 **b** Net unrelated business taxable income from Form 990-T, line 34 7b -1,637 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . . 2,005,753 1,536,476 Program service revenue (Part VIII, line 2g) . 1,590,405 1,654,055 95,934 30,172 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 311,694 295,855 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 4,003,786 3,516,558 1,542,164 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 514,494 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 15 1,567,917 1,029,384 Expens Professional fundraising fees (Part IX, column (A), line 11e) . 0 0 16a b Total fundraising expenses (Part IX, column (D), line 25) \blacktriangleright 230,959 **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . . . 2,692,147 2,533,036 4,774,558 5,104,584 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses Subtract line 18 from line 12 . -770.772 -1,588,026 Net Assets or Fund Balances **Beginning of Current End of Year** Year 4,910,290 4,194,359 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . . 804,436 1,540,524 22 4,105,854 2,653,835 Net assets or fund balances Subtract line 21 from line 20 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. Signature of officer Date Sign Here Mario Durham President and CEO

Firm's address 🕨 200 International Circle Suite 5500

Hunt Valley, MD 21030

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

James E Marshall Jr

Preparer's signature

James E Marshall Jr

Type or print name and title

Firm's name 🕨 SB & Company LLC

preparer's name

Paid

Preparer

Use Only

Check if self

employed 🕨

PTIN

Firm's EIN

Phone no (410) 584-

Part	Ш	Statement of F Check if Schedule			olishments uestion in this Part I	II	
1	Brief	ly describe the orgai	nızatıon's mıssı	on			
The A	SSOCI	ation of Performing A	Arts Presenters	develop and su	pport a robust perfor	ming arts presenting field a	nd the professionals who work
2		ne organization unde Tor Form 990 or 990		ficant program s	ervices during the ye	ear which were not listed on	┌ Yes ┌ No
	If "Ye	s," describe these n	ew services on	Schedule O			
3	servi	ne organization ceas ces? s," describe these c			nt changes in how it	conducts, any program	┌ Yes ┌ No
4	Desc Secti	ribe the exempt purpon 501(c)(3) and 50	oose achieveme 11(c)(4) organiz	nts for each of t ations and secti		ee largest program services s are required to report the m service reported	
4a	(Cod	e) (Expenses \$	1,506,679	ıncludıng grants of \$) (Revenue	\$ 1,649,105)
		bers Conference - More t showcases, and exhibition		ning arts professiona	ls attend the conference	Activities include workshops, roui	ndtable discussions, presentations,
4b	(Cod	e) (Expenses \$	2,013,024	ıncludıng grants of \$	1,542,164) (Revenue	\$ 4,950)
		ssional Development - D duals and organizations	evelop and provide	e year-round semina	ars (in person and online)	, information, data and resources	that deepen and expand capacity in
4c	(Cod	e) (Expenses \$	481,809	ıncludıng grants of \$) (Revenue	\$ 30,941)
	to the		vebsite content, qu	iarterly member nev	vsletter and e-newsletter		ers, advocacy on issues of importance publications for the Annual Members'
	Othe	er program services	(Describe in S	chedule O) See	also Additional Data	for Description	
		enses \$	•	ncluding grants) (Revenue \$	132,899)
4e	Tota	I program service ex	rpenses►\$	4,509,73	 30		

Part IV	Checklist of	Required	Schedules
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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes,"</i> 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		
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^{\bullet}	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		No
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		No
С	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
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
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? <i>If</i> "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? <i>If</i> "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? <i>If</i> "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		N o
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		

Par	t IV Checklist of Required Schedules (continued)			
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 \blacksquare	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		Νo
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	Yes	
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
	IV	28a		No
	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	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		No
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Tyes Poo			
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?	_	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
а	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 55			
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		
a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		No
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
а	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 ►			
3	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		Νo
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
a	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		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	7e		
f	contract?	7f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	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		
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
)	Section 501(c)(7) organizations. Enter Instruction foce and capital contributions included on Part VIII. line 12			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	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			
c	In which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand	_		
la	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a 14b		1110

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.

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax			
Ia	year			
b	Enter the number of voting members included in line 1a, above, who are independent			
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	110
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a		Νo
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			
а	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
	ction B. Policies (This Section B requests information about policies not required by the Internal			
Re	venue Code.)			
			Yes	No
	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		103	
42-	Describes a second seco	42-	V	
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	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?			
а	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)			
	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		
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶WI			
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 V Upon request

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

The Association 1211 Connecticut Avenue NW 200

Washington, DC 200362716

(202)833-2787

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

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

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

- ◆ 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	(C) Position (check all that apply)						(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
(1) Mike Ross Chair	1 00	Х		Х				0	0	0
(2) Josh LaBelle Vice Chair	1 00	Х		Х				0	0	0
(3) Arlynn Fishbaugh Vice Chair	1 00	Х		х				0	0	0
(4) Abel Lopez Treasurer	1 00	Х		х				0	0	0
(5) Sandra Gibson President & CEO	40 00	Х		х				229,625	0	22,428
(6) Jim Copenhaver Director	1 00	Х						0	0	0
(7) Adrian Ellis Executive Director	1 00	Х						0	0	0
(8) Nicole Borrelli Hearn Director	1 00	Х						0	0	0
(9) Emil Kang Director	1 00	Х						0	0	0
(10) Larry Kosson Director	1 00	Х						0	0	0
(11) Eric Lariviere Director	1 00	Х						0	0	0
(12) Steve Levine Director	1 00	Х						0	0	0
(13) Aimee M Petrin Director	1 00	Х						0	0	0
(14) Colleen Porter Director	1 00	Х						0	0	0
(15) Malik Robinson Director	1 00	х						0	0	0
(16) Alison Spiriti Director	1 00	х						0	0	0

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

(A) Name and Title	(B) A verage hours		tion that a	•		ll		(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
(17) Johann Zietsman Director	1 00	х						0	0	0
(18) Dr Michael Blachly Director	1 00	х						0	0	0
(19) Aaron P Dworkin Director	1 00	х						0	0	0
(20) Stephanie S Hughley Director	1 00	х						0	0	0
(21) Dr Maria Rosario Jackson Director	1 00	х						0	0	0
(22) Terri M Trotter Director	1 00	х						0	0	0
(23) Todd Wetzel Director	1 00	х						0	0	0
(24) Malinda Lambert Finance & Operating Direct	40 00			х				86,520	0	11,920
(25) Scott Stoner Chief Programs Officer	40 00			х				61,923	0	7,762
(26) Joseph F Rooney Chief Operating Officer	40 00			х				32,780	0	1,878
(27) Karı Rudgers Director	40 00			х				105,000	0	6,434
(28) Leah Frelinghuyser Director	40 00			х				81,600	0	10,860
1b Sub-Total							•			
c Total from continuation sheets	to Part VII, Sect	ion A .				F				
d Total (add lines 1b and 1c) .								597,448	0	61,282

\$100,000 in reportable compensation from the organization >2

			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		Νo
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			
	ındıvıdual	4	Yes	
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 I for such person	5		Νo

Section B. Independent Contractors

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

(A)	(B)	(C)
Name and business address	Description of services	Compensation
1211 Financial Associates LLC 1233 20th Street NW Ste 207 Washington, DC 20036	Rent Expense	277,553
Hilton New York & Towers 1335 Sixth Ave New York, NY 10019	APAP 2010 Hotel Conference	237,294
MRA Services PO Box 389 Woodinville, WA 98072	Registration System	109,095
More Productive Now LLC 12154 Darnestown Road Suite 140 Gaithersburg, MD 20878	IT Consultant	105,000
GES 7000 Lindell Road Las Vegas, NV 89118	Exhibit Hall Decorator	101,852
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 $\blacktriangleright 5$

Form 99	•	2010) Statement of Revenu	10				P	age 9
Pait V		Statement of Revent	ic		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	excluded from tax under sections 512, 513, or
Contributions, gifts, grants and other similar amounts	b c d e f	Federated campaigns	. 1c . 1d . 1e and 1f nes 1a-1f \$	706,433	1,536,476			514
<u>a</u>		Annual Conference Continuing Education All other program service review Total. Add lines 2a-2f		711190 711190	1,649,105 4,950 1,654,055	4,950		
	4 5 6a b	Investment income (including and other similar amounts) Income from investment of tax-excended and similar amounts. Royalties	empt bond proceeds	(II) Personal	35,694			35,694
	7a b c d	Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss) Net gain or (loss) Gross income from fundraising	(i) Securities 1,668,460 1,673,982 -5,522	(II) O ther	-5,522			-5,52
	c 9a b c 10a	(not including \$ of contributions reported on I See Part IV, line 18 Less direct expenses Net income or (loss) from fur Gross income from gaming a Less direct expenses Net income or (loss) from ga Gross sales of inventory, les returns and allowances . Less cost of goods sold . Net income or (loss) from sa	a b draising events ctivities See Part IV, line 19 . a b ming activities a					
	11a b c	Miscellaneous Revenue Publications Other income		Business Code 541800 900099	162,956 132,899	132,899		
		Total revenue. See Instruction	▶		295,855 3,516,558	1,817,895	132,015 orm 990 (2	

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

Δ	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 no	ot include amounts reported on lines 6b, p, 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	1,542,164	1,542,164						
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	654,352	462,673	118,973	72,706				
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	268,402	189,780	48,800	29,822				
8	Pension plan contributions (include section $401(k)$ and section $403(b)$ employer contributions)	41,580	29,400	7,560	4,620				
9	Other employee benefits								
10	Payroll taxes	65,050	45,995	11,827	7,228				
а	Fees for services (non-employees) Management								
b	Legal								
С	Accounting								
d	Lobbying								
е	Professional fundraising services See Part IV, line 17								
f	Investment management fees								
g	Other	851,901	785,380	41,289	25,232				
12	Advertising and promotion	134,280	134,280						
13	Office expenses	87,247	76,286	6,658	4,303				
14	Information technology								
15	Royalties								
16	Occupancy	416,122		56,754	34,683				
17	Travel	388,690	377,979	3,795	6,916				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials								
19	Conferences, conventions, and meetings	150		20					
20	Interest	160	113	29	18				
21	Payments to affiliates	100 345	127 547	22.700	30.030				
22 23	Depreciation, depletion, and amortization	180,345	127,517 92,956	32,790	20,038				
23 24	Insurance	127,521	92,936	21,454	13,111				
а	Honoraria	192,856	192,624	144	88				
b	Other Expenses	134,533	109,749	13,057	11,727				
c	Dues and Registration	18,812	17,734	669	409				
d	Publications	351	261	56	34				
е	Taxes	218	154	40	24				
f	All other expenses	_							
25	Total functional expenses. Add lines 1 through 24f	5,104,584	4,509,730	363,895	230,959				
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								

Pa	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			7,511	1	100,227
	2	Savings and temporary cash investments		2,393,986	2	1,950,716	
	3	Pledges and grants receivable, net	•		773,598	3	342,500
	4	Accounts receivable, net			29,738	4	32,711
	5	Receivables from current and former officers, directors, trustees highest compensated employees Complete Part II of					
		Schedule L				5	
sts	6	Receivables from other disqualified persons (as defined under sepersons described in section $4958(c)(3)(B)$, and contributing ensponsoring organizations of section $501(c)(9)$ voluntary employorganizations (see instructions)	rs, and				
		Schedule L				6	
Assets	7	Notes and loans receivable, net \ldots \ldots \ldots \ldots .				7	
As	8	Inventories for sale or use			9,224	8	8,793
	9	Prepaid expenses and deferred charges			34,430	9	115,819
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a	1,004,459			
	b	Less accumulated depreciation	10b	432,201	594,383	10c	572,258
	11	Investments—publicly traded securities	761,936	11	987,373		
	12	Investments—other securities See Part IV, line 11	282,179	12	60,657		
	13	Investments—program-related See Part IV, line 11		13			
	14	Intangible assets			14		
	15	Other assets See Part IV, line 11	23,305	15	23,305		
	16	Total assets. Add lines 1 through 15 (must equal line 34)	4,910,290	16	4,194,359		
	17	Accounts payable and accrued expenses .			151,027	17	100,251
	18	Grants payable			104,373	18	768,423
	19	Deferred revenue			386,895	19	507,621
	20	Tax-exempt bond liabilities				20	
Se	21	Escrow or custodial account liability Complete Part IV of Schedule	eD.	-		21	
bilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
Lial		persons Complete Part II of Schedule L	•		22		
	23	Secured mortgages and notes payable to unrelated third parties		•		23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D			162,141	25	164,229
	26	Total liabilities. Add lines 17 through 25			804,436	26	1,540,524
5		Organizations that follow SFAS 117, check here ▶ 🔽 and comp	ete lir	nes 27			
ê)		through 29, and lines 33 and 34.					
Balance	27	Unrestricted net assets			1,012,402	27	1,017,951
Ba	28	Temporarily restricted net assets			2,315,457	28	846,268
Fund	29	Permanently restricted net assets			777,995	29	789,616
Fui		Organizations that do not follow SFAS 117, check here ▶ ┌ and	d comp	olete			
2		lines 30 through 34.					
	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund .	•			31	
	32	Retained earnings, endowment, accumulated income, or other fu	nds			32	
Net	33	Total net assets or fund balances			4,105,854	33	2,653,835
	34	Total liabilities and net assets/fund balances			4,910,290	34	4,194,359

Par	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)			2.5	
2	Total expenses (must equal Part IX, column (A), line 25)	2			.04,584
3	Revenue less expenses Subtract line 2 from line 1	3			, 588,026
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		4,1	.05,854
5	Other changes in net assets or fund balances (explain in Schedule O)	5		1	.36,007
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		2,6	553,835
Par	Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII			৮	
				Yes	No
1	Accounting method used to prepare the Form 990				
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 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	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were on a separate basis, consolidated basis, or both	issued			
	▼ Separate basis				
За	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?	ie	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b		

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DLN: 93493136050702

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

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.

Inspection

Employer identification number

Association of Performing Arts Presenters 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) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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 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) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) 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) An organization organized and operated exclusively to test for public safety Seesection 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of 11 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 Type I **b** Type II Type III - Other 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) 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 Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No 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	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you not organizati col (i) of suppor	ion in your	organizati col (i) orga	(vi) Is the organization in col (i) organized in the U S ?	
		instructions))	Yes	No	Yes	No	Yes	No	
Total									

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.)

S	ection A. Public Support		and to quanty t			out complete	
	endar year (or fiscal year beginning						
Care	in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	ınclude any "unusual						
	grants ")						
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						
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						
Ū	line 4						
S	ection B. Total Support		<u> </u>	I I.			
	endar year (or fiscal year beginning						
	ın) >	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	A mounts from line 4						
8	Gross income from interest,						
Ū	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
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)						
11	Total support (Add lines 7						
	through 10)					<u> </u>	
12	Gross receipts from related activiti	es, etc (See inst	ructions)			12	
13	First Five Years If the Form 990 is t	for the organizati	on's first, second	, thırd, fourth, or	fifth tax year as a	501(c)(3) organı	
	check this box and stop here						►
	-tiC Ct-tiC D-l	L'a Carana at B					
<u> </u>	ection C. Computation of Pub Public Support Percentage for 2010			11 column (f))			
	· ·		•	II Column (1))		14	
15	Public Support Percentage for 2009	Schedule A, Pa	rt II, line 14			15	
16a	33 1/3% support test—2010. If the				line 14 is 33 1/3%	or more, check	
_	and stop here. The organization qua						▶ □
b	33 1/3% support test—2009. If the				5a, and line 15 is 3	33 1/3% or more,	- -
	box and stop here. The organization				45.46		►
1/a	10%-facts-and-circumstances test-						
	is 10% or more, and if the organization made						rt a d
	in Part IV how the organization mee	ts the "racts and	circumstances"	test ine organiz	ration qualifies as	a publicly suppo	
L	organization	_2000 If+ba a	anization did not	chack a hay an l	no 12 165 166 -	r 17a and line	► □
D	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ						
	Explain in Part IV how the organization						v
	supported organization	aon meets the 10	acts and circuilis	tances test fill	z organizacion qual	mes as a publici	y ▶[¯
18	Private Foundation If the organizati	on did not check	a box on line 13	. 16a. 16b. 17a o	r 17b, check this	box and see	- 1
	instructions	on ala not check	a box on fine 15	, 100, 100, 1700	I by check tills	SON GING SCC	▶ □

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.)

Se	ection A. Public Support				,		
Cale	ndar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	2,208,651	2,434,894	3,956,739	2,005,753	1,536,476	12,142,51
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	2,406,637	1,749,163	1,639,560	1,590,405	1,654,055	9,039,82
3	Gross receipts from activities that are not an unrelated trade or						
4	business under section 513 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	4,615,288	4,184,057	5,596,299	3,596,158	3,190,531	21,182,33
	A mounts 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 7 c from line 6)						21,182,33
	ection B. Total Support	1		1	1	Т	
Cale	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6	4,615,288	4,184,057	5,596,299	3,596,158	3,190,531	21,182,33
l0a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	168,802	122,918	68,281	95,934	35,694	491,62
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	168,802	122,918	68,281	95,934	35,694	491,62
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)	88,992	64,913	85,495	123,218	163,840	526,45
13	Total support (Add lines 9, 10c,	4,873,082	4,371,888	5,750,075	3,815,310	3,390,065	22,200,42
14	11 and 12) First Five Years If the Form 990 is check this box and stop here	for the organization	on's first, second,	thırd, fourth, or f	Ifth tax year as a	section501(c)(3) organization, ▶┌
Se	ection C. Computation of Pub	lic Support Pe	ercentage				
15	Public Support Percentage for 2010			13 column (f))		15	95 410 %
16	Public support percentage from 200	9 Schedule A , Pa	art III, line 15			16	95 400 %
Se	ection D. Computation of Inv						
17	Investment income percentage for	•		•	(f))	17	2 210 %
18	Investment income percentage from					18	2 500 %
19a	33 1/3% support tests—2010. If the					han 33 1/3% and	line 17 is not

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

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).

Schedule A (Form 990 or 990-EZ) 2010

Additional Data

Software ID: Software Version:

EIN: 39-1131995

Name: Association of Performing Arts Presenters

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

4d. Other program	services				
(Code) (Expenses \$	508,218	including grants of \$) (Revenue \$	132,899)
•	es - Membership services-Ac nagement Revenue is compri		clusive of research & developme	ent, information services, APA	P 365, and

DLN: 93493136050702

OMB No 1545-0047

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

Political Campaign and Lobbying Activities

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

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, Line 3, or 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.

			Employerider	ntification number
sociation of Performing Arts Presenters			39-1131995	
t I-A Complete if the or	ganization is exempt und	er section 501(c) or is a section 527	organization.
Provide a description of the org	ganızatıon's dırect and ındırect p	olitical campaign act	tivities in Part IV	
Political expenditures			▶	\$
V olunteer hours				
Complete if the or	ganization is exempt und	er section 501((c)(3).	
	<u> </u>	_		\$
				\$
				☐ Yes ☐ No
Was a correction made?	,	ŕ		☐ Yes ☐ No
If "Yes," describe in Part IV				
rt I-C Complete if the or	ganization is exempt und	er section 501(c) except section 50	1(c)(3).
Enter the amount directly expe	ended by the filing organization fo	r section 527 exem	pt function activities 🕨	\$
Enter the amount of the filing o exempt funtion activities	rganization's funds contributed t	o other organization	s for section 527	\$
Total exempt function expendit	tures Add lines 1 and 2 Enter h	ere and on Form 112	20-POL, line 17b ►	¢
Did the filing organization file F	Form 1120-POL for this year?			→
amount of political contribution	ns received that were promptly a	nd directly delivered	l to a separate political orga	anızatıon, such as a
(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
	Provide a description of the ore Political expenditures Volunteer hours TI-B Complete if the ore Enter the amount of any excise Enter the amount of any excise If the organization incurred as Was a correction made? If "Yes," describe in Part IV TI-C Complete if the ore Enter the amount directly expendent the amount of the filing of exempt function expending the filing organization file in Enter the names, addresses and organization made payments is amount of political contribution separate segregated fund or a	Provide a description of the organization's direct and indirect proportional expenditures Volunteer hours **TI-B** Complete if the organization is exempt under the amount of any excise tax incurred by the organization in the organization incurred a section 4955 tax, did it file Form Was a correction made? If "Yes," describe in Part IV **TI-C** Complete if the organization is exempt under the amount directly expended by the filing organization for a section activities Total exempt function expenditures Add lines 1 and 2 Enter hold the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number organization made payments. For each organization listed, enter amount of political contributions received that were promptly as separate segregated fund or a political action committee (PAC).	Provide a description of the organization's direct and indirect political campaign ac Political expenditures Volunteer hours **TI-B** Complete if the organization is exempt under section 501(Enter the amount of any excise tax incurred by the organization under section 495 Enter the amount of any excise tax incurred by organization managers under section 195 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Was a correction made? If "Yes," describe in Part IV **TI-C** Complete if the organization is exempt under section 501(Enter the amount directly expended by the filing organization for section 527 exement the amount of the filing organization's funds contributed to other organization exempt funtion activities Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 11: Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section organization made payments. For each organization listed, enter the amount paid from amount of political contributions received that were promptly and directly delivered separate segregated fund or a political action committee (PAC). If additional spaces.	TIBLE Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Was a correction made? If "Yes," describe in Part IV **I-C** Complete if the organization is exempt under section 501(c) except section 502 Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organization organization made payments For each organization listed, enter the amount paid from the filing organization's amount of political contributions received that were promptly and directly delivered to a separate political organization's separate segregated fund or a political action committee (PAC) If additional space is needed, provide information filing organization's filing organization's

section 4911 tax for this year?

┌ Yes ┌ No

Ρ	art II-A Complete if the organization under section 501(h)).	is exempt under section 501(c)(3) a	nd filed Form 5768	(election
	Check I if the filing organization belongs to a			
<u>B</u>	Check I if the filing organization checked bo Limits on Lobbying E (The term "expenditures" means an		(a) Filing O rganization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	opinion (grass roots lobbying)	75,750	
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)	33,267	
c	Total lobbying expenditures (add lines 1a and 1	b)	109,017	
d	Other exempt purpose expenditures		4,995,567	
е	Total exempt purpose expenditures (add lines 1	c and 1d)	5,104,584	
f	Lobbying nontaxable amount Enter the amount columns	from the following table in both	405,229	
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxable amount is: 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		
	Grassroots nontaxable amount (enter 25% of lir	ne 1f)	101,307	
h	Subtract line 1g from line 1a If zero or less, ent	er -0 -	0	
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -	0	

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.)

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting

	Lobbying Expendit	ures During 4	l-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a	Lobbying non-taxable amount	370,156	380,394	388,684	405,229	1,544,463
b	Lobbying ceiling amount (150% of line 2a, column(e))					2,316,695
c	Total lobbying expenditures	104,616	120,864	128,797	109,017	463,294
d	Grassroots non-taxable amount	92,539	95,099	97,171	101,307	386,116
е 	Grassroots ceiling amount (150% of line 2d, column (e))					579,174
f	Grassroots lobbying expenditures	77,460	66,388	79,563	75,750	299,161

che	edule C (Form 990 or 990-EZ) 2010				Pί	age 3
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has N (election under section 501(h)).	IOT fi	led F	orm	5768	3
		(;	a)		(b)	
		Yes	No	, F	Amoun	it
L	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?					
b c	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?			-		
	Mailings to members, legislators, or the public?		\vdash	+-		
			\vdash	+-		
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?		<u> </u>	₩		
h i	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? If "Yes," describe in Part IV		 	\vdash		
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)?		I			
	If "Yes," enter the amount of any tax incurred under section 4912			┨		
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		I			
	t III-A Complete if the organization is exempt under section 501(c)(4), section 5	01/6	1(5)			
	501(c)(6).	J)10-	<u>,,,,,</u>			
			_	_	Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		- L	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		L	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3		
² aı	t III-B Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part II answered "Yes".				ectio	n
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).					
а	Current year	2a				
b	Carryover from last year	2b				
c	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4				

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 11

Identifier | Return Reference | Explanation

Part IV Supplemental Information

Also, complete this part for any additional information

5 Taxable amount of lobbying and political expenditures (see instructions)

5

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DLN: 93493136050702

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

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

Open to Public

nai Revenue Service	P Attach to Fe	orm 990. F See separate instructions.		Tushection
ame of the organizates sociation of Performing A	t ion rts Presenters		Employer identificat	ion number
			39-1131995	0 1 1 6 11
	ations Maintaining Donor A ion answered "Yes" to Form 99	dvised Funds or Other Similar Fo	unds or Accounts.	Complete if the
Organizat	ion answered res to rorm 55	(a) Donor advised funds	(b) Funds and ot	her accounts
Total number at e	nd of year		, ,	
Aggregate contrib	utions to (during year)			
Aggregate grants	from (during year)			
Aggregate value a	t end of year			
		isors in writing that the assets held in don organization's exclusive legal control?	or advised	┌ Yes ┌ No
used only for char conferring imperm	ritable purposes and not for the ben pissible private benefit	donor advisors in writing that grant funds lefit of the donor or donor advisor, or for a	ny other purpose	┌ Yes ┌ No
rt III Conserv	ation Easements. Complete	if the organization answered "Yes" t	o Form 990, Part IV,	line 7.
Preservation Protection of Preservation	servation easements held by the o of land for public use (e g , recreatinatural habitat of open space a-2d if the organization held a qual	ion or pleasure)	n historically importantlicertified historic struction	-
easement on the l	ast day of the tax year		11-11-1-1-1	
Total number of c	onservation easements		2a Heid at the i	end of the Year
	tricted by conservation easements		2b	
	vation easements on a certified his	` `	2c	
	vation easements included in (c) a		2d	
		erred, released, extinguished, or terminate	ed by the organization d	urıng
the taxable year	<u> </u>			
Number of states	where property subject to conserva	ation easement is located ►		
	ation have a written policy regarding e conservation easements it holds	g the periodic monitoring, inspection, hand ?	dling of violations, and	┌ Yes ┌ No
Staff and voluntee	er hours devoted to monitoring, insp	pecting and enforcing conservation easem	nents during the year 🛌	
A mount of expens	ses incurred in monitoring, inspecti	ng, and enforcing conservation easements	s during the year ► \$ _	
	rvation easement reported on line 2 nd 170(h)(4)(B)(ii)?	2(d) above satisfy the requirements of sec	ction	┌ Yes ┌ No
balance sheet, an		onservation easements in its revenue and the footnote to the organization's financial ments		
t IIII Organiza Complete	ations Maintaining Collection if the organization answered '	ons of Art, Historical Treasures, "Yes" to Form 990, Part IV, line 8.	or Other Similar A	ssets.
art, historical trea	sures, or other sımılar assets held	116, not to report in its revenue stateme for public exhibition, education or research nancial statements that describes these it	ch in furtherance of pub	
historical treasure		i 116, to report in its revenue statement a public exhibition, education, or research i s		
(i) Revenues incl	uded in Form 990, Part VIII, line 1		► \$	
(ii) Assets includ	ed ın Form 990, Part X		F \$	
If the organization	·	orical treasures, or other similar assets fo S 116 relating to these items		
Revenues include	d in Form 990, Part VIII, line 1		► \$	
Assets included i	n Form 990, Part X			
			· · · · ———	

Part	•••• Organizations Maintaining Co	llections of Art	t, His	tori	<u>cal Tr</u>	easu	res, or O	<u>the</u>	<u>r Similar <i>F</i></u>	\sse	ts (co	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	ne fol	lowing t	hat are	e a sıgnıfıca	nt us	se of its colle	ection	1	
а	Public exhibition		d	\vdash	Loan	rexch	nange progra	ams				
b	Scholarly research		е	Γ	Other							
c	Preservation for future generations											
4	Provide a description of the organization's co	ollections and expla	ain hov	w the	y furthe	r the o	rganızatıon	s ex	empt purpos	e in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t								ılar	Γ,	Yes	┌ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an	ements. Compl	ete ıf	the	organi	zation			es" to Form	990),	
1a	Is the organization an agent, trustee, custoc included on Form 990, Part X?	lian or other interm	edıary	forc	ontribut	tions o	or other ass	ets r	not	Γ,	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	/ and complete the	follow	ving t	able		_					
							F			Amou	nt	
С	Beginning balance						-	1c				
d	Additions during the year						—	1d				
е	Distributions during the year						<u> </u>	1e				
f	Ending balance						L	1f				
2a	Did the organization include an amount on Fo	orm 990, Part X, lin	e 21?							Γ,	Yes	┌ No
	If "Yes," explain the arrangement in Part XIV											
Pa	rt V Endowment Funds. Complete										_	
		(a) Current Year 760,928	(b)Prior	Year 681,424	(c)Tw	o Years Back 820,12	_	Three Years Ba	<u>ck (e</u>))Four Ye	ears Back
1a	Beginning of year balance				001,424		· ·	+		+		
b	Contributions	11,621			70.504		12,569	+		$+\!\!-$		
c	Investment earnings or losses	139,302			79,504		-151,266	1		+		
d	Grants or scholarships							_		+		
е	Other expenditures for facilities and programs											
f	Administrative expenses									\perp		
g	End of year balance	911,851			760,928		681,424	1				
2	Provide the estimated percentage of the year	r end balance held	as									
а	Board designated or quasi-endowment 🕨											
b	Permanent endowment ► 86 500 %											
С	Term endowment ► 13 500 %											
За	Are there endowment funds not in the posse	ssion of the organiz	ation	that a	are held	and a	dministered	for	the			
	organization by								_		Yes	No
	(i) unrelated organizations							٠	_	Ba(i)		No
	(ii) related organizations								[3	a(ii)	 	No
	If "Yes" to 3a(II), are the related organization Describe in Part XIV the intended uses of the	•						•		3b		
4	t VI Investments—Land, Building:)() Do	rt V line	10				
Par	LVI investments—Land, Buildings	s, and Equipme	int. S				1			1		
	Description of investment				a) Cost or sıs (ınves		(b)Cost or o basis (othe		(c) Accumula depreciatio		(d) Bo	ok value
1a	Land		•									
b	Buildings		•									
c	Leasehold improvements		•				67	,988	2!	5,499		42,489
d I	Equipment						99	,413	83	3,231		16,182
	Other						837	,058	323	3,471		513,587
Tota	I. Add lines 1a-1e <i>(Column (d) should equal Fo</i>	orm 990, Part X, colu	mn (B,), line	10(c).)				•			572,258
									Schedule	<u>D</u> (F	orm 9	90) 2010

Part VII Investments—Other Securities. See	Form 990, Part X, line 1	2.
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1) Financial derivatives		
(2)Closely-held equity interests Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		
Part VIII Investments—Program Related. See		13.
(a) Description of investment type	(b) Book value	(c) Method of valuation
——————————————————————————————————————	(b) Book value	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, III	ne 15.	
(a) Descrip	otion	(b) Book value
		<u> </u>
		<u> </u>
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1		
Part X Other Liabilities. See Form 990, Part >		
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes		
Deferred Rent and Lease Incentive	164,229	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	164,229	
2 Fin 49 (ASC 740) Footpote In Part VIV provide the toy		orzation's financial statements that reports the

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	3,516,558
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	5,104,584
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-1,588,026
4	Net unrealized gains (losses) on investments	4	136,007
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	136,007
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-1,452,019
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue	er Retur	n
1	Total revenue, gains, and other support per audited financial statements	1	3,652,565
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
е	Add lines 2a through 2d	2e	136,007
3	Subtract line 2e from line 1	3	3,516,558
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
C	Add lines 4a and 4b	4c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	3,516,558
	Reconciliation of Expenses per Audited Financial Statements With Expenses	s per Ret	
1	Total expenses and losses per audited financial statements	1	5,104,584
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIV) 2d		
е	Add lines 2a through 2d	2e	C
3	Subtract line 2e from line 1	3	5,104,584
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	C
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	5,104,584
Pai	t XIV Supplemental Information		

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

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 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
Description of Intended Use of Endowment Funds		There are two endowment funds, the Classical Connections Endowment and the William Dawson Education Endowment The Classical Connections Endowment primarily supports the Young Performers Career Advancement Program (YPCA) which combines seminars, group discussions, workshops and a showcase at Carnegie Hall to immerse a selected group of promising young artists into the world of performing arts. The funds support faculty fees, travel, expenses, audio-visual service, recital hall rental, production and reception expenses for the YPCA program in New York City. The William Dawson Education Endowment funds an annual research internship program for graduate students. The program identifies an issue or topic of importance to the presenting field, a team of students conducts research on that topic, and presents their findings in a session at the annual Association of Performing Arts Presenters members conference in New York City. The Endowment funds provide stipends and travel support for students to conduct and present their research.

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Schedule I (Form 990)

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

OMB No 1545-0047

DLN: 93493136050702

Department of the Treasury Internal Revenue Service

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

Name of the organization						Employer identi	fication number
Association of Performing Arts P	resenters					39-1131995	
Part I General Inform	ation on Gran	ts and Assistance				L	
 Does the organization main the selection criteria used Describe in Part IV the org 	to award the grant	s or assistance?					▽ Yes □
Part II Grants and Othe Form 990, Part IV duplicated if addit	, line 21 for any	recipient that receiv	ed more than \$5,00	0. Check this box if	es. Complete if the or no one recipient rece	eived more than \$5,	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Cal State University Long Beach6300 State University Drive Suite 332 Long Beach, CA 90815	95-6106694	501(c)(3)	241,911				Creative Campus Innovations Grant II
(2) Cuyahoga Community College700 Carnegie Avenue Cleveland,OH 44115	23-7320719	501(c)(3)	251,670				Creative Campus Innovations Grant II
(3) Montclair State Univesity FoundationOne Normal Avenue Montclair, NJ 07043	22-6017209	501(c)(3)	251,670				Creative Campus Innovations Grant II
(4) Penn State University Suite 202 James M Elliott Building University Park, PA 16802	24-6000376	501(c)(3)	251,670				Creative Campus Innovations Grant II
(5) Ohio State University 1871 North High Street Columbus, OH 43210	31-6025986	501(c)(3)	140,000				Creative Campus Innovations Grant II
(6) Tampa Bay Performing Arts Center1010 North WC MacInnes Place Tampa,FL 33602	59-2037085	501(c)(3)	10,000				MetLife Arts Access Award
(7) Stanford University Stanford University 537 Lomita Mall Mall Stanford, CA 94305	94-1156365	501(c)(3)	20,000				Creative Campus Sustainability Grant
(8) Flynn Center for the Performing Arts153 Main Street Burlington, VT 05401	03-0277052	501(c)(3)	20,000				Met Life and Cultural Exchange Fund
(9) John Michael Kohler Arts Center608 New York Ave Sheboygan, WI 53081	39-1085180	501(c)(3)	10,000				M et life
(10) University of California Santa BarbaraUC Santa Barbara Santa Barbara, CA 93106	95-6006145	501(c)(3)	10,000				M et Life
(11) Helena PrsentsMyrna Loy15 N Ewing Helena, MT 59601	51-0185430	501(c)(3)	8,000				Cultural Exchange Fund
(12) University of Michigan (UMS)881 North University Avenue Ann Arbor, MI 48109	38-1545881	501(c)(3)	251,670				Creative Campus Innovations Grant II

Enter total number of other organizations

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

or assistance	(b)Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
	ir assistance		r assistance (b)Number of recipients (c)A mount of cash grant	rassistance (b)Number of recipients (c)A mount of cash grant (d)A mount of non-cash assistance	recipients cash grant non-cash assistance (book,

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		Schedule I, Part I, Line 2 The organization provides funding support in three separate program areas as follows - note applications for all grants programs are subject to an external panel review and include a contract which specifies adherence to APAP policy of use for expenditures (including travel) as well as programmatic and financial reporting requirements. The Creative Campus Innovations Program grants funds to campus-based arts presenters for the development and implementation of projects that exemplify innovative approaches to integrating the arts across the academy (campus community). In addition to interim and final reporting requirements, APAP staff and the funding foundation's representative conduct evaluator site visits. The Cultural Exchange Fund grants travel subsidies to individuals and groups for purposes of traveling internationally to see the work of artists and meet with presenting colleagues to foster potential presenting and touring opportunities for international artists in the U.S. The group award of up to \$10,000 is made to the lead organization of a group from a minimum of three presenting organizations for travel to an international arts festival or event - funds are only to be used to cover air and ground transportation, per diem, and performance tickets or registration fee. The APAP/MetLife Arts Access Awards Program provides awards to non-profit arts presenting organizations (who are also members of APAP) who have demonstrated exemplary strategies for engaging audiences with disabilities or underserved populations in the performing arts. Documentation of outcomes of all grantees and awardees in the programs cited above is available on APAP's web site.

DLN: 93493136050702

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990,

Part IV, question 23. ► Attach to Form 990. ► See separate instructions. Open to Public Inspection

Name of the organization Association of Performing Arts Presenters **Employer identification number**

39-1131995

Pa	Questions Regarding Compensation	n				
					Yes	Νo
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part II.					
	First-class or charter travel	Γ	Housing allowance or residence for personal use			
	Travel for companions	\sqcap	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the or reimbursement orprovision of all the expenses desc			1b		
2	Did the organization require substantiation prior to officers, directors, trustees, and the CEO/Executive			2		
3	Indicate which, if any, of the following the organizationganization's CEO/Executive Director Check all the Compensation committee					
	Independent compensation consultant	 ▼				
	Form 990 of other organizations	<u>ام</u>	Approval by the board or compensation committee			
	1 offin 550 of other organizations	,,	Approval by the board of compensation committee			
4	During the year, did any person listed in Form 990, or a related organization	Part VII	, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	paymen	it from the organization or a related organization?	4a		No
b	Participate in, or receive payment from, a suppleme	ntal non	qualified retirement plan?	4b		No
c	Participate in, or receive payment from, an equity-b	ased co	mpensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and pr					
	Only 501(c)(3) and 501(c)(4) organizations only me	ust comp	olete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	line 1a,	did the organization pay or accrue any			
а	The organization?			5a		No
b	Any related organization?			5b		No
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	line 1a,	did the organization pay or accrue any			
а	The organization?			6a		No
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes,"			7		No
8	Were any amounts reported in Form 990, Part VII,					
	subject to the initial contract exception described in Part III	n Regs s	section 53 4958-4(a)(3)? If "Yes," describe			
				8		No
9	If "Yes" to line 8, did the organization also follow th section 53 4958-6(c)?	e rebutta	able presumption procedure described in Regulations	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base (ii) Bonus & incentive compensation		(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(1) Sandra Gıbson	(I) (II)	229,625 0	0	0	11,481	10,947 0	252,053 0	0
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

Schedule J (Form 990) 2010 Page **3**

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

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Schedule J (Form 990) 2010

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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.

2010

Open to Public Inspection

Name of the organization Association of Performing Arts Presenters	Employer identification number
Association of Performing Arts Presenters	39-1131995

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, Iine 6		The Association shall have two categories of members (i) Voting Members and (ii) Nonvoting Members Voting Membership in the Association shall be open to any individual or organization that operates in the performing arts, presenting or touring industries. Additional membership classifications shall be determined by the Board of Directors. Each Voting Member shall be entitled to one voting representative. Each voting representative shall have one vote upon each distinct matter included as an agenda item in a Written Ballot and/or submitted to a vote at meetings of the members as provided herein. All other representatives shall have the privilege of the floor but shall not be entitled to vote at meetings of the members. The Board of Directors shall have the power to set dues for one or more categories of membership and may vary the amount of dues among such categories of members. However, dues set for members must be subsequently ratified by a simple majority of the Voting Members represented at a regular or special meeting of the members as set forth herein.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 7b		There are a couple of decisions that are made by the governing body which are subject to member approval in accordance with the Organization's bylaws. Those decisions are in regard to changes to membership dues or changes to the Organization's bylaws. These two types of decisions, once made by the governing board, are subject to member ratification. Members must vote and approve any such changes as described herein.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		A copy of the Form 990 is circulated to the organization's Board Treasurer and President/CEO for review Upon finalization/approval, the Form 990 is signed by the President/CEO

Identifier	Return Reference	Explanation
		The Association of Performing Arts Presenters has a conflict of interest statement which is signed by board members annually. The conflict of interest statement was most recently updated in 2009. The staff is currently in the process of canvassing the Members of the Board of Directors on any areas of potential conflict.

ldentifier	Return Reference	Explanation						
	Form 990, Part VI, Section B, line 15	Arts Presenters President and CEO's annual performance evaluation is conducted prior to the end of each fiscal year. In April 2011, Sandra Gibson, Arts Presenter's President and CEO announced she would not seek to renew her contract. Therefore, the focus of the board's Executive Committee turned to planning for the CEO's departure, establishing criteria for the hire of a new President and CEO, and filling the office with an interim CEO. The typical review process involves the President and CEO's self assessment in response to a set of priorities and annual operating plan established by the board of directors along with the annual unaudited financial statement. The Executive Committee reviews the CEO's performance on the accomplishments and challenges of the previous year. As a part of the review process, the President and CEO also provides documentation on salary/compensation of comparable performance arts service organizations to determine any change in CEO compensation. The recommendation to continue the CEO written employment contract is based on the Executive Committee's assessment of the CEO and approval by the board. The President and CEO tracks and monitors the progress through monthly conference calls with the Executive Committee, and weekly conference calls with the chair of the board. In June 2011, APAP President & CEO Sandra Gibson, ended her service to the association. To promote a smooth and seamless transition, Gibson was retained at Arts Presenters as a special consultant from July 1, 2011–0ctober 31, 2011. The executive's role transitioned to one of supporting the organization on an as-needed basis at the direction of an Interim CEO while the APAP Board of Directors implemented a transition plan to move the association to its next phase. As a part of the plan, the board established the "APAP Future Working Group," a steering committee that worked closely with the full board, staff and members to guide the association's pathway of change and advancement. A search committee was also formed to sele						

Identifier	Return Reference	Explanation
	Form 990, Part VI, Section C, line 19	The Association makes its governing documents and conflict of interest policy available to the public upon request. The Association makes its audited financial statements available to the public on its wiebsite.

ldentifier	Return Reference	Explanation
Changes in Net Assets or Fund Balances	Form 990, Part XI, line 5	Net unrealized gains on investments 136,007

ĺ	ldentifier	Return Reference	Explanation
I		Form 990, Part XII, Line 2c	The process has not changed from prior year

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DLN: 93493136050702

2010

OMB No 1545-0047

Open to Public Inspection

Employer identification number

SCHEDULE R (Form 990)

Name of the organization

Association of Performing Arts Presenters

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service

				39-1131995			
Part I Identification of Disregarded Entities (Com	plete if the organization	on answered "Yes"	on Form 990, Pa				
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity		
							,
Part II Identification of Related Tax-Exempt Organ or more related tax-exempt organizations during		I If the organization	answered "Yes" (on Form 990, Part	IV, line 34 becaus	se it had	one
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity		g) 512(b)(13 trolled nization
(1) Performing Arts Alliance Inc (PAA) 1211 Connecticut Avenue NW Washington, DC 20036 52-1101177	Management fees to cover cost of salaries, fringe benefits, rent & utilties	DC	501(c)(4)			Yes	No
For Privacy Act and Paperwork Reduction Act Notice, see the Instruc	tions for Form 990.	Cat No 50	135Y		Schedule R (I	 Form 990`	2010

Part III Identifi because	ication of Relat it had one or mo	ed Organie	anizations Taxa ted organizations t	ble as a Partner reated as a partne	ship (Co ership du	mplete if ring the t	the org ax year	ganızatıon (r.)	answe	ered "\	es" on Fo	rm 990,	Part	IV, lır	ne 34				
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	elated, m tax Snare of total income Snare of end- assets		(g) Share of end-of-year assets						(h) Disproprtionate allocations?		(i) Code V- amount in be Schedule (Form 10	ox 20 of K-1	(j Genei mana parti	ral or aging	(k) Percentage ownership
									Yes	No			Yes	No					
Part IV Identifi	i cation of Relat because it had on	ed Orga e or mo	anizations Taxa ore related organiz	ble as a Corpora ations treated as a	tion or a corpora	Trust (Co	I omplete ust dur	e if the org ing the tax	anıza year	tion ar .)	nswered "\	es" on	<u>I</u> Form	990,	Part IV,				
Name, address, an	(a) d EIN of related organız	ration	(b) Primary activity	(c) Legal domicile (state or foreign country)		(d Direct cor enti	ntrolling	(e) Type of el (C corp, S or trust	corp,	Share o	(f) f total income	Sha end-o	j) re of f-year sets		(h) Percentage ownership				

Sche	edule R (Form 990) 2010		Pa	age 3
Pa	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)			
	Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No
1 D	During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			1
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		No
b	Gift, grant, or capital contribution to other organization(s)	1b		No
c	Gift, grant, or capital contribution from other organization(s)	1c		No
d	Loans or loan guarantees to or for other organization(s)	1d		No
e	Loans or loan guarantees by other organization(s)	1e		No
f	Sale of assets to other organization(s)	1f		No
g		1g		No
h	Exchange of assets	1h		No
i	Lease of facilities, equipment, or other assets to other organization(s)	1i		No
i	Lease of facilities, equipment, or other assets from other organization(s)	1 j		No
	Performance of services or membership or fundraising solicitations for other organization(s)	1k		No
	Performance of services or membership or fundraising solicitations by other organization(s)	11		No
	Sharing of facilities, equipment, mailing lists, or other assets	1n	n Yes	1
	Sharing of paid employees	1n		No
0	Reimbursement paid to other organization for expenses	10		No
р	Reimbursement paid by other organization for expenses	1р		No
q	O ther transfer of cash or property to other organization(s)	1 q		No
r	Other transfer of cash or property from other organization(s)	1r		No
	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction threshold	<u> </u>		
	(b)	s (d)		
	Name of other organization Transaction Current Manual Involved Method of o	letermi involve		iount
(1) P	erforming Arts Alliance Inc (PAA) M 90,400			

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(a) Method of determining amount involved
(1) Performing Arts Alliance Inc (PAA)	М	90,400	
(2)			
(3)			
(4)			
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d Are parti sect 501(d organiz	ners :ion :)(3) :ations?	(e) Share of end-of-year assets		ortionate cions?	(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(l Gene mana part	agıng tner?
			Yes	No		Yes	No		Yes	No
										-
										<u> </u>
										+
							++			-
										T

Part VII Supplemental Information

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

Identifier	Return Reference	Explanation
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Schedule R (Form 990) 2010