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Form **990**

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2010

Open to Public Inspection

<u>A</u>	For the	2010 cale	endar year, or tax year beginnin		10/01		and ending	9 09	/30	, 20 11		
В	Check if	applicable	C Name of organization WESTER	N STATES	ARTS FEDERAT	ION			D Emplo	yer identification r	ıumber	
	Address	change	Doing Business As							23-7255426		
	Name c	hange	Number and street (or P O box if ma	al is not deliv	vered to street address)	Room/sur	te	E Teleph	one number		
	Initial ref	•	1743 Wazee Street Suite 300							303-626-1166		
	Termina	ted	City or town, state or country, and	ZIP + 4			•					
$\overline{}$	Amende		Denver, CO 80202						G Gross	receipts \$ 3	,437,340	
		ion pending		fficer Ant	hony Radich	_		H(a) Is this		n for affiliates?		
_			1743 Wazee Street, Suite 300,		-			l l			s 🗌 No	
	Tax-exe	mpt status	✓ 501(c)(3)			17(a)(1) or	527	_ ` `	No," attach a list (see instructions)			
			w westaf org	(-) (- (magnitud) 10	(۵)(.) 0 .				on number	•	
				ciation 🗍	Other ►		ear of forma			e of legal domicile	СО	
	art I	Summ		Clation	Other	L 10	ear or torma	13/2	IVI Otati	e or regar dornicae		
	1		escribe the organization's mis	eion or m	noet eignificant a	ctivitios	MECT	A Ela mission	ic to str	angthan tha fina		
	'											
õ			tional, and policy infrastructure									
nan			ge the creative development an	u preserv	ation of the arts r	egionaliy	y and thro	ugn a natior	iai netwo	rk of services to		
Ver	2		nd arts organizations his box ► ☐ if the organization dis				- 4h - = 050/					
Governance	3						e man 25%	or as her asser	1	I	40	
త	_		of voting members of the gov	-			 Baadb		3		19	
Activities &	4		of independent voting member			-		•	4			
₹	5		mber of individuals employed		•		e za) .		5		21	
Ac	6		mber of volunteers (estimate i				•		6		0	
	7a		related business revenue from						7a		0	
	ь	Net unre	lated business taxable incom	e from Fo	orm 990-1, line 3	4 .	 	·	7b	Current Ye	0	
	_	04	the second second (Deat Mill)	. 41.5			-	Pnor Ye				
ë	8		tions and grants (Part VIII, line			•	· -		2,019,581		,818,149	
le l	9								,564,533	1,599,266		
Revenue	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)								13,234	19,925		
	11		venue (Part VIII, column (A), lir				·		0		0	
	12		enue—add lines 8-through 11				ne 12)		3,597,348	[3	3,437,340	
	13	Grants a	nd sımılar amounts paid (Part	IX, colur	nn (A), lines 1–3)		L		,104,298		790,352	
			paid to or for members (Part				· ·		0	0		
es	15		other compensation, employee						1,062,841	1,330,151		
Expenses	16a		onal fundraising fees (Part IX,				· · [0		0	
ă	b	Total fun	idraising expenses (Part IX, co	olumn (D)	, line 25) 🕨		<u> </u>			<u> </u>		
ш	17	Other ex	penses (Part IX, column (A), li		,298,703	1	,509,934					
	18	Total exp	penses. Add lines 13-17 (mus	t equal P	art IX, column (A), line 25	5) . L	:	3,465,842	3	3,630,437	
	19	Revenue	less expenses. Subtract line	18 from 1	ine 12 .				131,506		-193,097	
Net Assets or Fund Balances							E	Beginning of Cu	ırrent Year	End of Ye	ar	
sets	20	Total ass	sets (Part X, line 16)				· . [2,096,500	1	,932,279	
t As	21	Total liab	oilities (Part X, line 26) .				[509,839		557,402	
울	22	Net asse	ets or fund balances. Subtract	line 21 fi	rom line 20 .		Г		,586,661	1	,374,877	
Pa	art II	Signat	ture Block					-	•			
Un	der pena	Ities of perju	ury, I declare that I have examined this	s return, inc	luding accompanying	schedules	s and stater	ments, and to t	he best of	my knowledge and	belief, it is	
tru	e, correc	t, and comp	lete Declaration of preparer (other that	an officer) is	based on all informa	tion of whi	ch preparer	has any know	ledge			
			Tata XX	Z 64)				5.15	.12		
Sig	ın	Sign	afture of officer	7000				Da	ite			
Here Kate McRae, Finance Officer												
			e or print name and title									
Pa		Print/Ty	pe preparer's name	Preparer	's signature	_	Da	te	Chast	PTIN		
									Check self-em			
	epare		name ►					Fire	n's EIN ▶	· · · · · · · · · · · · · · · · · · ·		
US	e On	יש עי	address >		-				one no			
Ma	v the If		s this return with the preparer	shown a	above? (see instr	uctions)		1 1110		🗆 va	s No	

Form **990** (2010)

Cat No 11282Y

For Paperwork Reduction Act Notice, see the separate instructions.

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Form	990	120	10)

Page 2

Rart	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
•	WESTAF, the Western States Arts Federation, is a nonprofit arts service organization dedicated to the creative advancement and
	preservation of the arts Based in Denver, Colorado, WESTAF fulfills its mission to strengthen the financial, organizational and
	policy infrastructure of the arts by providing innovative programs and services to artists and arts organizations in the West and
	nationwide
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section
	501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to
	others, the total expenses, and revenue, if any, for each program service reported.
	(Code) (Expenses \$ 725,066 including grants of \$ 705,988) (Revenue \$ 805,988)
74	With support from the National Endowment for the Arts, WESTAF maintains two grant programs, both of which fund arts touring
	The first, "TourWest," supports the touring of performing artists across the West. The program is designed to serve small
	communities, and is heavily oriented towards supporting performing arts presented in small rural communities by entities that are
	operated by volunteers. At a maximum of \$2,500, these grants are modest in nature but have made a significant difference in
	smaller communities where contributions from government and business have diminished greatly in recent years. The TourWest
	program awards over 200 grants annually and services all corners of WESTAF's 13-state region. The second touring program is
	WESTAF's "Visual Arts Touring Program (VAT)." This program serves small and medium-sized museums of quality in the
	WESTAF region The VAT program makes available awards of up to \$50,000 for the development of exhibitions that tour to two
	venues outside the geographic region of the originating institution. The program's focus is on the exhibition of of the work of
	under-recognized regional artists who have made significant contributions to the development of the arts in their communities, and
	on the development of exhibitions that feature themes related to geographic sub-regions in the West. Recipients of VAT funds
	(Continued on Schedule O, Statement 1)
4b	(Code:) (Expenses \$ 2,202,316 including grants of \$ 3,559) (Revenue \$ 1,599,266)
	WESTAF provides a wide variety of services that are designed to support the development of the arts in the region. Major
	programs include 1) symposia that bring together academics and those working in the arts field to discuss issues of cultural policy
	that impact the development of the arts, 2) professional development seminars for the staff of state arts agencies that are
	designed to help them become more efficient and effective managers of public funds, and to better advise on the development of
	the non-profit arts in their states, 3) the development of the Public Art Archive, a highly searchable on-line database for public art,
	in which artists and managers of public art programs can install their work for free public viewing, 4) the development of the
	Creative Vitality Index, a snapshot of the relative economic health of the creative economy in a community that is used to measure
	the economic contribution that arts development makes to economic development, and 5) arts service-based technology projects
	such as ZAPPlication(R), Call for Entry (CaFE TM), and ArtJob (TM) which support the non-profit arts community and artists in the
	use of technology to advance their work
	(Code.) (Expenses \$ 88,229 including grants of \$ 80,805) (Revenue \$ 86,071)
70	
	Through the American Recovery and Reinvestment Act (ARRA), WESTAF was awarded \$628,800 in federal funds via the National
	Endowment for the Arts to support the development and preservation of arts- and culture-related jobs during the recession. The
	\$88,829 expenditure for this project documented in this report represents the the final disbursements of the funds. Recovery Act
	monies were positioned as significant awards ranging from \$16,000 to \$44,000 and were made to non-profit arts and cultural
	organizations that had recently laid off staff and had no funds with which to re-hire them, or that were planning to lay off staff due
	to lack of funding for those positions Awards were distributed to entities such as the Wind River Tribal College in Wyoming who
	used their award to fund the salary of an arts instructor who utilized technology to digitally archive the oral and cultural traditions of
	over 100 aging Native American elders. An award to the Museum of Contemporary Art in San Diego used the ARRA funds for the
	salary of a gifted Asian-American artist and educator who was helping to ramp up New Media and technology programs at the
	Museum A third organization to receive an award, Childs' Play, is a non-profit youth theatre based in Arizona that caters to
	(Continued on Schedule O, Statement 2)
4d	Other program services (Describe in Schedule O.)
40	(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)

Form 99			ı	age 3
Part	V Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
_	complete Schedule A	1	√	
2 3	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions) 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	✓_	1
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	✓	_
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		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
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		√
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," complete Schedule D, Part III	8		1
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			
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		√
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.	10		•
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	44-		
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	11a	✓	,
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	11b		✓
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	11c	1	V
۵	Did the organization report an amount for other liabilities in Part X, line 25° If "Yes," complete Schedule D, Part X	11e		-
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	1	
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	1	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		✓ _
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		1
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		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
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		1
	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		1
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Fart	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	04	Yes	No
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	21		→
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	_	<u>·</u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		✓
b c	_ · · · · · · · · · · · · · · · · · · ·	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		-
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		√
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		1
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		√
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		√
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	√	
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		✓
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		✓
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? <i>If "Yes," complete Schedule R, Part I </i>	33		✓
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	✓	
35 a	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		✓
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		✓
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	-	√
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	√	
		Forr	n 990	(2010)

Part	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 49			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
_	reportable gaming (gambling) winnings to prize winners?	1c	✓	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 21			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	✓	
За	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	,:-		
b	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3a 3b		-
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	30		
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		1
b	If "Yes," enter the name of the foreign country: ▶	1,,,-		
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	" .		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible?	6a		✓
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
7	gifts were not tax deductible?	6b		
7 a	Organizations that may receive deductible contributions under section 170(c). 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		1
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		V
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7.5		
	required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year			<u> </u>
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		1
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
_	organization, have excess business holdings at any time during the year?	8		ļ
9	Sponsoring organizations maintaining donor advised funds.	-		ļ
a b	Did the organization make any taxable distributions under section 4966?	9a		-
10	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	·		
11	Section 501(c)(12) organizations. Enter.	:		
а	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.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			i
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u> </u>		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		ļ
L	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
_	_			
C 14a	100	14-	<u> </u>	-
14a h	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		-
	100, mas it med a form 720 to report these payments: If Mo, provide an explanation in schedule O	טדין		

	90 (2010)			Page 6
Part				
	"No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or chang O. See instructions.	es in	Scne	eauie
	Check if Schedule O contains a response to any question in this Part VI			. 🔽
Secti	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 19			
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 19] !	l	
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		1
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		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		✓
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5	<u> </u>	✓
6	Does the organization have members or stockholders?	6	<u> </u>	✓
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		1
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	<u> </u>	✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	1	
b	Each committee with authority to act on behalf of the governing body?	8b	1	ļ
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	_ '		
Socti	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		<u> </u>
Secti	ion B. Policies (This Section B requests information about policies not required by the internal Rever	ue C	Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	<u> </u>	1
b	If "Yes," does the organization have written policies and procedures governing the activities of such	100		
	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	✓	ļ
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			ئــــا،
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	✓	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	1	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	120	<u> </u>	
Ŭ	describe in Schedule O how this is done	12c	1	
13	Does the organization have a written whistleblower policy?	13	1	
14	Does the organization have a written document retention and destruction policy?	14	1	
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	✓	
b	Other officers or key employees of the organization	15b	✓	ļ.,
40-	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16a	and the second s	12	 	ļ_ <u>,</u> _
.	· · · · ·	16a		√
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		
Secti	ion C. Disclosure	1 100		1
17	List the states with which a copy of this Form 990 is required to be filed ▶			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3 for public inspection. Indicate how you make these available. Check all that apply.)s onl	y) ava	ailable
	☐ Own website ☐ Another's website ☑ Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of and financial statements available to the public.	of inte	rest p	oolicy,
20	State the name, physical address, and telephone number of the person who possesses the books and records	of the)	
	organization [.] ► The Organization, (303)629-1166			
	1743 Wazas Street Suite 300 Deguer CO 90202			

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. 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)	(B)	u u.g.		((Jp0		(D)	(E)	(F)
Name and Title	Average hours per week (describe hours for related organizations in Schedule O)	Individual tr or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Sandra Albano Trustee	2	√				•		0	0	0
Robert Booker Trustee	2	1						0	o	0
Wendy Bredehoft Trustee	2	1						0	0	0
Christine D'Arcy Trustee	2	✓						0	0	0
Dale Erquiaga Chair	4	1						o	o	0
Annette Evans Smith Trustee	2	1						o	О	0
Charlotte Fox Trustee	2	1						0	0	0
Ricardo Frazer Secretary	3	1						0	0	0
Bill Frazier Trustee	2	1						0	0	0
Tony Garcia Trustee	2	1						0	o	0
Virginia Gowski Treasurer	3	√						0	0	0
Erin Graham Trustee	2	✓			_			0	0	0
Michael Hillerby Trustee	2	✓						0	0	0
Margaret Hunt Trustee	2	1						0	0	0
Aaron Miles Trustee	2	1						0	0	0
Tey Marianna Nunn Trustee	2	1						0	0	0

Par	VII Section A. Officers, Directors, Trus	stees, Key	Emple	oyee	es, a	and	Highe	est	Compensated	Employees (d	continu	ued)	
	(A)	(B)				C)			(D)	(E)		(F	7
	Name and title	Name and title Average Position (check all that apply) Reportable Re								Reportable		Estim	ated
		hours per	2 3	=	0	7	ΦI	Ţ	compensation	compensation 1	from	amou	
		week (describe	<u>₽</u> ₹	stit	Officer	Key employee	를 다	Former	from the	related organization		oth comper	
		hours for	og E	l to	۳ ا	풀	oyer	4	organization	(W-2/1099-MIS		from	
		related	약함	na		Š	e g		(W-2/1099-MISC)	,	·	organi	
		organizations	Individual trustee or director	Ę		8	per l	1	1			and re	
		in Schedule O)	ď	Institutional trustee			Highest compensated employee					organiz	ations
		,			_		8	-		-		_	
	sa Feruzzı Shriver	2	1						0		0		0
Trust	ee Tucker		-						_				
Trust		2	1						0		0		0
	Cancel		-					 					
Trust		2		1	1				0		0		0
	ony Radich				_								
	itive Director	45			1				119,567		0		12,205
Kate	McRae	4.5											
Finan	ce Officer	45			✓			<u>.</u>	84,705		0		7,463
								L. <u>.</u>					
								-					
						1							
								 -					
1b	Sub-total				1	<u> </u>			204,272		0		19,668
c	Total from continuation sheets to Part		n A					•					
d	-								204,272		0		19,668
، 2	Total number of individuals (including but						above	e) w	ho received m	ore than \$100	0,000	ın	
	reportable compensation from the organi										•		
													Yes No
3	Did the organization list any former of							emp	loyee, or high	est compen	sated		
	employee on line 1a? If "Yes," complete 3										•	3	✓
4	For any individual listed on line 1a, is the											1 1	
	organization and related organizations	_					"Ye	s, "	complete Sch	edule J for	such	L	
							•	•				4	✓
5	Did any person listed on line 1a receive of										vidual	1	
	for services rendered to the organization	? If "Yes," c	ompi	ete	Scr	nedu	ile J f	or s	such person	· · · · ·	•	5	
	on B. Independent Contractors					i	4				# 100	000 -6	
1	Complete this table for your five highest compensation from the organization.	compensat	ea ind	epe	ena	ent	contr	acto	ors that receive	ed more than	\$100	,uuu or	
	(A)							T	(B)			(C)	
	Name and business add	ress							Description of s	ervices	C	Compensa	tion
Brow	nRice Internet Inc. 201 Camino de la Merced,	Taos, NM 8	7571					Tec	chology Develo	pment & Ma	_		286,395
			_									_	
		_		-									
								\vdash					
2	Total number of independent contractor	rs (includir	ng bu	ıt n	ot l	lımıt	ed to	th	ose listed abo	ove) who			
_	received more than \$100,000 in compens									, , , , ,			
				_			<u> </u>						990 (2010)

Part	VIII	Statement of Revenue					
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts	1a	Federated campaigns 1a	0				
ıran	b	Membership dues 1b	0				;
s, g	С	Fundraising events 1c	0				ı
gift lar	d	Related organizations 1d	0				
ns, imi	е	Government grants (contributions) 1e	1,797,424				
utio er s	f	All other contributions, gifts, grants,					
oth		and similar amounts not included above 1f	20,725				
Contributions, gifts, grants and other similar amounts	g	Noncash contributions included in lines 1a-1f: \$	0				
9	h	Total. Add lines 1a-1f	Business Code	1,818,149			
enn	2a 1	Technology services for the arts field	-	693,916	693,916	0	
Rev		License and Use Fees	519100	238,369	238,369	0	0
Program Service Revenue		ncome from flow-through entitly		221,673	221,673	0	0
Sen	d F	Research services	900099	122,701	122,701	0	0
am	е 9	State Participation Fees	541900	317,390	317,390	0	0
ogr	f	All other program service revenue		5,217	5,217	0	0
<u>_</u>		Total. Add lines 2a-2f		1,599,266			
	3	Investment income (including divid					
	A .	•		19,925	19,925	0	0
	4 5	Income from investment of tax-exempt to Royalties	ona proceeas	0	0	0	0
	5	(i) Real	(ii) Personal	0	0	0	0
	6a	Gross Rents .	+				
	b	Less: rental expenses					
	c		0				
	d	Net rental income or (loss)	▶				
	7a	Gross amount from sales of (i) Securities assets other than inventory	(II) Other				
	b	Less cost or other basis and sales expenses .					
	С		0				
	d	Net gain or (loss)	<u>, , , , ▶</u>				
Revenue	8a	Gross income from fundraising events (not including \$ 0 of contributions reported on line 1c).					
Other		See Part IV, line 18	a				
o <u>t</u>		• • • • • • • • • • • • • • • • • • • •					
		Net income or (loss) from fundraising	events . ►				
		Gross income from gaming activities. See Part IV, line 19		:			
			D				
		Net income or (loss) from gaming ac Gross sales of inventory, less	tivities ▶				
	IUa	returns and allowances					
	ь						
	С	Net income or (loss) from sales of in-	ventory ▶				
		Miscellaneous Revenue	Business Code				
	11a					_	
	b						
	d	All other revenue					
		Total. Add lines 11a-11d		0			
	12	Total revenue. See instructions		3,437,340	1,619,191	0	0

Part IX Statement of Functional Expenses

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

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

	All other organizations must complete col	umn (A) but are not	required to complet	e columns (B), (C), a	nd (D).
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	790,352	790,352		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0	0		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0	0		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	238,328	0 152,530	85,798	0
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
7	Other salaries and wages	861,075	774,967	86,108	0
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	19,672	17,705	1,967	0
9	Other employee benefits	124,503	112,053	12,450	0
10	Payroll taxes	86,573	73,587	12,986	0
11 a	Fees for services (non-employees). Management	0	0	0	0
b	Legal	85,694	72,840	12,854	0
C	Accounting	29,939	0	29,939	0
d	Lobbying	108,471	0	108,471	0
e	Professional fundraising services. See Part IV, line 17	0			0
f	Investment management fees	5,194	0	5,194	0
g 12	Advertising and promotion	138,054 114,573	124,249	13,805	0
13	Office expenses	61,792	52,523	114,573 9,269	0
14	Information technology	283,723	269,537	14,186	0
15	Royalties	0	0	0	0
16	Occupancy	109,192	92,813	16,379	0
17	Travel	107,072	102,341	4,731	0
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	58,392	46,713	11,679	0
19	Conferences, conventions, and meetings	61,425	49,140	12,285	0
20	Interest	508	0	508	0
21	Payments to affiliates	0	0	0	0
22 23	Depreciation, depletion, and amortization . Insurance	270,312	229,765	40,547	0
23 24		17,402	0	17,402	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column				I
	(A) amount, list line 24f expenses on Schedule O.)				
а	Dues & subscriptions	2,988	2,540	448	0
b	Design	14,907	14,907	0	0
C	Credit card fees	10,942	10,942	0	0
d	Printing	14,443	14,154	289	0
e	Property taxes	848	0	848	0
os T	All other expenses Total functional expenses. Add lines 1 through 24f	14,063	11,953	2,110	0
<u>25</u> <u>26</u>	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.	3,630,437	3,015,611	614,826	0

Part X **Balance Sheet** (B) (A) Beginning of year End of year Cash-non-interest-bearing 1 385,769 424.728 2 Savings and temporary cash investments . . 2 3 Pledges and grants receivable, net 3 Accounts receivable, net 4 191,585 4 56,275 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Assets 7 Notes and loans receivable, net 7 Inventories for sale or use 8 Prepaid expenses and deferred charges . . 9 25,332 23,427 10a Land, buildings, and equipment, cost or other basis. Complete Part VI of Schedule D 10a 1,545,509 **b** Less: accumulated depreciation . . . 10b 10c 927,330 679,967 618,179 Investments – publicly traded securities 11 528,504 11 520,901 12 Investments - other securities. See Part IV, line 11 . 12 13 Investments-program-related See Part IV, line 11 . . . 13 14 Intangible assets . . . 14 Other assets. See Part IV, line 11 15 15 285,343 288,769 Total assets. Add lines 1 through 15 (must equal line 34) . 16 2,096,500 16 1,932,279 17 Accounts payable and accrued expenses 199,667 17 182,064 18 Grants payable 18 19 Deferred revenue . 19 300,950 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. 22 23 Secured mortgages and notes payable to unrelated third parties . 23 24 Unsecured notes and loans payable to unrelated third parties . . . 0 24 25 Other liabilities. Complete Part X of Schedule D 25 9,222 5,709 26 Total liabilities. Add lines 17 through 25 509,839 26 557,402 Organizations that follow SFAS 117, check here ▶ 📝 and complete Net Assets or Fund Balances lines 27 through 29, and lines 33 and 34. Unrestricted net assets . . . 27 27 1,586,661 1,374,877 Temporarily restricted net assets . . . 28 0 28 0 29 0 29 0 Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds . . . 30 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 31 32 Retained earnings, endowment, accumulated income, or other funds. 32 33 1,586,661 33 1,374,877 Total liabilities and net assets/fund balances . . . 2.096.500 34 1,932,279

Page	1	2

Pari	Reconciliation of Net Assets Check if Schedule O contains a response to any question in this Part XI			_	. 🗸
1	Total revenue (must equal Part VIII, column (A), line 12)	1		3,43	7,340
2	Total expenses (must equal Part IX, column (A), line 25)	2		3,63	0,437
3	Revenue less expenses. Subtract line 2 from line 1	3_		-19	3,097
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1,58	6,661
5	Other changes in net assets or fund balances (explain in Schedule O)	5		1	8,687
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		1,37	4,877
Part	Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII				. 🗆
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	olain i	in		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		1
b	Were the organization's financial statements audited by an independent accountant?		. 2b	1	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or of the audit, review, or compilation of its financial statements and selection of an independent account	_		1	
	If the organization changed either its oversight process or selection process during the tax year, ex Schedule O.	plaın	ın ===		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the yearsued on a separate basis, consolidated basis, or both.	ar wei	re		
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth	ın 🗀	 	
	the Single Audit Act and OMB Circular A-133?		. За	1	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	rgo th	ie	1	
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3b	/	
			Fo	rm 990	(2010)
					, ,

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047 2010

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Open to Public ▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions. Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

WESTERN STATES ARTS FEDERATION 23-7255426 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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). [7] An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) ☐ An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. **b** ☐ Type II c Type III-Functionally integrated e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) If the organization received a written determination from the IRS that it is a Type II, Type III, 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) and No 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(iu) Provide the following information about the supported organization(s) (i) Name of supported (ii) EIN (III) Type of organization (iv) Is the organization (v) Did you notify (vi) Is the (vii) Amount of the organization in col (i) of your support? in col (i) listed in your organization (described on lines 1-9 organization in col support (i) organized in the US? above or IRC section governing document? (see instructions)) No Yes No Yes No Yes (A) (B) (C) (D) (E)

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 Calendar year (or fiscal year beginning in) ▶ (f) Total Gifts, grants, contributions, and membership fees received (Do not 2,336,971 1,780,006 1,581,603 1,945,429 2,135,539 9,779,548 include any "unusual grants.") 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 Total. Add lines 1 through 3 1,780,006 1,581,603 1,945,429 2,336,971 2,135,539 9,779,548 The portion of total contributions by person each (other than а governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4. 9,779,548 Section B. Total Support (a) 2006 **(b)** 2007 Calendar year (or fiscal year beginning in) (c) 2008 (d) 2009 (e) 2010 (f) Total 7 Amounts from line 4 1,780,006 1,581,603 1,945,429 2,336,971 2,135,539 9,779,548 Gross income from interest, dividends, payments received on securities loans. 41,819 17,240 6,473 11,529 19,925 96,986 rents, royalties and income from similar Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or 10 loss from the sale of capital assets 853,203 942.074 972.019 1,237,783 1,281,876 5,286,955 (Explain in Part IV.) . . 11 Total support. Add lines 7 through 10 15,163,489 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f) 14 64.49 % Public support percentage from 2009 Schedule A, Part II, line 14 15 15 331/3% support test - 2010. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization $\boxed{$ 331/3% support test-2009. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

20

	RE A (FORM 990 or 990-EZ) 2010			_			Page 3
Part							
	(Complete only if you checked the						er Part II.
	If the organization fails to qualify	under the te	sts listed bel	ow, please co	omplete Part I	1.)	
	on A. Public Support	(1) 0000	4) 0007	() 0000	(1) 0000	- (-) 0040	
	dar 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						
2	received (Do not include any "unusual grants") Gross receipts from admissions, merchandise						
_	sold or services performed, or facilities						
	furnished in any activity that is related to the						
•	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the	-					
•	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities				 		
J	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .					ļ	
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year	:					
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from				The state of the s	American Sur	
	line 6.)			, ~ **	1	5. HO 4. E	
Secti	on B. Total Support			<u> </u>	· 		
Calen	dar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or				 		
	loss from the sale of capital assets						
	(Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12)				<u> </u>		
14	First five years. If the Form 990 is for the	-			· -		
<u> </u>	organization, check this box and stop he			<u> </u>	_ · _ · · · · · · · · · · · · · · · · ·	· · · · · ·	· • 📙
	on C. Computation of Public Suppor					T .= T	
15	Public support percentage for 2010 (line 8					15	<u>%</u>
16	Public support percentage from 2009 Sch					16	%
	on D. Computation of Investment In		 				
17	Investment income percentage for 2010 (17	%
18	Investment income percentage from 2009					[18]	<u>%</u>
19a	331/3% support tests—2010. If the organ						
	17 is not more than 331/3%, check this box						_
b	331/3% support tests—2009. If the organiz						
	line 18 is not more than 331/3%, check this l	oux and stop n	iere. The organ	nzation qualines	s as a publicly S	upported organi	zation

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

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

20**10**

Open to Public Inspection

Department of the Treasury Internal Revenue Service

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then • Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B Section 527 organizations Complete Part I-A only If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then • Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A Do not complete Part II-B Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then Section 501(c)(4), (5), or (6) organizations Complete Part III Name of organization **Employer identification number** WESTERN STATES ARTS FEDERATION 23-7255426 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 Political expenditures . Volunteer hours . . . Part I-B 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? Yes Yes No b If "Yes," describe in Part IV. Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities . . 2 Enter the amount of the filing organization's funds contributed to other organizations for section 3 Total exempt function expenditures Add lines 1 and 2. Enter here and on Form 1120-POL, 4 Did the filing organization file Form 1120-POL for this year? . . 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received and funds If none, enter -0promptly and directly delivered to a separate political organization If none, enter -0-(1) (2)(3)(4)(5)

(6)

Pa	art	Complete if the organization section 501(h)).	is exempt under section 501(c)(3) and filed	i Form 5768 (ele	ection under
Ą	Cł	neck ► 🗸 if the filing organization belo	ongs to an affiliated group.		
В		5 5	cked box A and "limited control" provisions a	pply.	
		-	ing Expenditures ans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
	1a	Total lobbying expenditures to influence p	oublic opinion (grass roots lobbying)	0	0
	b	Total lobbying expenditures to influence a	legislative body (direct lobbying)	108,471	0
	С	Total lobbying expenditures (add lines 1a	and 1b)	108,471	0
	d	Other exempt purpose expenditures		3,521,962	1,020,654
	e	Total exempt purpose expenditures (add	lines 1c and 1d)	3,630,433	1,020,654
	f	Lobbying nontaxable amount. Enter the columns.	ne amount from the following table in both	331,522	177,065
		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
		Not over \$500,000	20% of the amount on line 1e	Early and a state was to rest	
		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		A CONTRACTOR OF THE PROPERTY O
		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	は一般	ERS.
	g	Grassroots nontaxable amount (enter 25%	6 of line 1f)	82,881	44,266
	h	Subtract line 1g from line 1a If zero or les	s, enter -0	0	0
	i	Subtract line 1f from line 1c If zero or less	•	0	0
	j	If there is an amount other than zero or reporting section 4911 tax for this year?	on either line 1h or line 1i, did the organization	file Form 4720	Yes No
		4-Yea	r Averaging Period Under Section 501(h)		

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.)

	Lobbyi	ng Expenditures D	uring 4-Year Ave	eraging Period		_
	Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a	Lobbying nontaxable amount	287,022	298,320	323,198	331,522	1,240,062
b	Lobbying ceiling amount (150% of line 2a, column (e))				The state of the s	1,860,093
С	Total lobbying expenditures	109,631	99,861	124,471	108,471	442,434
d	Grassroots nontaxable amount	71,756	74,580	80,800	82,881	310,017
е	Grassroots ceiling amount (150% of line 2d, column (e))			- 1	The control of the	465,026
f	Grassroots lobbying expenditures	0	0	0	0	O

Schedule C (Form 990 or 990-EZ) 2010

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

		(á	3)		(b)	
		Yes	No	Ar	mount	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
_			-	ł		
a	Volunteers?		-	ĺ		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?			 		
d	Mailings to members, legislators, or the public?			 		
e	Publications, or published or broadcast statements?			 		
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h :	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i :	Other activities? If "Yes," describe in Part IV					
J	Total. Add lines 1c through 1i	<u> </u>				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			<u> </u>		
b	If "Yes," enter the amount of any tax incurred under section 4912			<u> </u>		
۲ د	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .		<u> </u>	<u> </u>		
d Dowl	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	\(5\)		- •		
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c 501(c)(6).)(5), (or se	ction		
	Warrant H. WORK				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	<u> </u>	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	<u> </u>	
3	Did the organization agree to carryover lobbying and political expenditures from the prior year? . III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)			3	L	
	Complete if the organization is exempt under section 501(c)(4), section 501(c 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, I "Yes."				∌d	
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of				•
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		H			
-	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb					
	and political expenditure next year?	, <u>.</u>	4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5			
Pari	Supplemental Information			-		
Comp	elete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5; lete this part for any additional information.	and F	art II-	B, line	1ı. Als	50,
•	dule C, Part II-A, Line 1b - WESTAF advocacy funds are available to each state participating in the work of	MEST		ha fund	le 250	
	sted to arts advocacy organizations and independent contractors who present and argue the case for state					
	nistrators and elected officials at the state level.		• •	ort or ti	ie ai t	3 (U
Sched	dule C, Part II-A, Line A - ZAPP Software, LLC 1743 Wazee Street, Suite 300, Denver, CO 80202 EIN 20-1750	0473 E	xpens	ses -		
\$1,020	• • • • • • • • • • • • • • • • • • • •					
		-				

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

of the organization Employer identification number

WEST	ERN STATES ARTS FEDERATION		23-7255426
Par		or Advised Funds or Other Similar Fu	inds or Accounts. Complete if the
	organization answered "Yes" to F	orm 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and		
	funds are the organization's property, subject	ct to the organization's exclusive legal conf	trol? Yes No
6	Did the organization inform all grantees, do	nors, and donor advisors in writing that gr	ant funds can be used
	only for charitable purposes and not for the	e benefit of the donor or donor advisor, or	for any other purpose
	conferring impermissible private benefit?	<u> </u>	· · · · · · · · · · Yes 🗆 No
Par	Conservation Easements. Comp	lete if the organization answered "Yes	" to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held	by the organization (check all that apply).	
	☐ Preservation of land for public use (e.g ,	recreation or education) Preservation	of an historically important land area
	☐ Protection of natural habitat	Preservation	of a certified historic structure
	☐ Preservation of open space		
2	Complete lines 2a through 2d if the organiza	ation held a qualified conservation contribu	tion in the form of a conservation
	easement on the last day of the tax year		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation eas	sements	2b
С	Number of conservation easements on a cer	rtified historic structure included in (a)	2c
d	Number of conservation easements include	led in (c) acquired after 8/17/06, and no	t on a
	historic structure listed in the National Regis	ter	· · 2d
3	Number of conservation easements modified	d, transferred, released, extinguished, or te	rminated by the organization during the
	tax year ►		
4	Number of states where property subject to		
5	Does the organization have a written pol		
	violations, and enforcement of the conserva	tion easements it holds?	· · · · · · . Yes 🗆 No
6	Staff and volunteer hours devoted to monitor	ring, inspecting, and enforcing conservation	on easements during the year
	>		
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing conservation ea	sements during the year
	▶ \$		
8	Does each conservation easement reported		
	(i) and section 170(h)(4)(B)(II)?		· · · · · · . Tes No
9	In Part XIV, describe how the organization re	eports conservation easements in its reven-	ue and expense statement, and
	balance sheet, and include, if applicable, the	e text of the footnote to the organization's f	financial statements that describes the
	organization's accounting for conservation e		
Part		ections of Art, Historical Treasures, o	
	Complete if the organization answ	vered "Yes" to Form 990, Part IV, line 8	J.
1a	If the organization elected, as permitted uni-	der SFAS 116 (ASC 958), not to report in	ts revenue statement and balance sheet
	works of art, historical treasures, or other	similar assets held for public exhibition,	education, or research in furtherance of
	public service, provide, in Part XIV, the text	of the footnote to its financial statements th	nat describes these items
b	If the organization elected, as permitted un	nder SFAS 116 (ASC 958), to report in it	s revenue statement and balance sheet
	works of art, historical treasures, or other		education, or research in furtherance of
	public service, provide the following amount	ts relating to these items.	
	(i) Revenues included in Form 990, Part VIII	, line 1	> \$
	(i) Revenues included in Form 990, Part VIII (ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works		***************************************
	following amounts required to be reported u		
а	Revenues included in Form 990, Part VIII, lin	· · · · · · · · · · · · · · · · · · ·	> \$
h	Assets included in Form 990. Part V		•

Schedu	le D (Form 990) 2010								F	age 2
Part	III Organizations Maintaining	Collections of	Art, His	toric	al Treasures	s, or O	ther Similar A	ssets (c	ontinu	ied)
3	Using the organization's acquisition,	accession, and of	ther reco	rds, o	check any of t	he follo	wing that are a	significar	ıt use	of its
	collection items (check all that apply).									
а	 Public exhibition 		d		Loan or excha	ange pro	ograms			
b	☐ Scholarly research		е							
С	Preservation for future generation									
4	Provide a description of the organiza	tion's collections	and expla	ain h	ow they furthe	r the or	ganization's exe	empt purp	ose in	ı Part
	XIV.									
5	During the year, did the organization									
	assets to be sold to raise funds rather		·	•					es [
Part						answe	red "Yes" to I	orm 990	i, Part	. IV,
	line 9, or reported an amour									
1a	Is the organization an agent, trustee included on Form 990, Part X?	, custodian or otr						_		٦
L						•	•	· 📙 Y	'es ∟] ИО
b	If "Yes," explain the arrangement in P	art XIV and compi	ete the to	Ollowi	ing table.			Amount		
•	Reginning belones					-		Amount		
c d	Beginning balance Additions during the year					10				
e	Distributions during the year .				• • •	10				—
f	Ending balance					11				
2a	Did the organization include an amou		· · · art X line	 212					′es [7 No
b	If "Yes," explain the arrangement in P		art 74, iiric	, , , ,					C 3 _	
Par			zation ar	nswe	red "Yes" to	Form 9	90. Part IV. lir	ne 10.		
		(a) Current year		or yea			(d) Three years ba		ur years	back
1a	Beginning of year balance	· · · · · · · · · · · · · · · · · · ·								
b	Contributions		-							
c	Net investment earnings, gains, and							_		$\overline{}$
	losses									}
d	Grants or scholarships				i					
е	Other expenditures for facilities and									$\overline{}$
	programs		1							
f	Administrative expenses									$\neg \neg$
g	End of year balance									
2	Provide the estimated percentage of t	he year end balar	nce held a	as:	•					
а	Board designated or quasi-endowment	nt 🕨	%							
b	Permanent endowment ▶	%								
С	Term endowment ▶ %									
За	Are there endowment funds not in the	e possession of th	ne organi	izatio	n that are held	l and ac	Iministered for	the		
	organization by.								Yes	No
	(i) unrelated organizations							. 3a(i)	4	
	(ii) related organizations							. 3a(ii	4	
b	If "Yes" to 3a(II), are the related organ							3b	╧	
4	Describe in Part XIV the intended use:									
Part			<u></u> -	T	•	r				
	Description of investment	(a) Cost or of (investment)		(b) (Cost or other basis (other)		Accumulated epreciation	(d) Bo	ok value	,
1a	Land		0		0					0
b	Buildings ,		0	<u> </u>	0		0			0
С	Leasehold improvements .		0		2,500		1,664			836
d	Equipment	.	0	 	1,543,009	<u> </u>	925,666		61	7,343
e	Other		0		0		0			0
Total.	Add lines 1a through 1e. (Column (d) n	nust equal Form 9	90, Part)	X, coi	lumn (B), lıne 1	0(c).)	. ▶		61	8,179

Part VII	Investments - Other Securities	. See Form 990, Part X, I	ine 12.	
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valu Cost or end-of-year ma	
(1) Financia	al derivatives			
(2) Closely	-held equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)	•			
(F) (G)			- -	
(H)				
(I)	•			
	n (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII		l. See Form 990, Part X,	line 13.	
	(a) Description of investment type	(b) Book value	(c) Method of valu	ation
			Cost or end-of-year ma	arket value
(2)				
(3)				
(4)				
(5)				
_(6)				
(7)	- <u>-</u>			
(8)				
(9)				
(10)				
	n (b) must equal Form 990, Part X, col (B) line 13) ▶			
Part IX	Other Assets. See Form 990, Pa			
	- · · · · · · · · · · · · · · · · · · ·	n) Description		(b) Book value
	ity deposit			8,500
	ment in subsidiary			280,269
_(3)				
_(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)	lumn (b) must equal Form 990, Part X, co	ol (D) (no 15)		
Part X	Other Liabilities. See Form 990,		<u> </u>	288,769
1.	(a) Description of liability	(b) Amount		
	al income taxes	(b) Amount		
(1) 1 00010		2770	{	
(2) Curren	nt portion of conital loose obligation			i
	nt portion of capital lease obligation	2,776	1	
(3) Capita	nt portion of capital lease obligation Il lease obligation, net of current portion	2,776	1	ļ
(3) Capita (4)			1	
(3) Capita (4) (5)			1	
(3) Capita (4) (5) (6)			1	,
(3) Capita (4) (5) (6) (7)			1	
(3) Capita (4) (5) (6) (7) (8)			1	,
(3) Capita (4) (5) (6) (7) (8) (9)			1	,
(3) Capita (4) (5) (6) (7) (8) (9) (10)			1	,
(3) Capita (4) (5) (6) (7) (8) (9) (10) (11)	al lease obligation, net of current portion	2,933	1	,
(3) Capita (4) (5) (6) (7) (8) (9) (10) (11) Total. (Column		5,709		ents that reports the

Schedu	le D (Form 990) 2010				Page 4
Part	XI Reconciliation of Change in Net Assets from Form 990 to Au	dite	d Financial Stateme	ents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	3,437,340
2	Total expenses (Form 990, Part IX, column (A), line 25)		[2	3,630,437
3	Excess or (deficit) for the year. Subtract line 2 from line 1			3	-193,097
4	Net unrealized gains (losses) on investments			4	-17,036
5	Donated services and use of facilities			5	0
6	Investment expenses		[6	0
7	Donat and a dead of the state o		[7	0
8	Other (Describe in Part XIV.)			8	-1,651
9			[9	-18,687
10	Excess or (deficit) for the year per audited financial statements. Combine i	lines	3 and 9	10	-211,784
Part	XII Reconciliation of Revenue per Audited Financial Stateme	nts '	With Revenue per	Ret	urn
1	Total revenue, gains, and other support per audited financial statements.			1	3,413,459
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains on investments	2a	-17,036		
b	Donated services and use of facilities	2b	0]	
, c	Recoveries of prior year grants	2c	0		
d	Other (Describe in Part XIV)	2d	0		
е	Add lines 2a through 2d			2e	-17,036
3	Subtract line 2e from line 1	•		3	3,430,495
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b			}	
b	Other (Describe in Part XIV.)	4b	1,651		
C	Add lines 4a and 4b			4c	6,845
_5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 1			5	3,437,340
Part		ents	With Expenses pe	er R	eturn
1	Total expenses and losses per audited financial statements			1	3,625,243
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.	ı	1		
a	Donated services and use of facilities	2a	0		
b	Prior year adjustments	2b	0	1	
C	Other losses	2c	0	1	
d	Other (Describe in Part XIV.)	2d	0	 -	
e	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	3,625,243
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			1	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	5,194	1	
b	Other (Describe in Part XIV.)	4b	0	1	_
_	Add lines 4a and 4b			4c	
5 Dost	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	: 18.)	· · · · · · · · · · · · · · · · · · ·	5	3,630,437
Part					
Part V	lete this part to provide the descriptions required for Part II, lines 3, 5, and 9, line 4, Part X, line 2; Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and Albert XIIII, lines 2d and Albert XIIII	9; Pa	rt III, lines 1a and 4; P	art i	V, lines 1b and 2b;
	ditional information.	111162	Zu anu 40 Also com	piete	this part to provide
-		_		_	
	lule D, Part X, Line 2 - WESTAF is exempt from federal income taxes under Sect				
	is subject to federal income taxes on unrelated business income. WESTAF had				
	mber 30, 2011 and 2010. WESTAF is not a private foundation within the meaning				
	AF's affiliate, ZAPP Software, has elected to be treated as a partnership for income of ZAPP are appeared on the income two several (ZAPP).				
	s of ZAPP are reported on the income tax returns of ZAPP's members, of which				
	likely-than not measurement methodology to reflect the financial statement imp		· · · · · · · · · · · · · · · · · · ·		-
	in a tax return. After evaluating the tax positions taken, none are considered to				
	nized as of September 30, 2011 and 2010. If incurred, interest and penalties asso sed as general and administrative expense. No interest or penalties have been a		•		•
	that remain subject to examination include 2007 through the current year.	u > > C >	isea as or september s	J, 20	TI AND LUID. LAX

Schedule D, Part XI, Line 8 - There is a difference of \$1,651 between book and tax income from investment in subsidiary.

Part XIV - Supplemental Information (Continued)

Schedule D, Part XII, Line 4b - There is a difference of \$1,651 in the income per books of the flow-through entity recorded in the audited financial statements and the income per the partnership tax return reflected in the Form 990.
.1
·····
<u> </u>

SCHEDULE (Form 990)

Grants and Other Assistance to Organizations,

Governments, and Individuals in the United States

OMB No 1545-0047

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service	,	zompiete ii tile orga	nization answered Tres to Fo ► Attach to Form 990.	res to rum sau, Form 990.	Complete it tile organization answered. Tes to romi 990, Part IV, line ∠I or ∠∠. ► Attach to Form 990.		Ď	Open to Public Inspection
Name of the organization					=	E	Employer identification number	ion number
WESTERN STATES ARTS FEDERATION	RATION						23-7255426	5426
Part I General Informa	General Information on Grants and Assistance	1 Assistance						
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	naintain records to sub ed to award the grants	stantiate the amou	int of the grants or	assistance, the g	rantees' eligibility fo	for the grants or assis		✓ Yes □ No
Desc	organization's procedu	res for monitoring	the use of grant fur	ds in the United	States.			
Fart II Grants and Oth Form 990, Part I	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II	overnments and	Organizations i /ed more than \$5	n the United Si ,000. Check thi	tates. Complete it is box if no one rec	f the organization cipient received m	answered "Ye	s" to 00. Part II
can be duplicate	can be duplicated if additional space is needed.	is needed						□ ▲ · ·
1 (a) Name and address of organization or government	tion (b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance		(h) Purpose of grant or assistance
(1) Sch I, Stmt 1								
(2)								
(3)								
(4)								
(5)							-	
(9)								
(<u>u</u>)								
(8)								
(6)								
(10)								
(11)								
(12)								
2 Enter total number of section 501(c)(3) and government organizations	ection 501(c)(3) and go	vernment organizat	suoi				▲ 4	19
3 Enter total number of other organizations	ner organizations .						•	0
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	otice, see the Instructior	ns for Form 990.		Cat	Cat No 50055P		Schedul	Schedule I (Form 990) (2010)

Schedule I (F	Schedule I (Form 990) (2010)	4				, Page 2
Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.	lividuals in the U	Inited States. Com I.	plete if the organiza	ation answered "Yes" to	Form 990, Part IV, line 22.
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
-						
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Part IV	Supplemental Information. Complete this part		vide the information	required in Part I,	to provide the information required in Part I, line 2, and any other additional information.	litional information.
Schedule National E	Schedule I, Part I, Line 2 - Awards to presenting and touring organizations are determined via a jury process, and all awardees must meet the criteria specified by WESTAF and the National Endowment for the Arts to be considered for an award. Jury panelists must disclose any conflicts of interest, and must recuse themselves in the event of a conflict. All gra	ing organizations ar award. Jury panelis	re determined via a jurits must disclose any o	y process, and all awar	d must recuse themselves in	tions are determined via a jury process, and all awardees must meet the criteria specified by WESTAF and the panelists must disclose any conflicts of interest, and must recuse themselves in the event of a conflict. All grantees
reports are	must submit final reports through WESTAF's on-line grant managment system, Culture Grants Online (CGO TM)describing the nature of the activities supported by the grant (s). These reports are reviewed and validated by the program manager prior to disbursing award funds. ARRA awardes were also selected through a jury process, based on a set of criteria established by WESTAF and the National Endowment for the Arts. The organizations receiving the awards were required to submit detailed documentation of program expenditures prior	nt managment syste iger prior to disbursi if the Arts The organ	em, Culture Grants Onling award funds. ARR/	ine (CGO TM)describir A awardees were also a	ent system, Culture Grants Online (CGO TM)describing the nature of the activities supported by the grant (s). T disbursing award funds. ARRA awardees were also selected through a jury process, based on a set of criteria ne organizations receiving the awards were required to submit detailed documentation of program expenditure	supported by the grant (s). These ss, based on a set of criteria aion of program expenditures prior
to receiving	to receiving grant funds. Additionally, all awardees went through a desk audit before the final payment from their grant was made.	through a desk aud	it before the final paym	nent from their grant w	as made.	

Schedule I (Form 990) (2010)

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

OMB No 1545-0047

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

WESTERN STATES ARTS FEDERATION 23-7255426 Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only) Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. (c) Corrected? 1 (a) Name of disqualified person (b) Description of transaction Yes No (1) (2) (3)(4)(5) (6)2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a. (a) Name of interested person and purpose (b) Loan to or from (c) Original (d) Balance due (e) In default? (f) Approved (g) Written the organization? by board or principal amount agreement? committee? To From Yes No Yes No Yes No (1) (2)(3)(4)(5)(6)(7)(8)(9)(10)Total Part III **Grants or Assistance Benefiting Interested Persons.** Complete if the organization answered "Yes" on Form 990, Part IV, line 27 (a) Name of interested person (b) Relationship between interested person and the (c) Amount and type of assistance organization (1) (2)(3)(4)(5) (6)(7) (8) (9) (10)

Part IV	Business Transactions Involving Complete if the organization and	ng Interested Persons. swered "Yes" on Form 990), Part IV, line 28a, 2	28b, or 28c.	····	
	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organiz	aring of zation's nues?
(1) See	Calcadula I. Dant V. Ctatamant 1			-	Yes	No
(1) See (2)	Schedule L, Part V, Statement 1	_		· · · · · · · · · · · · · · · · · ·	+-	_
(3)				· 	_	
(4)						
(5)						
(6)						
(7)					_	<u> </u>
<u>(8)</u> <u>(9)</u>					-	
(10)						-
Part V	Supplemental Information Complete this part to provide ac	dditional information for re	sponses to question	ns on Schedule L (see instruction	ons).	
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization	Employer identification number
WESTERN STATES ARTS FEDERATION	23-7255426
Form 990, Part VI, Section B, Line 11b - A copy of the Form 990 was provided via email to members of	f the Board of Trustees prior to filing
Form 990, Part VI, Section B, Line 12c - Board members complete a conflict-of-interest disclosure for	m annually All disbursements of the
organization are reviewed by the Finance Officer to ensure that payments made are in compliance with	th all organizational policies
Form 990, Part VI, Section B, Line 15 - The Executive Director compensation is reviewed annually by	the Executive Committee of the
Board of Directors, the members of which have access to salary surveys from comparable organization	
Arts Organizations. The most recent review was in 2011 The Executive Director sets compensation for	or key employees, based on a market
review of salaries for similar positions	•••••
Form 990, Part VI, Section C, Line 19 - Governing documents, conflict of interest policies, and financi public upon request	al statements are available to the
passic upon request	
Form 990, Part IX, Line 18 - Public Official Travel ⁻ Per the Organization's by-laws, WESTAF's board all Executive Directors of the State Arts Agencies from its 13 western state region WESTAF expects trus	
thus funds required trustee travel to the three scheduled in-person meetings each year and to the Ex	
applicable. In furtherance of its mission, WESTAF provides professional development opportunities,	
Art Agencies' Executive Directors in its region, and funds travel to these seminars and conferences	, , ,
speakers for these seminars and conferences who are public officials, and WESTAF will also fund this	s speaker travel
Form 990, Part XI, Line 5 - Includes unrealized loss on investments of \$17,036 and a difference of \$1,60	51 between tax and book income
from investment in subsidiary.	

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SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

▶ See separate instructions. ▶ Attach to Form 990.

2010

OMB No 1545-0047

Open to Public

Inspection
Employer identification number

(g) Section 512(b)(13) controlled entity? (f)
Direct controlling
entity Ŷ Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) Yes 23-7255426 (f)
Direct controlling
entity (e) End-of-year assets (e)
Public charity status
(if section 501(c)(3)) Identification of Disregarded Entities (Complete of the organization answered "Yes" to Form 990, Part IV, line 33.) (d) Total income (d) Exempt Code section (c)
Legal domicile (state
or foreign country) (c)
Legal domicile (state or foreign country) (b)
Primary activity (b) Primary activity (a) Name, address, and EIN of disregarded entity (a) Name, address, and EIN of related organization **WESTERN STATES ARTS FEDERATION** Part I Part II

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Cat No 50135Y

Schedule R (Form 990) 2010

Schedule R (Form 990) 2010

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) Part III

(k) Percentage ownership		80.96%							ן ן. אַן ן.	(h) Percentage ownership								Schedule R (Form 990) 2010
(I) General or managing partner?	Yes No	>							990, Pa	of r assets								ule R (For
(I) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)		221,673							Yes" to Form	(g) Share of end-of-year assets								Sched
	•								wered "	(f) Share of total income						:		
(h) Disproportionate allocations?	Yes No	`					-		on ans ear.)	Share of t								
g) and-of-year sets		281,996							Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	(e) Type of entity (C corp, S corp, or trust)								
(n) Share of total income St		222,355							rust (Complete	(d) Direct controlling entity								
int Share ted, om									oration or T ed as a corp	(c) Legal domicile (state or foreign country)								
(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)		Related							e as a Corp zations treat	(b) Primary activity								
(d) Direct controlling entity		N/A							tions Taxable elated organi	Prima								
(c) Legal domicile (state or foreign country)		00							d Organiza t ne or more r	rganization								
the country) (b) (c) (d) (d) Predominant Share of total income of total income (related, of state or foreign foreign country) (c) (d) Predominant Share of total income of t	1	Online Art Fair Management							ation of Relate	(a) Name, address, and EIN of related organization								
(a) Name, address, and EIN of related organization		(1) ZAPP Software LL Online Art Fa 1743 Wazee Street, De	(2)	(6)	(4)	(5)	(9)	(2)	Part IV Identification Inc. 34 be	Name, address	(1)	(2)	(6)	(4)	(5)	(9)	(i)	

	anizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)
	"Yes" to Form 990, Part I
	le organization answered
	inizations (Complete if th
.010	actions With Related Orga
Schedule R (Form 990) 2	Part V Trans

	ansactions with one or more related organizations listed in Parts II–IV?	ansactions with one or more related organizations listed in Parts II–IV?	ansactions with one or more related organizations listed in Parts II–IV?	ansactions with one or more related organizations listed in Parts II–IV?	Yes No		>	>	>	>	>	>	<u> </u>	\ 	<u> </u>		>	>	>	>	>	A STATE OF THE STA	•	> 1	
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Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. 1 During the tax year, did the organization engage in any of the following transactions with or a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity. 2 Gift, grant, or capital contribution to other organization(s). 3 Gift, grant, or capital contribution from other organization(s). 4 Loans or loan guarantees to or for other organization(s). 5 Loans or loan guarantees by other organization(s). 6 Loans or loan guarantees by other organization(s). 7 Sale of assets from other organization(s). 8 Purchase of assets from other organization(s). 9 Purchase of assets from other organization(s). 9 Purchase of facilities, equipment, or other assets from other organization(s). 9 Performance of services or membership or fundraising solicitations for other organization(s). 9 Performance of services or membership or fundraising solicitations by other organization(s). 10 Performance of services or membership or fundraising solicitations by other organization(s). 11 Reformance of services or membership or fundraising solicitations by other organization(s). 12 Rembursement paid to other organization for expenses. 13 Reimbursement paid by other organization for expenses.	omplete line 1 if any entity is listed in Parts II, III, or IV or any of the tax year, did the organization engage in any of ceipt of (i) interest (ii) annuities (iii) royalties or (iv) rent t, grant, or capital contribution from other organization(s). It, grant, or capital contribution from other organization(s) ans or loan guarantees to or for other organization(s)	omplete line 1 if any entity is listed in Parts I ring the tax year, did the organization engage ceipt of (i) interest (ii) annuities (iii) royalties t, grant, or capital contribution to other organist, or capital contribution from other organis or loan guarantees to or for other organization ans or loan guarantees by other organization e of assets to other organization(s) rchase of assets from other organization(s) ise of facilities, equipment, or other assets tormance of services or membership or fun formance of paid employees	omplete line 1 if any entity is listed ring the tax year, did the organizate ceipt of (i) interest (ii) annuities (ii) t, grant, or capital contribution to t, grant, or capital contribution for ans or loan guarantees to or for of ans or loan guarantees by other organization (chase of assets from other organization) are of facilities, equipment, or oth formance of services or members aring of facilities, equipment, mail aring of paid employees mbursement paid to other organimbursement paid by other organimbursement paid by other organim	omplete line 1 if any erring the tax year, did the ceipt of (i) interest (ii) at grant, or capital control or capital	1.~) <u> </u>	ి	ثب	تد	≒	≂	Φ	ုပ္	Š	Š		Š	ę	ę	듩	JIE.	Ę	뒫		Ĕ

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

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) (c) (d) (e Primary activity Legal domicile Are all partners Sharing (state or foreign country) section end-of	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3)	e of -year ets	(f) Disproportionate allocations?	(g) Code V—UBI amount in box 20 of Schedule K-1	(h) General or managing partner?
			organizations?	a 1	NON NON	(Form 1065)	NO NO
(1)					3		
(2)							
(6)							
(4)							_
(5)							
(9)							
(1)							
(8)							
(6)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
						Schedule R (Form 990) 2010	rm 990) 20

Schedule H (Form 990) 2010	Page 5
Part VII	Supplemental Information Complete this part to provide additional information for responses to questions on Schedule R (see instructions).	
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WESTERN STATES ARTS FEDERATION 23-7255426

Form Schedule I

Page 1

Line Number Part II

Description of Grants and Other Assistance to Governments and Organizations in the United States

		Amount of cash grant	Amount of non-cash assistance
Name and address	Central District Forum for Arts and Ideas	15,748	0
	PO Box 22824		
	Seattle, WA 98122-0824		
EIN	91-1954917		
IRC code section	501(c)(3)		
Method of valuation			
Description of non-			
cash assistance	The Western States Arts Federation recovered as		
Purpose of grant	The Western States Arts Federation received an ARRA grant from the National Endowment for the		
	Arts to preserve staffing at not-for-profit arts		
	organizations in the 13 western states during the		
	recent economic downturn CD Forum was one of the		
	awardees for this stimulus funding		
Name and address	Childsplay Inc	6,132	0
	900 South Mitchell Drive		
EIN	Tempe, AZ 85281		
IRC code section	86-0336474 504(a)(a)		
	501(c)(3)		
Method of valuation			
Description of non- cash assistance			
Purpose of grant	The Western States Arts Federation received an		
rurpose or grain			
	ARRA grant from the National Endowment for the Arts to preserve staffing at not-for-profit arts		
	organizations in the 13 western states during the		
	recent economic downturn. Childsplay was one of the		
	awardees for this stimulus funding		
Name and address		45.000	
Name and address	El Centro Su Teatro	15,228	0
	4725 High Street Denver, CO 80216		
EIN	74-2440659		
IRC code section	501(c)(3)		
Method of valuation			
Description of non-			
cash assistance			
Purpose of grant	The Western States Arts Federation received an		
p g	ARRA grant from the National Endowment for the		
	Arts to preserve staffing at not-for-profit arts		
	organizations in the 13 western states during the		
	recent economic downturn. Su Teatro was one of the		
	awardees for this stimulus funding		
Name and address	Crost Loop Inc	17.500	
Name and address	Great Leap Inc	17,500	0
	1145 Wilshire Blvd Suite 100-D Los Angeles, CA 90017		
EIN	95-3337990		
IRC code section	501(c)(3)		
Method of valuation			
Description of non-			
cash assistance			
Purpose of grant	The Western States Arts Federation received an		
pood or grain	ARRA grant from the National Endowment for the		
	Arts to preserve staffing at not-for-profit arts		
	to producte during at not-tor-profit arts		

Schedule I, Part IV, S	organizations in the 13 western states during the recent economic downturn. Great Leap was one of	WESTERN STATES AR	TS FEDERATION
	the awardees for this stimulus funding		
Name and address	LaRaza Bookstore 1022 22nd Street	17,587	0
	Sacramento, CA 95816		
EIN	94-2365928		
IRC code section	501(c)(3)		
Method of valuation	• • • •		
Description of non-			
cash assistance			
Purpose of grant	The Western States Arts Federation received an		
	ARRA grant from the National Endowment for the		
	Arts to preserve staffing at not-for-profit arts		
	organizations in the 13 western states during the		
	recent economic downturn LaRaza Bookstore was		
	one of the awardees for this stimulus funding		
Name and address	Nez Perce Tribe	25,234	0
	PO Box 365		
	Lapwai, ID 83540		
EIN	82-0255928		
IRC code section	Government Entity		
Method of valuation			
Description of non-			
cash assistance	The Meeters Clates Arts Federation recovered as		
Purpose of grant	The Western States Arts Federation received an		
	ARRA grant from the National Endowment for the Arts to preserve staffing at not-for-profit arts		
	organizations in the 13 western states during the		
	recent economic downturn. The Nez Perce Tribe was		
	one of the awardees for this stimulus funding		
Name and address	Northwest Musuem of Arts and Culture	8,139	0
	2316 West First Avenue	5,755	-
	Spokane, WA 99201		
EIN	91-6000186		
IRC code section	501(c)(3)		
Method of valuation			
Description of non-			
cash assistance			
Purpose of grant	The Western States Arts Federation received an		
	ARRA grant from the National Endowment for the		
	Arts to preserve staffing at not-for-profit arts		
	organizations in the 13 western states during the		
	recent economic downturn. Northwest Museum of		
	Arts and Culture was one of the awardees for this stimulus funding		
Name and address	Portland Institute for Contemporary Art	7 002	0
Maine and address	224 NW 13th Number 305	7,993	U
	Portland, OR 97209		
EIN	93-1177971		
IRC code section	501(c)(3)		
Method of valuation			
Description of non- cash assistance			
Purpose of grant	The Western States Arts Federation received an		
Purpose of grant	The Western States Arts Federation received an ARRA grant from the National Endowment for the		
Purpose of grant			

Schedule I, Part IV,	Statement 1 recent economic downturn Portland Institure for Contemporary Art was one of the awardees for this stimulus funding	WESTERN STATES AF	RTS FEDERATION
Name and address EIN IRC code section Method of valuation Description of non- cash assistance Purpose of grant	Southwest Association for Indian Arts PO Box 969 Sante Fe, NM 87504 85-0210254 501(c)(3) The Western States Arts Federation received an ARRA grant from the National Endowment for the	7,333	0
	Arts to preserve staffing at not-for-profit arts organizations in the 13 western states during the recent economic downturn. Southwest Association for Indian Arts was one of the awardees for this stimulus funding.		
Name and address EIN IRC code section Method of valuation	Tucson Pima Arts Council 10 East Broadway Tucson, AZ 85701 86-0465675 501(c)(3)	10,132	0
Description of non- cash assistance Purpose of grant	The Western States Arts Federation received an ARRA grant from the National Endowment for the Arts to preserve staffing at not-for-profit arts organizations in the 13 western states during the recent economic downturn. Tucson Pima Arts Council was one of the awardees for this stimulus funding		
EIN IRC code section	Wind River Tribal College PO Box 8300 Ethete, WY 82520 83-0336501 501(c)(3)	22,167	0
Method of valuation Description of non- cash assistance Purpose of grant	The Western States Arts Federation received an ARRA grant from the National Endowment for the Arts to preserve staffing at not-for-profit arts organizations in the 13 western states during the recent economic downturn. Wind River Tribal College was one of the awardees for this stimulus funding		
Name and address EIN IRC code section Method of valuation Description of non- cash assistance	SOMArts Cultural Center 934 Brannan Street San Francisco, CA 94103 94-2655955 501(c)(3)	31,348	0
Purpose of grant	To support visual arts touring	12.500	
Name and address	Western Arts Alliance 715 Southwest Morrison Street	12,500	0

Schedule I, Part IV,	Statement 1	WESTERN STATES AR	WESTERN STATES ARTS FEDERATION	
	Suite 600 Portland, OR 97205-3102			
EIN	95-3497056			
IRC code section	501(c)(3)			
Method of valuation				
Description of non-				
cash assistance				
Purpose of grant	Conference support			
Name and address	Nevada Museum of Art	25,000	0	
	160 West Street			
	Reno, NV 89501-1916			
EIN	88-6003042			
IRC code section	501(c)(3)			
Method of valuation				
Description of non-				
cash assistance	To average would add to week			
Purpose of grant	To support visual arts touring			
Name and address	Northwest Museum of Arts and Culture	8,139	0	
	2316 West First Avenue			
EM	Spokane, WA 99201			
EIN	32-8040011 504(a)(2)			
IRC code section Method of valuation	501(c)(3)			
Description of non-				
cash assistance				
Purpose of grant	The Western States Arts Federation received an			
, ,	ARRA grant from the National Endowment for the			
	Arts to preserve staffing at not-for-profit arts			
	organizations in the 13 western states during the			
	recent economic downturn Northwest Museum of			
	Arts and Culture was one of the awardees for this			
	stimulus funding			
Name and address	Anchorage Museum at Rasmussen Center	25,000	0	
	625 C Street			
	Anchorage, AK 99501			
EIN	92-6009317			
IRC code section	501(c)(3)			
Method of valuation				
Description of non-				
cash assistance Purpose of grant	To support visual arts touring			
Name and address	Colorado Springs Fine Arts Center	25,000	0	
	30 West Dale Street			
EIN	Colorado Springs, CO 80903-3249 84-0406947			
IRC code section	501(c)(3)			
Method of valuation	* * * *			
Description of non-				
cash assistance				
Purpose of grant	To support visual arts touring			
Name and address	Hallie Ford Museum at Willamette University	25,000	0	
	700 State Street	20,000	J	
	Salem, OR 97301			
EIN	93-0386972			
IRC code section	501(c)(3)			
Method of valuation				
Description of non-				
cash assistance				

Schedule I, Part IV,	Statement 1	WESTERN STATES A	WESTERN STATES ARTS FEDERATION	
Purpose of grant	To support visual arts touring			
Name and address	Missoula Art Museum	25,000	0	
	335 North Pattee			
	Missoula, MT 59802			
EIN	81-0496898			
IRC code section	501(c)(3)			
Method of valuation				
Description of non-				
cash assistance				
Purpose of grant	To support visual arts touring			

Schedule L, Part V, Statement 1

Form Schedule L

Page 2

Line Number Part IV

WESTERN STATES ARTS FEDERATION 23-7255426

Description of Business Transactions Involving Interested Persons

	_	Amount of transaction
Name	Malissa Feruzzi Shriver	38,279
Relationship with organization	Ms Shriver is a WESTAF trustee and also the Chair of the	
	California Arts Council	
Description of transaction	This is the state participation fee for the California Arts Council All	
	states in the WESTAF region pay an annual state participation	
	fee These fees have not increased in 17 years, and Ms Shriver	
	does not have any influence over the amount of the fees or the	
	payment of such	
Sharing Of Revenues	No	

Schedule O, Statement 1

Form 990

Page 2

Line Number Part III Line 4a

WESTERN STATES ARTS FEDERATION 23-7255426

First Program Service Accomplishments Description

Description

include museums in Anchorage, AK, Colorado Springs, CO, Missoula, MT and Reno, NV Together, these touring programs showcased over 2,100 artists for 414,500 audience members, including 190,000 childeren in mostly under-served communities throughout the West

Schedule O, Statement 2

Form 990

Page 2

Line Number Part III Line 4c

WESTERN STATES ARTS FEDERATION 23-7255426

Third Program Service Accomplishments Description

Description

diverse audiences. This organization used their ARRA award to support a staff member working on the development of bilingual scripts, as many members of their audiences are English language learners.

Schedule R, Part VII, Statement 1

Form Schedule R

Page 3

Line Number Part V Line 2

WESTERN STATES ARTS FEDERATION 23-7255426

Description of Covered Relationships and Transaction Thresholds		
		Amount involved
Name	ZAPP Software LLC	338,000
Transaction type	p	
Method of determining amount involved	Actual expenses	
Name	ZAPP Software LLC	212,774
Transaction type	r	
Method of determining amount involved	Pro-rata share of income distribution	