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Form **990** 

Department of the Treasury
Internal Revenue Service

# **Return of Organization Exempt From Income Tax**

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

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

2010

Open to Public Inspection

ber  50  3,912,497  Yes No  ee instructions) er •
3,912,497  Yes No Yes No ee instructions)
3,912,497  Yes No Yes No ee instructions)
3,912,497   ✓ Yes ✓ No  ✓ Yes ✓ No  ee instructions)  er ►
Fyes FNo Fyes No ee instructions) er ►
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7.5
74
12
45,384
44,310
Current Year
3,529,985
70,162
101
96,494
3,696,742
2,301,987
0
721 257
731,257
857,669
857,669 3,890,913 -194,171
857,669 3,890,913 -194,171 End of Year
857,669 3,890,913 -194,171 End of Year 4,215,355
857,669 3,890,913 -194,171 End of Year

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

Form	990	(2010)
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Par	t III	Statement of Check if Schedule			<b>lishments</b> Jestion in this Part I	II		
1	Briefl	y describe the orga	anızatıon's mıssı	on				
					ISING AND RESPO NG FOR ALL OF THE	NSIBLY ALLO CATING FUE ARTS	JNDS TO PROMOTE AR	TISTIC
2		ne organization und Tor Form 990 or 99		ficant program se	ervices during the ye	ear which were not listed o	n Yes 🔽 No	
	If "Ye	s," describe these	new services on	Schedule O				
3	servic	ces?			nt changes in how it	conducts, any program	┌ Yes ┌ No	
	If "Ye	s," describe these	changes on Sche	edule O				
4	Section	on 501(c)(3) and 5	01(c)(4) organız	ations and secti		ee largest program service s are required to report the m service reported		
4a	(Code	 e	) (Expenses \$	2,301,987	ıncludıng grants of \$	2,301,987 ) (Revenu	ne \$ )	
		ITS ARTSFUND PROVID , 63 ORGANIZATIONS W				3) ARTS ORGANIZATIONS DURI	NG THE YEAR ENDED SEPTEME	3ER 30,
4b	(Code		) (Expenses \$	133,700	ıncludıng grants of \$	) (Revenue	e \$ 2,000 )	
					ED COMPREHENSIVE ECC PLETED IN FY2011 (WOR	DNOMIC IMPACT STUDIES OF AR K BEGAN IN FY2010)	TS AND HERITAGE ORGANIZAT	TIONS AT
	(Code	e	) (Expenses \$	130,723	ıncludıng grants of \$	) (Revenue	e \$ )	
	PROG					R MELLON-FOUNDATION FUNDE ZATIONS TO INSPIRE GREATER		NATIONAL
	Othe	er program services	(Describe in S	chedule O ) <b>See</b> :	also Additional Data	for Description		
		enses \$	•	ncluding grants o		) (Revenue \$	93,277)	
4e	Tota	I program service e	xpenses <b>⊩</b> \$	3,167,18	6			

Part IV	Checklist	of Required	Schedules

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

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part $I$	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		Νο
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		Νο
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Νο
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		N o
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	Yes	
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?  Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm <b>990</b>	(2010)

Form 990 (	2010)	
Part V	Statements Regarding Other IRS Filings and	Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			
	<u></u>		Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		103	- 110
	1a 18			
,	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
	the number reported in Box 3 of Form 1096. Enter -0- if not applicable the number of Forms W-2G included in line 1 a Enter -0- if not applicable to the number of Enter when the second in the second		Yes	
	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			
,	That least one is reported on line 2a, did the organization me an required lederal employment tax returns?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the	_		
	year <sup>?</sup>	3a	Yes	
)		3b	Yes	
	account)?	4a		Νo
)	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the surrounding a power to a surrounding to the state of the state			B.
		5a		No
	the chiral of Schedule O contains a response to any question in this Part V  te number reported in Box 3 of Form 1096. Enter -0 - if not applicable te number of Forms W-20 included in line 1a. Enter -0 - if not applicable te number of Forms W-20 included in line 1a. Enter -0 - if not applicable organization comply with backup withholding rules for reportable payments to verdors and reportable (gambling) winning to be prize winners? the size of mployees reported on Form W-3, Transmittal of Wage and Tax tan to response to the calendar year ending with or within the vear covered by this to one is reported on line 2a, did the organization file all required federal employment tax returns? the sum of lines 1a and 2a is greater than 250, our may be required to e-file (see instructions) organization have unrelated business gross income of \$1,000 or more during the "has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule 0. These time during the calendar year, did the organization have an interest in, or a signature or other authority manical account in a foreign country.  **Tructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts organization a party to a prohibited tax shelter transaction at any time during the tax year?  **Lisable party nowly the organization flat it was or is a party to a prohibited tax shelter transaction?  **To line Sa or Sb, did the organization flie Form 8886-T?  **Le organization have annual gress receipts that are normally greater than \$100,000, and did the atten asolici any contributions that were not tax deductible?  **To did the organization include with every solicitation an express statement that such contributions or griss tations that may receive deductible contributions under section 170(c).  **Organization receive a psyment in access of \$75 made party as a contribution and partly for goods and sprovided to the payor?  **To did the organization maintaining doors dovised funds and section 509(a) (3) supporting or			No
:	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		Νο
	organization solicit any contributions that were not tax deductible?			
)	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	c h		
		6b		
		7a	Yes	
	services provided to the payor?	/a	165	
•	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		Νo
ı	If "Yes," indicate the number of Forms 8282 filed during the year			
•	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		Νo
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
ı	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	7g		
	•	- 9		
		7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did			
		8		
		-		
		9a		
	-	9b		
	Section 501(c)(7) organizations. Enter			
1	1 1			
	facilities			
	Section 501(c)(12) organizations. Enter			
1	Gross income from members or shareholders			
)	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them )			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
1	If "Vee," enter the amount of tay, exempt interest received or promised during the			
	1176			
•	year 12b			
•	year  Section 501(c)(29) qualified nonprofit health insurance issuers.			
•	year 12b	13a		
•	year  Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization licensed to issue qualified health plans in more than one state?	13a		
1	Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O	13a		
•	Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O  Enter the amount of reserves the organization is required to maintain by the states	13a		
	Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O  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  Enter the amount of reserves on hand	13a		
	Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O  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  Enter the amount of reserves on hand	13a		No

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax			
Id	year			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		Νο
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		N o
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
	ection B. Policies (This Section B requests information about policies not required by the Internal evenue Code.)			
Ne	veriue coue.)		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?			
		11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
Ь	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions )			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Νο
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure	100		
17	List the States with which a copy of this Form 990 is required to be filed ►WA			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply			
	Own website Another's website V Upon request			

- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization CHERYL OLIVER
  10 HARRISON STREET SUITE 200

SEATTLE, WA 981094509 (206) 281-9050

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

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organ		elated o	rgan	ızatı	on c	omper	sate	d any current office	er, director, or trust	ee
(A) Name and Title	(B) A verage hours	(C) Position (check all that apply)						<b>(D)</b> Reportable compensation	<b>(E)</b> Reportable compensation	<b>(F)</b> Estimated amount of other
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See Additional Data Table										
-										
			<u> </u>							

\$100,000 in compensation from the organization ▶0

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

	<b>(A)</b> Name and Title	(B) Average hours per							( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensatior from related		(F) Estimated amount of ot compensati	
		week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)		from t organizati relati organiza	the ion and ed
e A	ldıtıonal Data Table												
b								-					
с	Total from continuation sheet							<b>&gt;</b>	160,000		0		15,597
d									<u>'</u>		<u> ا</u>		15,597
	Total number of individuals (in \$100,000 in reportable compe	•				tea	above	) Wnc	received more tha	п			
												Yes	No
	Did the organization list any <b>fc</b> on line 1a? <i>If</i> "Yes," complete S					eye •	mploy •	ee, o •	r highest compens	ated employee	3		No
	For any individual listed on line organization and related organ individual											V	
	Did any person listed on line 1	a receive or accru	ie com	• pensa	• ition	- fror	nany	• unrel	lated organization o	or individual for	4	Yes	
	services rendered to the organ	nization? If "Yes,"	complet	e Sch	edul	e J fo	or suct	n pers	son	•	5		Νo
Se	ction B. Independent Co	ntractors											
	Complete this table for your five \$100,000 of compensation fro	e highest comper		ındep	ende	ent c	ontra	tors	that received more	e than			
		(A) ame and business add							Descr	(B) uption of services		(C Compen	
												•	
—													

		2010)					Pa	age <b>9</b>
art V		Statement of Revenu	le		<b>(A)</b> Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenu exclude from tax under section
								512, 513, oi 514
2 42	1a	Federated campaigns	1a	81,855				
continuations, gins, grants and other similar amounts	ь	Membership dues	. 1b					
? <u>ĕ</u>	c	Fundraising events	. 1c	-				
		Related organizations		616,157				
% E		_						
5.≅		Government grants (contributions)	<b>1e</b>					
₹ 22	f	All other contributions, gifts, grants, similar amounts not included above	and <b>1f</b>	2,831,973				
<u> </u>	g	Noncash contributions included in li		59,766				
5월	h	Total. Add lines 1a-1f	<b>.</b>		3,529,985			
	<u>"</u>	Total. Add filles 1a-11						
Program Service Revenue	2-	OTHER		Business Code		66.4		
ewel		OTHER ECONOMIC IMPACT STUDY		711300 711300	68,162 2,000			
<u>ن</u> ا	C	ECONOMIC IMPACT STUDI		/11300	2,000	2,000		<del>                                     </del>
Š S	d							
<b>Š</b>	e							
E		A II a b b a u u u a u u u u a u u u a u u u u						
5	T	All other program service rev	venue					
ΔŤ	g	<b>Total.</b> Add lines 2a-2f			70,162			
	3	Investment income (includin	g dıvıdends, ınterest					
		and other similar amounts)			101			1
	4	Income from investment of tax-exe	empt bond proceeds	_				
	5	Royalties						
		_	(ı) Real	(II) Personal				
		Gross Rents	287,134					
	b	Less rental expenses	215,755					
	С	Rental income	71,379					
	d	or (loss) Let rental income or (loss)			71,379		45,384	25,9 <sup>,</sup>
		, ,	(ı) Securities	(II) O ther				
	b	Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss)						
	d	Net gain or (loss)						
		Gross income from fundraisir (not including						
		\$ of contributions reported on I See Part IV, line 18						
		Secture 10, inic 10	а					
.	ь	Less direct expenses	. Ь					
		Net income or (loss) from fun	<u>-</u>	<u> </u>				
	9a	Gross income from gaming a	ctivities See Part IV, line 19	a				
	b	Less direct expenses		ь				
	c	Net income or (loss) from ga	ming activities					
	10a	Gross sales of inventory, les returns and allowances	s					
			а					
		Less cost of goods sold .						
L	С	Net income or (loss) from sa	ies of inventory F	D				<u> </u>
F		Miscellaneous Revenue		Business Code 511120	25,115	75 115		
		MANAGEMENT FEE		511120	25,115	25,115		
	b		<u></u>					
	C							
	d	All other revenue	•					
	е	Total. Add lines 11a-11d .			25,115			
			<b>F</b>	<u> </u>				
	12	Total revenue. See Instruction	ons		3.696.742	95.277	45.384	26.0

	990 (2010)				Page <b>10</b>
Par	•				
	Section $501(c)(3)$ and $501(c)(4)$ organizations mus ll other organizations must complete column (A) but are not required to $c$	-		(D)	
	ot include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and     general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	2,301,987			·
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	176,655	94,687	37,804	44,164
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	440,003	176,103	96,520	167,380
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	13,259	5,725	2,557	4,977
9	Other employee benefits	62,111	25,555	13,126	23,430
10	Payroll taxes	39,229	17,244	7,694	14,291
а	Fees for services (non-employees) Management	,	,	,	,
ь	Legal				
С	Accounting	31,487		31,487	
d	Lobbying	49,805	49,805	,	
e	Professional fundraising services See Part IV, line 17	11,111	,		
f	Investment management fees				
g g	Other	241,060	202,075	23,807	15,178
12	Advertising and promotion	872	486	33	353
13	Office expenses	71,410	39,588	10,151	21,671
14	Information technology	, 1, 110	03,000	10,101	
15	Royalties				
16	Occupancy	70,816	32,130	14,810	23,876
17	Travel	17,354	10,906	2,345	4,103
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	17,001	13,500	2,5.5	.,,100
19	Conferences, conventions, and meetings	111,888	68,504	2,537	40,847
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	18,610		18,610	
23	Insurance	18,841		18,841	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	CULTURAL DATABASE	67,522	67,522		
Ь	CULTURAL DISTRICT EXPEN	49,246	49,246		
c	BAD DEBT	46,680		46,680	
d	COMMUNICATIONS	16,328	8,207	2,432	5,689
e	NONCASH EXPENSES	13,379	6,204		7,175
f	All other expenses	32,371	11,212	17,510	3,649
25	Total functional expenses. Add lines 1 through 24f	3,890,913	3,167,186	346,944	376,783
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a	, , , , , ,			, -
	combined educational campaign and fundraising solicitation				

Pa	irt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			173,295	1	98,954
	2	Savings and temporary cash investments			944,154	2	1,243,622
	3	Pledges and grants receivable, net			898,419	3	641,625
	4	Accounts receivable, net			121	4	215
	5	Receivables from current and former officers, directors, trustees highest compensated employees. Complete Part II of	, key e	employees, and			
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined under sepersons described in section $4958(c)(3)(B)$ , and contributing ensponsoring organizations of section $501(c)(9)$ voluntary employ organizations (see instructions)					
솭		Schedule L		6			
ssets	7	Notes and loans receivable, net		7			
⋖	8	Inventories for sale or use		8			
	9	Prepaid expenses and deferred charges	. •		71,136	9	69,250
	10a	Land, buildings, and equipment cost or other basis <i>Complete</i> Part VI of Schedule D	10a	3,767,077			
	ь	Less accumulated depreciation	accumulated depreciation				2,160,836
	11	Investments—publicly traded securities		11			
	12	Investments—other securities See Part IV, line 11				12	
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			5,202	15	853
	16	Total assets. Add lines 1 through 15 (must equal line 34)			4,333,367	16	4,215,355
	17	Accounts payable and accrued expenses .			103,576	17	122,308
	18	Grants payable			897,743	18	965,634
	19	Deferred revenue				19	
- 46	20	Tax-exempt bond liabilities				20	
<u>. 6</u>	21	Escrow or custodial account liability Complete Part IV of Schedule	eD.	•		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
Ï		persons Complete Part II of Schedule L		-		22	
	23	Secured mortgages and notes payable to unrelated third parties		•	465,488	23	455,024
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			1,466,807	26	1,542,966
ces		Organizations that follow SFAS 117, check here ▶     and complete   Table   T	lete lir	nes 27			
<u>8</u>	27	Unrestricted net assets			2,254,923	27	2,283,645
Balance	28	Temporarily restricted net assets			611,637	28	388,744
돧	29	Permanently restricted net assets				29	
or Fund		Organizations that do not follow SFAS 117, check here ► and lines 30 through 34.	d comp	olete			
	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund .				31	
	32	Retained earnings, endowment, accumulated income, or other fu	nds			32	
Net	33	Total net assets or fund balances			2,866,560	33	2,672,389
ž	34	Total liabilities and net assets/fund balances			4,333,367	34	4,215,355

Ра	Check if Schedule O contains a response to any question in this Part XI			.୮	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		3,6	596,74
2	Total expenses (must equal Part IX, column (A), line 25)	2			
3	Revenue less expenses Subtract line 2 from line 1	3		- 1	194,17
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		2,8	366,56
5	Other changes in net assets or fund balances (explain in Schedule O)	5			,
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		2,6	572,38
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII			৮	
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of t audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O	•	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both	ssued			
	Separate basis Consolidated basis Both consolidated and separated basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the r	equired	3b		

CORPORATE COUNCIL FOR THE ARTS DBA ARTSFUND

**Employer identification number** 

# OMB No 1545-0047

Inspection

# **SCHEDULE A**

(Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

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

**Public Charity Status and Public Support** 

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

91-0839644

Par	t I	Reas	on for Pu	blic Charity Stat	t <b>us</b> (All org	anızatıons	must comp	lete this pa	art.) See in	structions	
The o	rganı	zatıon ıs	not a privat	e foundation becaus	eıtıs (Forlı	nes 1 throug	gh 11, check	only one bo	x )		_
1	$\sqcap$	A churc	h, conventi	on of churches, or as	sociation of	churches de	scribed in <b>se</b>	ction 170(b	)(1)(A)(i).		
2	$\sqcap$	A scho	ol described	ın <b>section 170(b)(1</b>	)( <b>A)(ii).</b> (Att	tach Schedu	le E)				
3	$\Gamma$	A hosp	ital or a coo	perative hospital ser	vice organiz	atıon descrıl	oed in <b>sectio</b> i	n 170(b)(1)(	A)(iii).		
4	Γ			ı organızatıon operat ty, and state	ed in conjund	ction with a l	nospital desc	rıbed ın <b>sect</b>	tion 170(b)(	<b>1)(A)(iii).</b> En	ter the
5	Г	An orga	anızatıon ope	erated for the benefit	of a college	or universit	y owned or op	perated by a	government	al unit descri	ıbed ın
		section	170(b)(1)(	<b>A)(iv).</b> (Complete Pa	art II )						
6	$\sqcap$	A feder	al, state, or	local government or	government	al unıt descr	ıbed ın <b>sectio</b>	on 170(b)(1)	)(A)(v).		
7	<b>▽</b>	describ	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	$\sqcap$	A comn	nunity trust	described in <b>section</b>	170(b)(1)(A	<b>A)(vi)</b> (Com	plete Part II	)			
9	$\Gamma$	An orga	anization tha	it normally receives	(1) more tha	an 331/3% o	fits support	from contrib	utions, mem	bership fees,	and gross
		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 <b>section 509(a)(2).</b> (Complete Part III)									
10	Γ	Anorga	anızatıon org	janized and operated	exclusively	to test for p	ublic safety	See <b>section</b>	509(a)(4).		
11	, _	one or r the box <b>a</b>	more publicl that descri Type I	anized and operated y supported organiza bes the type of supp <b>b</b> Type II	ations descri orting organi [ <b>c</b>	bed in section zation and c	on 509(a)(1) omplete lines - Functionall	or section 5 s 11e throug y integrated	09(a)(2) Se h 11h	ee section 50	<b>9(a)(3).</b> Check III - Other
e	Γ	other th section	nan foundatı 509(a)(2)	ox, I certify that the on managers and oth	ner than one	or more publ	ıcly supporte	ed organızatı	ons describe	ed in section	509(a)(1) or
f g		checkt	hıs box	received a written de .006, has the organi						II supporting	g organization,
3			g persons?	,		, 5		,			
h		and (III) (ii) a fa (iii) a 3	below, the mily membe 5% control	rectly or indirectly or governing body of th er of a person describ led entity of a person ig information about	e the suppor ped in (i) abo n described i	ted organıza ve <sup>?</sup> n (ı) or (ıı) al	tion? pove?	ersons deso	cribed in (ii)	11g(i 11g(i 11g(i	i)
s	(i) Name uppo ganız	ne of (ii)		(iii) Type of organization (described on lines 1 - 9 above or IRC section (see	(iv) Is the organizati col (i) list your gove docume	on in ed in rning	(v) Did you not organizati col (i) of suppor	on in your	(vi) Is th organizat col (i) org in the U	e ıon ın anızed	(vii) A mount of support
				instructions))	Yes	No	Yes	No	Yes	No	
						İ			1	T .	1

Total

# Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1) (A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

S	ection A. Public Support	organización -	rans to quanty a	11401 1110 10010 11	ocea Below, pre	3456 661	приссе и	<u>urc 1111)</u>
	endar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	( <b>d)</b> 2009	(e) 20	010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	469,52	2 4,432,257	3,381,045	3,322,978	3	3,529,985	15,135,787
2	Tax revenues levied for the organization's benefit and either paid to or expended on its							
3	behalf The value of services or facilities furnished by a governmental unit to							
4	the organization without charge <b>Total.</b> Add lines 1 through 3	469,52	2 4,432,257	3,381,045	3,322,978	3	3,529,985	15,135,787
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the							2,393,536
6	amount shown on line 11, column (f) <b>Public Support.</b> Subtract line 5							
Ü	from line 4							12,742,251
S	ection B. Total Support							
Cale	endar year (or fiscal year	(a) 2006	<b>(b)</b> 2007	(c) 2008	( <b>d)</b> 2009	<b>(e)</b> 20	10	<b>(f)</b> Total
7	beginning in) ► A mounts from line 4	469,522	4,432,257	3,381,045	3,322,978	3	,529,985	15,135,787
8	Gross income from interest,							
	dividends, payments received on securities loans, rents, royalties and income from similar	75,903	147,349	253,411	242,618		287,235	1,006,516
9	Net income from unrelated business activities, whether or not the business is regularly			16,767	26,306		45,384	88,457
10	Carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part			25,024	22,992		25,115	73,131
11	IV ) Total support (Add lines 7 through 10)							16,303,891
12	Gross receipts from related activiti	es, etc (See ins	tructions )		· · · · · · · · · · · · · · · · · · ·	12		
13	First Five Years If the Form 990 is check this box and stop here	for the organızat	ıon's fırst, second,	third, fourth, or fi	fth tax year as a		) organız	ration, ▶
S	ection C. Computation of Pub							
14	Public Support Percentage for 2010	) (line 6 column	(f) divided by line	11 column (f))		14		78 150 %
15	Public Support Percentage for 2009	9 Schedule A, Pa	art II, line 14			15	1	76 920 %
	<b>33 1/3% support test—2010.</b> If the and <b>stop here.</b> The organization qua	alıfıes as a public	ly supported organ	nization				<b>►</b> ▽
	33 1/3% support test—2009. If the box and stop here. The organization 10%-facts-and-circumstances test-is 10% or more, and if the organization Part IV how the organization meeorganization	n qualifies as a p — <b>2010.</b> If the org tion meets the "	ublicly supported of anization did not c facts and circumst	organization heck a box on line ances" test, chec	e 13, 16a, or 16b k this box and <b>st</b>	and line	e 14 Explain	<b>▶</b> ┌
b 18	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ Explain in Part IV how the organiza supported organization Private Foundation If the organizat	nization meets th tion meets the "'	ie "facts and circui facts and circumst	nstances" test, c ances" test The	heck this box and organization qual	d <b>stop he</b> Ifies as a	e <b>re.</b> a publicly	<b>▶</b> □
	instructions							<b>▶</b> ┌

Schedule A (Form 990 or 990-EZ) 2010 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total ın) 🟲 Gifts, grants, contributions, and membership fees 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified **b** A mounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning **(e)** 2010 (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (f) Total ın) 9 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b c Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage

15	Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15	
16	Public support percentage from 2009 Schedule A, Part III, line 15	16	
S	ection D. Computation of Investment Income Percentage		
17	Investment income percentage for <b>2010</b> (line 10c column (f) divided by line 13 column (f))	17	
18	Investment income percentage from 2009 Schedule A , Part III, line 17	18	

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

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

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

Schedule A (Fo	orm 990 or 990-EZ) 2010	Pag
Part IV	<b>Supplemental Information.</b> Supplemental Information. Complete this required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. additional information. (See instructions).	•

Facts And	Circumstances	Test

Schedule A (Form 990 or 990-EZ) 2010

DLN: 93493090013162

# OMB No 1545-0047

# **SCHEDULE C**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# **Political Campaign and Lobbying Activities**

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

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

Open to Public Inspection

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

	ection 501(c)(4), (5), or (6) organ nme of the organization RPORATE COUNCIL FOR THE ARTS DBA	•		Employer iden	tıfıcatıon number
CO	REPORATE COUNCIL FOR THE ARTS DDA	AARTSI OND		91-0839644	
Par	t I-A Complete if the or	ganization is exempt und	er section 501(	c) or is a section 527	organization.
1	Provide a description of the oi	ganızatıon's dırect and ındırect po	olitical campaign ac	tivities in Part IV	
2	Political expenditures			<b>.</b>	\$
3	V olunteer hours				
		ganization is exempt und			
1		e tax incurred by the organization			\$
2	·	e tax incurred by organization ma	-	n 4955 <b>F</b>	\$
3	<u>-</u>	section 4955 tax, did it file Form	4/20 for this year?		☐ Yes ☐ No
4a	Was a correction made?				│ Yes │ No
b Dat	If "Yes," describe in Part IV	ganization is exempt und	er section 501/	c) excent section 501	I(c)(3)
1	•	ended by the filing organization fo			¢
2		organization's funds contributed to		•	Ψ
_	exempt funtion activities	organization o fantas contributed to	o other organization	<b>▶</b>	\$
3	Total exempt function expend	itures Add lines 1 and 2 Enter he	ere and on Form 112	20-POL, line 17b	¢-
4	Did the filing organization file	Form 1120-POI for this year?			Ţ Yes No
5	Enter the names, addresses a organization made payments amount of political contribution separate segregated fund or a	om the filing organization's f I to a separate political orga	funds Also enter the nization, such as a		
					tion in Part IV
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
	(a) Name	(b) Address	(c) EIN	filing organization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization.
	(a) Name	(b) Address	(c) EIN	filing organization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization.
	(a) Name	(b) Address	(c) EIN	filing organization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization.
	(a) Name	(b) Address	(c) EIN	filing organization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization.
	(a) Name	(b) Address	(c) EIN	filing organization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization.
	(a) Name	(b) Address	(c) EIN	filing organization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization.
	(a) Name	(b) Address	(c) EIN	filing organization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization.
	(a) Name	(b) Address	(c) EIN	filing organization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization.
	(a) Name	(b) Address	(c) EIN	filing organization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization.
	(a) Name	(b) Address	(c) EIN	filing organization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization.
	(a) Name	(b) Address	(c) EIN	filing organization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization.

section 4911 tax for this year?

┌ Yes ┌ No

Ρ	art II-A Complete if the organization under section 501(h)).	is exempt under section 501(c)(3)	and filed Form 5768	(election
A .	Check If the filing organization belongs to	•		
<u> </u>	Check I if the filing organization checked bo  Limits on Lobbying &  (The term "expenditures" means a		(a) Filing Organization's Totals	<b>(b)</b> Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	opinion (grass roots lobbying)		
Ь	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)		
c	Total lobbying expenditures (add lines 1a and 1	b)		
d	Other exempt purpose expenditures	3,636,671		
e	Total exempt purpose expenditures (add lines 1	c and 1d)	3,636,671	
f	Lobbying nontaxable amount Enterthe amount columns	from the following table in both	331,834	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of li	ne 1f)	82,959	
h	Subtract line 1g from line 1a If zero or less, ent	er -0-	0	
	Subtract line 1 ffrom line 1 c If zero or less ente	ar - 0 -	0	

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

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

	Lobbying Expenditures During 4-Year Averaging Period						
	Calendar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	<b>(c)</b> 2009	( <b>d)</b> 2010	(e) Total	
2a	Lobbying non-taxable amount	365,077	328,992	314,914	331,834	1,340,817	
ь 	Lobbying ceiling amount (150% of line 2a, column(e))					2,011,226	
c	Total lobbying expenditures		75,413	33,536	49,805	158,754	
_d	Grassroots non-taxable amount	91,269	82,248	78,729	82,959	335,205	
e	Grassroots ceiling amount (150% of line 2d, column (e))					502,808	
f	Grassroots lobbying expenditures						

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

		1.	a)		(b)	
		Yes	No		\ moun	nt
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					
а	Volunteers?			_		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			-		
c	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities? If "Yes," describe in Part IV					
j	Total lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
	** THE A. Commisse if the every instinction is every medical exception FA4/s\/4\ exception [					n
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6).	501(c	)(5), (	or se		
	501(c)(6).	501(c	)(5), « 		Yes	No
1	<b>501(c)(6).</b> Were substantially all (90% or more) dues received nondeductible by members?	501(c	)(5), ( 	1		
1 2	<b>501(c)(6).</b> Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?	501(c	)(5), ( 	1 2		
1 2 3	501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carryover lobbying and political expenditures from the prior year?			1 2 3	Yes	No
1 2 3	<b>501(c)(6).</b> Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?	501(c	)(5), (	1 2 3	Yes	No
1 2 3	501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  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)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I	501(c	)(5), (	1 2 3	Yes	No
1 2 3 Par	501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  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)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".	501(c II-A,	)(5), (	1 2 3	Yes	No
1 2 3 Par	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carryover lobbying and political expenditures from the prior year?  **TII-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".  Dues, assessments and similar amounts from members  Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political	501(c II-A,	)(5), (	1 2 3	Yes	No
1 2 3 Par 1 2	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  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)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".  Dues, assessments and similar amounts from members  Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	501(c II-A,	)(5), (	1 2 3	Yes	No
1 2 3 Par 1 2	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carryover lobbying and political expenditures from the prior year?  **TII-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".  Dues, assessments and similar amounts from members  Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year	501(c II-A,	)(5), (	1 2 3	Yes	No
1 2 3 Par 1 2	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carryover lobbying and political expenditures from the prior year?  **TII-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".  Dues, assessments and similar amounts from members  Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year	501(c II-A, 1 2a 2b	)(5), (	1 2 3	Yes	No
1 2 3 Par 1 2 a b	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  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)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".  Dues, assessments and similar amounts from members  Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	501(c II-A, 1 2a 2b 2c	)(5), (	1 2 3	Yes	No
1 2 3 Par 1 2 a b c	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carryover lobbying and political expenditures from the prior year?  **TIII-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".  Dues, assessments and similar amounts from members  Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	501(c II-A, 1 2a 2b 2c 3	)(5), (	1 2 3	Yes	No

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

Ident if ier Return Reference | Explanation efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493090013162

OMB No 1545-0047

Department of the Treasury

Internal Revenue Service

**SCHEDULE D** (Form 990)

**Supplemental Financial Statements** 

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

Open to Public Inspection

	me of the organization RPORATE COUNCIL FOR THE ARTS DBA ARTSFUND		Emple	oyer identificatio	n numbe	r
CO	CPORATE COUNCIL FOR THE ARTS DBA ARTSFOND		91-0	839644		
Рa	rt I Organizations Maintaining Donor A	dvised Funds or Other Similar F			omplet	e if the
	organization answered "Yes" to Form 99		1			
		(a) Donor advised funds	(I	<b>b)</b> Funds and othe	raccoui	nts ———
L	Total number at end of year					
2	Aggregate contributions to (during year)		1			
3	Aggregate grants from (during year)					
ŀ	Aggregate value at end of year					
5	Did the organization inform all donors and donor adv funds are the organization's property, subject to the	<u> </u>	nor advis	_	Yes	┌ No
5	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ber		•	purpose _	_ Yes	□ No
0-0	conferring impermissible private benefit	if the organization answered "Voc" t	to Form			1 140
· e	rt II Conservation Easements. Complete		LO FOLIII	990, Pait IV, II	ne 7.	
L	Purpose(s) of conservation easements held by the o  Preservation of land for public use (e g , recreat		n historia	ally importantly l	and area	3
	Protection of natural habitat	Preservation of a				2
	Preservation of open space	, , , , , , , , , , , , , , , , , , , ,			•	
			_			
2	Complete lines 2a-2d if the organization held a qual easement on the last day of the tax year	lified conservation contribution in the form	n of a cor	nservation		
				Held at the End	of the	Year
а	Total number of conservation easements		2a			
b	Total acreage restricted by conservation easements	5	2b			
c	Number of conservation easements on a certified his		2c			
d	Number of conservation easements included in (c) a	• •	2d			
,				organization dur	ına	
,	Number of conservation easements modified, transfe the taxable year •	erred, released, extiligaished, or terminate	eu by the	e organization dur	iiig	
	the taxable year F					
1	Number of states where property subject to conserv	ation easement is located ►				
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds		dling of v	violations, and [	_ Yes	┌ No
5	Staff and volunteer hours devoted to monitoring, ins	pecting and enforcing conservation easen	nents du	rıng the year ►		
7	A mount of expenses incurred in monitoring, inspecti	ng, and enforcing conservation easement	s during	the year ► \$		
3	Does each conservation easement reported on line 2 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	2(d) above satisfy the requirements of sec	ction	Г	_ Yes	┌ No
•	In Part XIV, describe how the organization reports c balance sheet, and include, if applicable, the text of the organization's accounting for conservation easer	the footnote to the organization's financia			es	
aı	t III Organizations Maintaining Collection Complete if the organization answered		or Oth	er Similar As	sets.	
La	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fir	l for public exhibition, education or resear	ch in fur			٠,
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research i			•	
	(i) Revenues included in Form 990, Part VIII, line 1	ı		<b>►</b> \$		0
	(ii) Assets included in Form 990, Part X			<b>►</b> \$	1	14,750
2	If the organization received or held works of art, hist following amounts required to be reported under SFA		or financ	ıal gaın, provide t	he	
а	Revenues included in Form 990, Part VIII, line 1			<b>►</b> \$		0
b	Assets included in Form 990, Part X			<b>►</b> \$		0

ar	Organizations Maintaining Co	llections of Art	<u>, Histo</u>	<u>rical Tre</u>	asures	<u>, or Oth</u>	<u>er Similai</u>	r Asse	ts (co	<u>ntınued)</u>
3	Using the organization's accession and othe items (check all that apply)	r records, check any	of the f	ollowing th	nat are a s	ıgnıfıcant	use of its co	llection	n	
а	Public exhibition		d [	_ Loan o	rexchang	e program	ıs			
b	Scholarly research		e F	Other	DONATE	DARTWO	RK IS DISP	LAYEC	)	
c	Preservation for future generations									
Ļ	Provide a description of the organization's co	ollections and explai	ın how tl	ney further	the organ	nization's e	exempt purp	ose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t						mılar	Γ	Yes	√ No
a i	rt IV Escrow and Custodial Arrang					swered "	Yes" to For	rm 990	),	
	Part IV, line 9, or reported an an		•							
a	Is the organization an agent, trustee, custod included on Form 990, Part X?				ions or oth	her assets	not	Γ	Yes	∏ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the 1	following	table		_				
_								A mou	ınt	
c	Beginning balance					1c				
d	Additions during the year					1d				
e	Distributions during the year					1e				
f	Ending balance					1f				
а	Did the organization include an amount on Fo		21?						Yes	No
	If "Yes," explain the arrangement in Part XIV			1 1137		000 0				
a	rt V Endowment Funds. Complete	if the organization (a)Current Year		ered "Yes or Year	" to Forn (c)Two Ye		art IV, line (d)Three Years		<b>e)</b> Four Ye	aars Back
a	Beginning of year balance	12,197,273	(0)	11,647,264		11,244,575	(u) Tillee Teals	- Dack (e	<b>5)</b> 1 Out 10	als back
b	Contributions	1,416,751		126,536		481,053				
- c	Investment earnings or losses	-129,646		862,094		268,150				
d	Grants or scholarships									
e	Other expenditures for facilities	641,272		372,992		290,024				
	and programs	77.474		65.620		FC 400				
f	Administrative expenses	77,171		65,629		56,490				
g	End of year balance	12,765,935		12,197,273	-	11,647,264				
	Provide the estimated percentage of the yea		ıS							
а	Board designated or quasi-endowment 🕨	0 %								
b	Permanent endowment 🕨 92 000 %									
C	Term endowment ► 8 000 %									
а	Are there endowment funds not in the posses organization by	ssion of the organiza	ation tha	t are held	and admir	nistered fo	r the		Yes	No
	(i) unrelated organizations							3a(i)	1 63	No
	(ii) related organizations							3a(ii)	Yes	
ь	If "Yes" to 3a(II), are the related organizatio	ns listed as required	d on Sch	edule R?				3b	Yes	
	Describe in Part XIV the intended uses of th	e organization's end	lowment	funds						
ai	rt VI Investments—Land, Buildings	s, and Equipme	nt. See	Form 99	0, Part X	(, line 10				
	Description of investment		ŀ	(a) Cost or o		Cost or othe Isis (other)	r <b>(c)</b> Accumi deprecia		( <b>d</b> ) Boo	ok value
a	Land					1,162,96	3		1	L,162,963
b	Buildings		. [	1,93	7,986	81,04	8 1,0	092,518	, <u> </u>	926,516
c	Leasehold improvements									
d	Equipment					342,69	9 2	271,842		70,857
e	Other		.			242,38	1 2	241,881		500

2,160,836

Investments—Other Securities. See	roi ili 990, Pait X, ilile 12		
(a) Description of security or category	(b)Book value	(c) Method of valuation	
(including name of security)	(2)2001111111	Cost or end-of-year market v	alue
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
O ther			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
		12	
Part VIII Investments—Program Related. See	: гогиг ээо, rait x, ime . T		
(a) Description of investment type	(b) Book value	(c) Method of valuation	ماليم
		Cost or end-of-year market v	aiue
Total. (Column (b) should equal Form 990, Part X, col (B) line 13 )			
Part IX Other Assets. See Form 990, Part X, In	e 15.		
(a) Descrip	tion	(b) Book v	alue
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	5.)		
Part X Other Liabilities. See Form 990, Part X	, line 25.		
Part X Other Liabilities. See Form 990, Part X	, line 25.		
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability	, line 25.		
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Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability	, line 25.		
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Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes	, line 25.		
Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability	, line 25.		

Par	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	ts
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1
2	Total expenses (Form 990, Part IX, column (A), line 25)	2
3	Excess or (deficit) for the year Subtract line 2 from line 1	3
4	Net unrealized gains (losses) on investments	4
5	Donated services and use of facilities	5
6	Investment expenses	6
7	Prior period adjustments	7
8	Other (Describe in Part XIV)	8
9	Total adjustments (net) Add lines 4 - 8	9
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10
Part	XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Return
1	Total revenue, gains, and other support per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	
а	Net unrealized gains on investments	
ь	Donated services and use of facilities	
c	Recoveries of prior year grants	
d	Other (Describe in Part XIV)	
e	Add lines <b>2a</b> through <b>2d</b>	2e
3	Subtract line <b>2e</b> from line <b>1</b>	3
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a	
b	Other (Describe in Part XIV)	
c	Add lines <b>4a</b> and <b>4b</b>	4c
5	Total Revenue Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 12)	5
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per Return
1	Total expenses and losses per audited financial	1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	
а	Donated services and use of facilities	
ь	Prior year adjustments	
c	Other losses	
d	Other (Describe in Part XIV) 2d	
e	Add lines <b>2a</b> through <b>2d</b>	2e
3	Subtract line <b>2e</b> from line <b>1</b>	3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	
ь	Other (Describe in Part XIV) 4b	
c	Add lines <b>4a</b> and <b>4b</b>	4c
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 18)	5
Par	t XIV Supplemental Information	

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,

Ident if ier	Return Reference	Explanation
	PART III, LINE 1A	DONATED ARTWORK IS DISPLAYED IN THE CENTURY BUILDING LOBBY AND THROUGHOUT THE ARTSFUND OFFICE
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	ARTSFUND FOUNDATION PROVIDES MANAGEMENT OF ENDOWMENT FUNDS FOR ARTSFUND FOR THE PURPOSE OF DISTRIBUTING GRANTS TO IRC 501(C)(3) NONPROFIT ARTS ORGANIZATIONS
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	ARTSFUND AND THE FOUNDATION ARE NOT-FOR-PROFIT CORPORATIONS, EXEMPT FROM FEDERAL INCOME TAX, EXCEPT FOR UNRELATED BUSINESS INCOME UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE IN ADDITION, ARTSFUND AND THE FOUNDATION HAVE BEEN CLASSIFIED AS ENTITIES THAT ARE NOT PRIVATE FOUNDATIONS WITHIN THE MEANING OF SECTION 509(A) AND QUALIFY FOR DEDUCTIBLE CONTRIBUTIONS AS PROVIDED IN SECTION 170(B)(1)(A)(VI) UNRELATED BUSINESS INCOME TAX, IF ANY, IS INSIGNIFICANT AND NO TAX PROVISION HAS BEEN MADE IN THE ACCOMPANYING CONSOLIDATED FINANCIAL STATEMENTS ON JANUARY 2, 2007, ARTSFUND MADE THE ELECTION BY AN ELIGIBLE SECTION 501(C)(3) ORGANIZATION TO MAKE EXPENDITURES TO INFLUENCE LEGISLATION UNDER THE PROVISIONS OF SECTION 501 (H) OF THE INTERNAL REVENUE CODE THE ORGANIZATION RECOGNIZES THE TAX BENEFIT FROM UNCERTAIN TAX POSITIONS ONLY IF IT IS MORE LIKELY THAN NOT THAT THE TAX POSITIONS WILL BE SUSTAINED ON EXAMINATION BY THE TAX AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE POSITION THE TAX BENEFIT IS MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A GREATER THAN 50% LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT THE ORGANIZATION FILES AN EXEMPT ORGANIZATION RETURN AND APPLICABLE UNRELATED BUSINESS INCOME TAX RETURN IN THE US FEDERAL JURISDICTION THE ORGANIZATION IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY TAXING AUTHORITIES FOR YEARS BEFORE 2006 FOR ITS FEDERAL FILINGS

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

CORPORATE COUNCIL FOR THE ARTS DBA ARTSFUND

Schedule I

(Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

DLN: 93493090013162 OMB No 1545-0047

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

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

**Inspection** 

Employer identification number

CORPORATE COUNCIL FOR THE A	KRIS DBA AKISFUNI	J				91-0839644	
Part I General Information	on on Grants and	d Assistance					
Does the organization maintain the selection criteria used to a Describe in Part IV the organization	ward the grants or as	sıstance?					✓ Yes 🗀
	ne 21 for any recip	ient that received r	rganizations in the nore than \$5,000. Ch	eck this box if no one	recipient receive	ed more than \$5,000	
1 (a) Name and address of organization or government	( <b>b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
See Additional Data Table							
2 Enter total number of section 5		_				<u> </u>	63
3 Enter total number of other org							0
For Privacy Act and Paperwork Reduction	on Act Notice, see the I	nstructions for Form 99	0.	Cat No 50055P		Schedu	ile I (Form 990) 2010

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	2.
	Use Schedule I-1 (Form 990) if additional space is needed.	

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

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

Ident if ier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U.S.	,	SCHEDULE I, PART I, LINE 2 THE MAJORITY OF THE GRANTS ARE FOR GENERAL OPERATING USE AND, AS SUCH, DO NOT REQUIRE REPORTS BE GIVEN TO ARTSFUND SOME GRANTS ARE FOR SPECIFIC PROJECTS (DIVERSITY) AND ARE REPORTED ON AS REQUIRED BY THE DONOR

Software ID: Software Version:

**EIN:** 91-0839644

Name: CORPORATE COUNCIL FOR THE ARTS DBA ARTSFUND

roilli 990,Schedule 1, Pai	t II, Grants and	d Other Assistance	to dovernments	una organización	3 III the office St	1103	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
5TH AVENUE THEATRE 1326 FIFTH AVENUE SUITE 735 SEATTLE, WA 98101	91-1087612	501(C)(3)	65,455				PROMOTION OF THE ARTS
ACT THEATRE700 UNION STREET SEATTLE,WA 98101	91-0787792	501(C)(3)	118,320				PROMOTION OF THE ARTS
BROADWAY CENTER901 BROADWAY SUITE 700 TACOMA,WA 98402	91-1106878	501(C)(3)	62,900				PROMOTION OF THE ARTS
HENRY ART GALLERY UNIVERSITY OF WASHINGTON BOX 351410 351410 SEATTLE, WA 98195	23-7052537	501(C)(3)	106,980				PROMOTION OF THE ARTS
NORTHWEST SINFONIETTA PO BOX 1154 TACOMA,WA 98401	91-1590964	501(C)(3)	9,545				PROMOTION OF THE ARTS
PACIFIC NORTHWEST BALLET301 MERCER STREET SEATTLE,WA 98109	91-0897129	501(C)(3)	203,385	5,220	FMV	AIRLINE VOUCHERS	PROMOTION OF THE ARTS
SEATTLE ART MUSEUM 1300 FIRST AVENUE SEATTLE, WA 98101	91-0640788	501(C)(3)	253,025	3,480	FMV	AIRLINE VOUCHERS	PROMOTION OF THE ARTS
SEATTLE CHILDREN'S THEATRE201 THOMAS STREET SEATTLE, WA 98109	51-0172421	501(C)(3)	134,760				PROMOTION OF THE ARTS
SEATTLE OPERAPO BOX 9248 SEATTLE, WA 98109	91-0760426	501(C)(3)	258,960	6,090	FMV	AIRLINE VOUCHERS	PROMOTION OF THE ARTS
SEATTLE REPERTORY THEATRE155 MERCER STREET PO BOX 900923 SEATTLE, WA 98109	91-0756535	501(C)(3)	150,245	3,480	FMV	AIRLINE VOUCHERS	PROMOTION OF THE ARTS
SEATTLE SYMPHONY ORCHESTRAPO BOX 21906 SEATTLE, WA 98111	91-0667412	501(C)(3)	171,190	6,090	FMV	AIRLINE VOUCHERS	PROMOTION OF THE ARTS
TACOMA ART MUSEUM 1701 PACIFIC AVENUE TACOMA, WA 98402	91-0697444	501(C)(3)	63,658				PROMOTION OF THE ARTS

(a) Name and address of organization or government	organization if applicable		( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA OPERA917 PACIFIC AVE SUITE 407 TACOMA,WA 98402	91-1237511	501(C)(3)	10,210				PROMOTION OF THE ARTS
TACOMA SYMPHONY738 BROADWAY SUITE 100 TACOMA,WA 98402	91-6032976	501(C)(3)	19,470				PROMOTION OF THE ARTS
TACOMA YOUTH SYMPHONY901 BROADWAY PLAZA SUITE 500 TACOMA,WA 98402	23-7005522	501(C)(3)	8,875				PROMOTION OF THE ARTS
VILLAGE THEATRE303 FRONT STREET N ISSAQUAH,WA 98027	91-1077130	501(C)(3)	106,815				PROMOTION OF THE ARTS
ARTIST TRUST1835 12TH AVENUE SEATTLE, WA 98122	91-1353974	501(C)(3)	24,061				PROMOTION OF THE ARTS
ARTSWEST PLAYHOUSE & GALLERYPO BOX 16152 SEATTLE,WA 98116	91-1440032	501(C)(3)	3,075				PROMOTION OF THE ARTS
AUBURN SYMPHONY ORCHESTRAPO BOX 2186 AUBURN,WA 98071	91-1719873	501(C)(3)	2,250				PROMOTION OF THE ARTS
BELLEVUE ARTS MUSEUM 510 BELLEVUE WAY NE BELLEVUE,WA 98004	91-6028261	501(C)(3)	13,820				PROMOTION OF THE ARTS
BELLEVUE PHILHARMONIC ORCHESTRAPO BOX 53123 BELLEVUE, WA 98015	91-0832787	501(C)(3)	4,373				PROMOTION OF THE ARTS
BOOK-IT REPERTORY THEATRESEATTLE CENTER 305 HARRISON STREET SEATTLE, WA 98109	91-1514734	501(C)(3)	34,575				PROMOTION OF THE ARTS
CENTRAL DISTRICT FORUM FOR ARTS & IDEAS1404 E YESLER PLACE STE 202 SEATTLE, WA 98122	91-1954917	501(C)(3)	4,920				PROMOTION OF THE ARTS
EARLY MUSIC GUILD2366 EASTLAKE AVE E 335 SEATTLE, WA 98102	91-0999643	501(C)(3)	10,590				PROMOTION OF THE ARTS

Form 990,Schedule I, Part	t 11, Grants and	Otner Assistance	to Governments	and Organization	s in the United Sta	ites	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EARSHOT JAZZ SOCIETY OF SEATTLE3429 FREMONT PL N 309 SEATTLE, WA 98103	94-3051610	501(C)(3)	4,855				PROMOTION OF THE ARTS
THE ESOTERICS4523A 40TH AVENUE SW SEATTLE, WA 98116	91-1617663	501(C)(3)	1,555				PROMOTION OF THE ARTS
EXPERIENCE MUSIC PROJECT2901 THIRD AVENUE SUITE 400 SEATTLE, WA 98121	91-1626784	501(C)(3)	7,255				PROMOTION OF THE ARTS
FEDERAL WAY SYMPHONY PO BOX 4513 30819 14TH AVE S STE C FEDERAL WAY, WA 98063	23-7310860	501(C)(3)	1,220				PROMOTION OF THE ARTS
FRYE ART MUSEUM704 TERRY AVENUE SEATTLE, WA 98104	91-0659435	501(C)(3)	1,820				PROMOTION OF THE ARTS
GIANT MAGNET (FORMERLY SICF)305 HARRISON ST SEATTLE, WA 98109	91-1253397	501(C)(3)	7,235				PROMOTION OF THE ARTS
JACK STRAW PRODUCTIONS4261 ROOSEVELT WAY NE SEATTLE, WA 98105	91-0776606	501(C)(3)	7,730				PROMOTION OF THE ARTS
KIRKLAND PERFORMANCE CENTER350 KIRKLAND AVENUE KIRKLAND, WA 98033	91-3129859	501(C)(3)	4,964				PROMOTION OF THE ARTS
MUSEUM OF GLASS1801 DOCK STREET TACOMA, WA 98402	91-1669422	501(C)(3)	15,360				PROMOTION OF THE ARTS
NORDIC HERITAGE MUSEUM3014 NORTHWEST 67TH STREET SEATTLE,WA 98117	91-1107537	501(C)(3)	22,928				PROMOTION OF THE ARTS
NORTHWEST AFRICAN AMERICAN MUSEUM2300 S MASSACHUSETTS SEATTLE, WA 98144	76-0835379	501(C)(3)	3,355				PROMOTION OF THE ARTS
NORTHWEST FILM FORUM 610 19TH AVE E SEATTLE, WA 98112	91-1702331	501(C)(3)	10,225				PROMOTION OF THE ARTS

Form 990, Schedule I, Par	t 11, Grants and	Other Assistance	to Governments	and Organization	s in the United Sta	ites	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NORTHWEST PUPPET CENTER9123 15TH AVENUE NE SEATTLE, WA 98115	94-3034275	501(C)(3)	9,215				PROMOTION OF THE ARTS
THE NORTHWEST SCHOOL OF THE ARTS HUMANITIES & ENVIRONMENT1415 SUMMIT AVENUE SEATTLE, WA 98122	91-1061146	501(C)(3)	4,080				PROMOTION OF THE ARTS
ON THE BOARDS100 W ROY ST SEATTLE, WA 98109	91-1081983	501(C)(3)	41,854				PROMOTION OF THE ARTS
PILCHUCK GLASS SCHOOL 430 YALE AVENUE NORTH SEATTLE, WA 98109	91-0963132	501(C)(3)	10,934				PROMOTION OF THE ARTS
PRATT FINE ARTS CENTER 1902 S MAIN STREET SEATTLE, WA 98144	91-1186639	501(C)(3)	5,405				PROMOTION OF THE ARTS
RICHARD HUGO HOUSE 1634 11TH AVENUE SEATTLE, WA 98122	91-1718383	501(C)(3)	7,355				PROMOTION OF THE ARTS
SEATTLE ARTS & LECTURES105 S MAIN STREET SUITE 201 SEATTLE, WA 98104	91-1384964	501(C)(3)	15,135				PROMOTION OF THE ARTS
SEATTLE CHAMBER MUSIC SOCIETY10 HARRISON STREET SUITE 306 SEATTLE, WA 98109	91-1169836	501(C)(3)	27,316				PROMOTION OF THE ARTS
SEATTLE CHORAL COMPANY1518 NE 143RD STREET SEATTLE, WA 98125	91-1223378	501(C)(3)	2,470				PROMOTION OF THE ARTS
SEATTLE MEN'S CHORUSSEA WOMEN'S CHORUS319 12TH AVENUE SEATTLE, WA 98112	91-1183859	501(C)(3)	9,155				PROMOTION OF THE ARTS
SEATTLE PRO MUSICA 1756 NW 56TH STREET SEATTLE,WA 98107	51-0175286	501(C)(3)	10,710				PROMOTION OF THE ARTS
SEATTLE REPERTORY JAZZ ORCHESTRAPO BOX 45592 SEATTLE, WA 98145	91-1928901	501(C)(3)	7,920				PROMOTION OF THE ARTS

Form 990,Schedule I, Par	t 11, Grants and	Otner Assistance	to Governments	and Organization	s in the United Sta	ites	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SEATTLE SHAKESPEARE COMPANYPO BOX 19595 305 HARRISON ST SEATTLE, WA 98109	91-1512717	501(C)(3)	36,550				PROMOTION OF THE ARTS
SEATTLE THEATRE GROUP 911 PINE STREET SEATTLE, WA 98101	94-3130227	501(C)(3)	21,705				PROMOTION OF THE ARTS
SEATTLE YOUTH SYMPHONY ORCHESTRAS 11065 FIFTH NE SUITE A SEATTLE, WA 98125	91-0493840	501(C)(3)	17,384				PROMOTION OF THE ARTS
SIFF (CINEMA SEATTLE) 400 9TH AVENUE NORTH SEATTLE, WA 98109	91-1489660	501(C)(3)	11,375				PROMOTION OF THE ARTS
SPECTRUM DANCE THEATER800 LAKE WASHINGTON BOULEVARD SEATTLE, WA 98122	91-1263530	501(C)(3)	6,755				PROMOTION OF THE ARTS
TACOMA MUSICAL PLAYHOUSE7116 6TH AVENUE TACOMA,WA 98406	94-3198670	501(C)(3)	10,575				PROMOTION OF THE ARTS
TAPROOT THEATRE COMPANYPO BOX 30946 SEATTLE, WA 98103	91-0971237	501(C)(3)	14,575				PROMOTION OF THE ARTS
THREE DOLLAR BILL CINEMA1122 EAST PIKE STREET 1313 SEATTLE, WA 98122	91-1708195	501(C)(3)	4,255				PROMOTION OF THE ARTS
TO WN HALL ASSOCIATION 1119 8TH AVE SEATTLE, WA 98101	91-1910904	501(C)(3)	21,235				PROMOTION OF THE ARTS
UW WORLD SERIES AT MEANY HALLUNIVERSITY OF WASHINGTON BOX 351150 351150 SEATTLE, WA 98195	91-3079137	501(C)(3)	9,555				PROMOTION OF THE ARTS
VASHON ALLIED ARTSPO BOX 576 VASHON ISLAND, WA 98070	51-0183051	501(C)(3)	3,655				PROMOTION OF THE ARTS
VELOCITY DANCE CENTER 915 EAST PINE STREET 200 SEATTLE, WA 98122	91-2030037	501(C)(3)	4,055				PROMOTION OF THE ARTS

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE VERA PROJECT305 HARRISON ST SEATTLE, WA 98109	31-1816016	501(C)(3)	2,555				PROMOTION OF THE ARTS
WING LUKE ASIAN MUSEUM407 SEVENTH AVENUE S SEATTLE, WA 98104	91-6067431	501(C)(3)	29,830				PROMOTION OF THE ARTS
WING-IT PRODUCTIONS 5510 UNIVERSITY WAY NE SEATTLE, WA 98105	91-1730761	501(C)(3)	2,060				PROMOTION OF THE ARTS

DLN: 93493090013162

OMB No 1545-0047

Employer identification number

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

**Compensation Information** For certain Officers, Directors, Trustees, Key Employees, and Highest

**Compensated Employees** ► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

COF	RPORATE COUNCIL FOR THE ARTS DBA ARTSFUND						
				91-0839644			
Pa	rt I Questions Regarding Compensation						
						Yes	Νo
1a	Check the appropriate box(es) if the organization provi 990, Part VII, Section A, line 1a Complete Part III to						
	First-class or charter travel		Housing allowance or residence for	personal use			
	Travel for companions	$\sqcap$	Payments for business use of perso	nal residence			
	Tax idemnification and gross-up payments	✓	Health or social club dues or initiat	on fees			
	Discretionary spending account	Г	Personal services (e g , maid, chau	feur, chef)			
b	If any of the boxes in line 1a are checked, did the organism reimbursement orprovision of all the expenses describ				1b	Yes	
2	Did the organization require substantiation prior to rei officers, directors, trustees, and the CEO/Executive D				2	Yes	
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all that			1			
	Compensation committee	Г	Written employment contract				
	Independent compensation consultant	고	' '				
	Form 990 of other organizations	<u>~</u>	Approval by the board or compensa	tion committee			
4	During the year, did any person listed in Form 990, Pa or a related organization	art V I	I, Section A , line 1a with respect to t	he filing organization			
а	Receive a severance payment or change-of-control pa	aymeı	nt from the organization or a related o	rganızatıon?	4a		Νo
b	Participate in, or receive payment from, a supplement	al nor	nqualified retirement plan?		4b		Νo
С	Participate in, or receive payment from, an equity-bas	ed co	mpensation arrangement?		4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and prov	ıde tl	ne applicable amounts for each item i	n Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must	t com	plete lines 5-9.				
5	For persons listed in form 990, Part VII, Section A, lincompensation contingent on the revenues of	ne 1a	, did the organization pay or accrue a	ny			
а	The organization?				5a		Νo
b	Any related organization?				5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III						
6	For persons listed in form 990, Part VII, Section A, line compensation contingent on the net earnings of	ne 1a	, did the organization pay or accrue a	ny			
а	The organization?				6a		No
b	Any related organization?				6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III						
7	For persons listed in Form 990, Part VII, Section A, li payments not described in lines 5 and 6? If "Yes," des			n-fixed	7		No
8	Were any amounts reported in Form 990, Part VII, par subject to the initial contract exception described in F						

section 53 4958-6(c)?

If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

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

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

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

(A) Name		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation	
		(i) Base compensation	(ii) Bonus & (iii) Other reportable compensation		other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ	
(1) JAMES F TUNE	(1) (11)	150,000 0	0	,	4,800 0	10,797 0	175,597 0	0	
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
( 10 )									
(11)									
( 12 )									
( 13 )									
( 14 )									
( 15 )									
( 16 )									

### Part III Supplemental Information

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

Ident if ier	Ret urn Ref erence	Explanation
	PART I, LINE 1A	ARTSFUND PAID DUES TO THE RUINS

Schedule J (Form 990) 2010

OMB No 1545-0047

Open to Public Inspection

# **SCHEDULE M** (Form 990)

Department of the Treasury

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

**NonCash Contributions** 

Internal Revenue Service Name of the organization CORPORATE COUNCIL FOR THE ARTS DBA ARTSFUND

**Employer identification number** 

					91-0839644			
Pa	rt I Types of Property							
		(a) Check if applicable	<b>(b)</b> Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	(d) Method of determining of amounts		contribut	ion
1	Art—Works of art			,				
2	Art—Historical treasures							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household							
good								
6	Cars and other vehicles .							
7	Boats and planes							
	Intellectual property							
	Securities—Publicly traded	Х	3	22,027	MARKET VALUE (S	OLD)		
	Securities—Closely held stock							
	Securities—Partnership, LLC, or trust interests .							
	Securities—Miscellaneous							
13	Q ualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
	Scientific specimens							
24	Archeological artifacts .							
	VARIOUS							
25	IN-KIND Other ► ( DONATIONS )	×	25	13 379	VALUE PER DONO	R (FM)	/ )	
25	AIRLINE		10	10,073	TALGET EN BONG		. ,	
26	Other ► ( VOUCHER )	Х	1	24,360	VALUE PER DONO	R (FM\	<b>/</b> )	
27	Other ►()							
28	Other ► ()							
29	Number of Forms 8283 received b							
	for which the organization complete	ed Form 8	3283, Part IV, Donee Ackn	owledgement	29			
							Yes	No
30a	During the year, did the organization							
	must hold for at least three years f			on, and which is not require	d to be used			
	for exempt purposes for the entire					30a		No
b	If "Yes," describe the arrangement	: ın Part I	I					
31	Does the organization have a gift a					31	Yes	
32a	Does the organization hire or use t contributions?	hırd partı • • •	es or related organizations	to solicit, process, or sell	non-cash	32a	Yes	
Ь	If "Yes," describe in Part II							
33	If the organization did not report redescribe in Part II	venues i	n column (c) for a type of p	roperty for which column (a	) is checked,			

#### Part II

**Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Ident if ier	Ret urn Reference	Explanation
THIRD PARTY USE	1	ARTSFUND USES MCADAMS WRIGHT RAGEN TO SELL DONATED SECURITIES

Schedule M (Form 990) 2010

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493090013162

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

### Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2010
Open to Public

Inspection

Name of the organization CORPORATE COUNCIL FOR THE ARTS DBA ARTSFUND **Employer identification number** 

91-0839644

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6		THE BOARD OF TRUSTEES AND ALL CONTRIBUTORS TO THE ORGANIZATION ARE MEMBERS MEMBERS DO NOT HAVE VOTING RIGHTS ONLY THE BOARD OF TRUSTEES HAVE VOTING RIGHTS

Identifier Return Reference		Explanation						
FORM 990, PART VI, SECTION A, LINE 7A		ALL MEMBERS MAY VOTE IN THE ELECTION OF THE BOARD OF DIRECTORS, BUT THE MEMBERS DO NOT VOTE FOR THE OFFICERS						

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		THE FORM 990 IS SENT TO ALL BOARD MEMBERS FOR REVIEW BEFORE THE FORM 990 IS FILED

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	EVERY BOARD MEMBER SIGNS A CONFLICT OF INTEREST POLICY STATEMENT WHEN JOINING THE BOARD ARTSFUND MONITORS RELATIONSHIPS REGARDING POSSIBLE CONFLICTS OF INTEREST

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	THE EXECUTIVE COMMITTEE DETERMINED OFFICER WAGES IN ACCORDANCE WITH THE COMPENSATION POLICY AND COMPARED WAGES TO THE UNITED WAY OF KING COUNTY WAGE SURVEY

Identifier	Return Reference Explanation						
	FORM 990, PART VI, SECTION C, LINE 19	GOVERNING DOCUMENTS AND CONFLICT OF INTEREST STATEMENTS ARE AVAILABLE UPON REQUEST AUDITED FINANCIAL STATEMENTS ARE AVAILABLE ON ARTFUND'S WEBSITE FOR BOARD MEMBERS AND UPON REQUEST					

ldentifier	Return Reference	Explanation
	FORM 990, PART XII, LINCE 2C	PROCESS HAS NOT CHANGED FROM PRIOR YEAR

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493090013162

2010

OMB No 1545-0047

Open to Public Inspection

## SCHEDULE R (Form 990)

#### **Related Organizations and Unrelated Partnerships**

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

► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization **Employer identification number** CORPORATE COUNCIL FOR THE ARTS DBA ARTSFUND 91-0839644 Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.) Part I (b) (d) (c) Name, address, and EIN of disregarded entity Primary activity Legal domicile (state Total income End-of-year assets Direct controlling or foreign country) entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) (a)
Name, address, and EIN of related organization (d) (c) Section 512(b)(13) Legal domicile (state Direct controlling Exempt Code section Public charity status Primary activity controlled (if section 501(c)(3)) or foreign country) entity organization Yes No (1) THE ARTSFUND FOUNDATION FOUNDATION BOARD MANAGEMENT OF ELECTED BY ARTSFUND 10 HARRISON ST 200 ENDOWMENT FUNDS FOR 11, TYPE 1 WA 501(C)(3) No BOARD THE ARTSFUND SEATTLE, WA 98109 91-1866831

<b>(a)</b> ame, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	<b>(d)</b> Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income		(g) end-of-year sssets	(h) Disproprtionate allocations?		(i) Code V— amount in bo Schedule (Form 10	x 20 of K-1	x 20 of managin K-1 partner		<b>(k)</b> Percentage ownership
	ntification of Relation of Rel							Yes	No			Yes	No	
										nswered "Y	es" on	Form	990,	Part IV,
Name, address, an	(a) Id EIN of related organiz	zation	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	(d) Direct cor enti	ntrolling	(e) Type of e (C corp, S or trust	corp,	Share o	<b>(f)</b> f total income	Shai end-o	y) re of f-year sets		<b>(h)</b> Percentage ownership

chedule K (Form 550) 2010					ray	je <b>J</b>
Part V Transactions With Related Organizations (Complete if the organization answered "Y	es" on Form 990, Pa	rt IV, line 34, 35, 3	55A, or 36.)			
Note. Complete line 1 if any entity is listed in Parts II, III or IV					Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related org	anızatıons lısted ın Part	s II-IV?				
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity			[:	1a		No
<b>b</b> Gıft, grant, or capital contribution to other organization(s)			:	1b		No
<b>c</b> Gift, grant, or capital contribution from other organization(s)			[:	1c	Yes	
<b>d</b> Loans or loan guarantees to or for other organization(s)			:	1d		No
e Loans or loan guarantees by other organization(s)				1e		No
f Sale of assets to other organization(s)			<u> </u>  :	1f		No
g Purchase of assets from other organization(s)			[:	1g		No
h Exchange of assets			[:	1h		No
i Lease of facilities, equipment, or other assets to other organization(s)				1i		No
j Lease of facilities, equipment, or other assets from other organization(s)				1j		No
k Performance of services or membership or fundraising solicitations for other organization(s)			[:	1k		No
I Performance of services or membership or fundraising solicitations by other organization(s)				11		No
m Sharing of facilities, equipment, mailing lists, or other assets			[:	1m		No
n Sharing of paid employees			[:	1n		No
Reimbursement paid to other organization for expenses			[:	10		No
<b>p</b> Reimbursement paid by other organization for expenses			[:	1p	Yes	
<b>q</b> O ther transfer of cash or property to other organization(s)			[:	1q		No
r Other transfer of cash or property from other organization(s)				1r		No
			_		-	
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line,	ıncludıng covered relat	ionships and transact	ion thresholds			
<b>(a)</b> Name of other organization	<b>(b)</b> Transaction type(a-r)	(c) Amount involved	Method of deter	mınıı	ng amo	unt
1) ARTFUND FOUNDATION	С	616,157	CASH			
2) ARTSFUND FOUNDATION	Р	25,115	CASH		_	

Name of other organization	Transaction type(a-r)	Amount involved	Method of determining amount involved
(1) ARTFUND FOUNDATION	С	616,157	CASH
(2) ARTSFUND FOUNDATION	Р	25,115	CASH
(3)			
(4)			
(5)			
(6)			

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

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

<b>(a)</b> Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations?		<b>(e)</b> Share of end-of-year assets		rtionate cions?	(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(I Gene mana part	ag ing tner?
			Yes	No		Yes	No		Yes	No										
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#### Part VII Supplemental Information

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

I Identifier I Return Reference I	er Return Reference Explanation
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Schedule R (Form 990) 2010

Software ID: Software Version:

**EIN:** 91-0839644

Name: CORPORATE COUNCIL FOR THE ARTS DBA ARTSFUND

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors										
( <b>A</b> ) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation	( <b>E</b> ) Reportable compensation	(F) Estimated amount of other
	per week	individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
KIM A ANDERSON SECRETARY	50	x		x				0	0	0
CATHERINE IRBY ARNOLD BOARD OF TRUSTEES	50	Х						0	0	0
JOHN BAUER BOARD OF TRUSTEES	50	×						0	0	0
JUDI BECK BOARD OF TRUSTEES	1 50	Х						0	0	0
ANNETTE BECKER BOARD OF TRUSTEES	50	x						0	0	0
DOUGLAS P BEIGHLE BOARD OF TRUSTEES	50	Х						0	0	0
MICHAELP BENTLEY BOARD OF TRUSTEES	50	х						0	0	0
DEBORAH L BEVIER BOARD OF TRUSTEES	50	Х						0	0	0
JUDY BITTERLI BOARD OF TRUSTEES	50	Х						0	0	0
W CLAYTON BLAND BOARD OF TRUSTEES	50	Х						0	0	0
BRENT O BODAL BOARD OF TRUSTEES	50	Х						0	0	0
MICHAEL A BOOTH BOARD OF TRUSTEES	50	X						0	0	0
MAGGIE BROWN BOARD OF TRUSTEES	50	Х						0	0	0
STANFORD M BROWN BOARD OF TRUSTEES	50	Х						0	0	0
DAVID D BUCK BOARD OF TRUSTEES	50	Х						0	0	0
GARY J CARPENTER BOARD OF TRUSTEES	50	Х						0	0	0
SCOTT E CARSON BOARD OF TRUSTEES	50	×						0	0	0
KIM ACKERLEY CLEWORTH BOARD OF TRUSTEES	50	Х						0	0	0
ELIZABETH COPPINGER BOARD OF TRUSTEES	50	Х						0	0	0
MELANIE K CURTICE BOARD OF TRUSTEES	50	Х						0	0	0
PETER DAVIS BOARD OF TRUSTEES	50	Х						0	0	0
MELANIE J DRESSEL BOARD OF TRUSTEES	50	Х						0	0	0
JAMES DUNCAN CHAIR	6 00	Х		Х				0	0	0
PETER S EHRLICHMAN BOARD OF TRUSTEES	50	Х						0	0	0
PAUL S FICCA BOARD OF TRUSTEES	50	Х						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per	Posi t	tion ( hat a	che	)			( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	(F) Estimated amount of other compensation
	week	individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
			<u> </u>			<u> </u>				
KEVIN P FOX BOARD OF TRUSTEES	50	Х						0	0	0
KEN GRANT BOARD OF TRUSTEES	50	Х						0	0	0
BRIAN L GRANT MD BOARD OF TRUSTEES	50	Х						0	0	0
JOSHUA GREEN III BOARD OF TRUSTEES	50	Х						0	0	0
DARREN HAMBY BOARD OF TRUSTEES	50	Х						0	0	0
AYA S HAMILTON BOARD OF TRUSTEES	50	Х						0	0	0
RAY B HEACOX CHAIR-ELECT	1 50	Х		х				0	0	0
PAUL P HEPPNER BOARD OF TRUSTEES	50	Х						0	0	0
JOHN WP HOLT BOARD OF TRUSTEES	50	Х						0	0	0
PETER A HORVITZ BOARD OF TRUSTEES	50	Х						0	0	0
HEATHER HOWARD BOARD OF TRUSTEES	50	Х						0	0	0
ANDREA JONES BOARD OF TRUSTEES	50	Х						0	0	0
BRADLEY JONES BOARD OF TRUSTEES	50	Х						0	0	0
MARY JUSTICE BOARD OF TRUSTEES	50	Х						0	0	0
STELLMAN KEEHNEL BOARD OF TRUSTEES	1 50	Х						0	0	0
KENNETH M KIRKPATRICK BOARD OF TRUSTEES	50	Х						0	0	0
M THOMAS KROON BOARD OF TRUSTEES	50	Х						0	0	0
BILL LAPATRA BOARD OF TRUSTEES	50	Х						0	0	0
BEN KY LEE BOARD OF TRUSTEES	50	Х						0	0	0
DR CHARLOTTE LIN BOARD OF TRUSTEES	50	Х						0	0	0
HOWARD C LINCOLN BOARD OF TRUSTEES	50	Х						0	0	0
KEITH LOVELESS BOARD OF TRUSTEES	50	Х						0	0	0
JEFFREY S LYON BOARD OF TRUSTEES	50	Х						0	0	0
SCOTT W MACCORMACK BOARD OF TRUSTEES	50	Х						0	0	0
RICHARD MAGNUSON TREASURER	50	Х		х				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours	Posi t	tion ( hat a	che	)	_		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			
DOUGLAS W MCCALLUM BOARD OF TRUSTEES	50	х						0	0	0
SANDY D MCDADE BOARD OF TRUSTEES	50	Х						0	0	0
WILLIAM H NEUKOM BOARD OF TRUSTEES	50	Х						0	0	0
GLENNA OLSON BOARD OF TRUSTEES	50	Х						0	0	0
NANCY PELLEGRINO BOARD OF TRUSTEES	50	Х						0	0	0
MARY PIGOTT BOARD OF TRUSTEES	50	Х						0	0	0
CAROL R POWELL BOARD OF TRUSTEES	50	Х						0	0	0
BILL PREDMORE BOARD OF TRUSTEES	50	Х						0	0	0
DAVID A PRITCHARD BOARD OF TRUSTEES	50	Х						0	0	0
JAMES D RAISBECK BOARD OF TRUSTEES	50	Х						0	0	0
SCOTT REDMAN IMMEDIATE PAST CHAIR	1 50	Х		х				0	0	0
STEPHEN PREYNOLDS BOARD OF TRUSTEES	50	Х						0	0	0
PETE ROSE VICE CHAIR	50	Х		х				0	0	0
LEN ROZEK BOARD OF TRUSTEES	50	Х						0	0	0
STANLEY D SAVAGE BOARD OF TRUSTEES	50	Х						0	0	0
JOHN A SCHUKAR BOARD OF TRUSTEES	50	Х						0	0	0
DAVID SKINNER BOARD OF TRUSTEES	50	Х						0	0	0
MARY E SNAPP BOARD OF TRUSTEES	1 50	Х						0	0	0
CARLYN STEINER BOARD OF TRUSTEES	50	Х						0	0	0
EMORY THOMAS JR BOARD OF TRUSTEES	50	Х						0	0	0
DANIEL M WAGGONER BOARD OF TRUSTEES	50	Х						0	0	0
LAURA N WHITAKER BOARD OF TRUSTEES	50	Х						0	0	0
SHAUN L WOLFE BOARD OF TRUSTEES	50	Х						0	0	0
CHARLES B WRIGHT III BOARD OF TRUSTEES	50	Х						0	0	0
JAMES F TUNE PRESIDENT & CEO	40 00			x				160,000	0	15,597

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

A STRATEGIC ECONOMIC ADVANTAGE TO THE REGION

#### 4d. Other program services ) (Expenses \$ including grants of \$ ) (Revenue \$ (Code 600,776 93,277 ) NOW IN ITS 12TH YEAR, ARTSFUND'S BOARD LEADERSHIP TRAINING PROVIDES ARTSFUND VOLUNTEERS AND MEMBERS OF CURRENT CULTURAL ORGANIZATION BOARDS CRUCIAL TRAINING ON SUCH TOPICS AS LEGAL AND FINANCIAL RESPONSIBILITIES, STRATEGIC PLANNING, FUNDRAISING AND BEST GOVERNANCE PRACTICES WITH THE BOEING COMPANY, ARTSFUND ESTABLISHED THE STATE OF WASHINGTON BUILDING FOR THE ARTS PROGRAM IN 1991 TO PROVIDE STATE RESOURCES FOR A SHARE OF WORTHY ARTS CAPITAL PROJECTS ALL AROUND THE STATE THE PROGRAM HAS BEEN SUPPORTED IN THE STATE BUDGET IN EVERY BIENNIUM SINCE 1991 ARTSFUND ROUTINELY CONSULTS WITH SENIOR STAFF AND BOARDS OF CULTURAL ORGANIZATIONS TO HELP THEM ADDRESS VARIOUS MANAGEMENT AND GOVERNANCE ISSUES CULTURAL RESOURCE COLLECTIVE (FORMERLY CULTURAL DATABASE) - ARTSFUND SERVES AS FISCAL AGENT TO PROVIDE DATABASE SERVICES FOR CULTURAL GROUPS IN THIS COMMUNITY CULTURAL ACCESS FUND PROGRAM ARTSFUND SERVES AS A FISCAL AGENT FOR INTIATIVES TO FURTHER THE GOAL OF CELEBRATING AND PROMOTING THE ARTS AND CULTURE AS