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Short Form

Return of Organization Exempt From Income Tax

OMB No 1545-1150

2011

Open to Public Inspection

Form 990-EZ

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)
 Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form.
 The organization may have to use a copy of this return to satisfy state reporting requirements

Department of the Treasury
Internal Revenue Service

A For the 2011 calendar year, or tax year beginning JUL 1, 2011 and ending JUN 30, 2012

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

C Name of organization: **ARTS IN ACTION, INC.**
 Number and street (or P.O. box, if mail is not delivered to street address): **2658 MAIN STREET**
 City or town, state or country, and ZIP + 4: **HURRICANE, WV 25526-1419**

D Employer identification number: **16-1664614**
 E Telephone number: **3045626005**
 F Group Exemption Number: **▶**

G Accounting Method: Cash Accrual Other (specify) **▶**

I Website: **▶ WWW.ARTSINACTION.INFO**

J Tax-exempt status (check only one) - 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

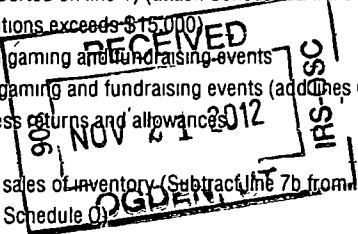
K Check if the organization is not a section 509(a)(3) supporting organization or a section 527 organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ **▶ \$ 152,483.**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I.)

Check if the organization used Schedule O to respond to any question in this Part I

| | | | | |
|------------|--|--|----------|---------|
| Revenue | 1 | Contributions, gifts, and similar amounts received | 1 | 44,086. |
| | 2 | Program service revenue including government fees and contracts | 2 | 84,136. |
| | 3 | Membership dues and assessments | 3 | |
| | 4 | Investment income | 4 | |
| | 5a | Gross amount from sale of assets other than inventory | 5a | |
| | 5b | Less: cost or other basis and sales expenses | 5b | |
| | 5c | Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) | 5c | |
| | 6 | Gaming and fundraising events | | |
| | a | Gross income from gaming (attach Schedule G if greater than \$15,000) | 6a | |
| b | Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) | 6b | 24,261. | |
| c | Less: direct expenses from gaming and fundraising events | 6c | 10,910. | |
| d | Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) | 6d | 13,351. | |
| 7a | Gross sales of inventory, less returns and allowances | 7a | | |
| b | Less: cost of goods sold | 7b | | |
| c | Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) | 7c | | |
| 8 | Other revenue (describe in Schedule O) | 8 | | |
| 9 | Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 | 9 | 141,573. | |
| Expenses | 10 | Grants and similar amounts paid (list in Schedule O) | 10 | |
| | 11 | Benefits paid to or for members | 11 | |
| | 12 | Salaries, other compensation, and employee benefits | 12 | 52,957. |
| | 13 | Professional fees and other payments to independent contractors | 13 | 9,897. |
| | 14 | Occupancy, rent, utilities, and maintenance | 14 | 30,408. |
| | 15 | Printing, publications, postage, and shipping | 15 | 4,739. |
| | 16 | Other expenses (describe in Schedule O) | 16 | 33,094. |
| 17 | Total expenses. Add lines 10 through 16 | 17 | 131,095. | |
| Net Assets | 18 | Excess or (deficit) for the year (Subtract line 17 from line 9) | 18 | 10,478. |
| | 19 | Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) | 19 | 39,360. |
| | 20 | Other changes in net assets or fund balances (explain in Schedule O) | 20 | 0. |
| | 21 | Net assets or fund balances at end of year. Combine lines 18 through 20 | 21 | 49,838. |



SCANNED DEC 19 2012

LHA For Paperwork Reduction Act Notice, see the separate instructions

Form 990-EZ (2011)

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Sch. O to respond to any question in this Part V

| | | Yes | No |
|-----|--|-----|----|
| 33 | Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O | | X |
| 34 | Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions) | | X |
| 35a | Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)? | | X |
| 35b | If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O | N/A | |
| 35c | Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III | | X |
| 36 | Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N | | X |
| 37a | Enter amount of political expenditures, direct or indirect, as described in the instructions. | 0. | |
| 37b | Did the organization file Form 1120-POL for this year? | | X |
| 38a | Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? | | X |
| 38b | If "Yes," complete Schedule L, Part II and enter the total amount involved | N/A | |
| 39a | Section 501(c)(7) organizations. Enter: | N/A | |
| 39b | Initiation fees and capital contributions included on line 9 | N/A | |
| 39c | Gross receipts, included on line 9, for public use of club facilities | N/A | |
| 40a | Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: | | |
| | section 4911 <input type="checkbox"/> 0. ; section 4912 <input type="checkbox"/> 0. ; section 4955 <input type="checkbox"/> 0. | | |
| 40b | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I | | X |
| | c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <input type="checkbox"/> 0. | | |
| | d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization <input type="checkbox"/> 0. | | |
| 40e | All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T | | X |
| 41 | List the states with which a copy of this return is filed. <input type="checkbox"/> WV | | |
| 42a | The organization's books are in care of <input type="checkbox"/> CHET MARSHALL, CHAIRMAN OF T Telephone no. <input type="checkbox"/> 3045626005 | | |
| | Located at <input type="checkbox"/> 2658 MAIN ST, HURRICANE, WV ZIP + 4 <input type="checkbox"/> 25526-1419 | | |
| 42b | At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | | X |
| | If "Yes," enter the name of the foreign country: <input type="checkbox"/> | | |
| | See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | | |
| 42c | At any time during the calendar year, did the organization maintain an office outside of the U.S.? | | X |
| | If "Yes," enter the name of the foreign country: <input type="checkbox"/> | | |
| 43 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year <input type="checkbox"/> 43 N/A | | |
| 44a | Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ | | X |
| 44b | Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ | | X |
| 44c | Did the organization receive any payments for indoor tanning services during the year? | | X |
| 44d | If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O | | |
| 45a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | | X |
| 45b | 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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions) | | |

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

Table with Yes/No columns for question 46. Answer: No (X).

Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 47-49b and 52, and complete the tables for lines 50 and 51. Check if the organization used Schedule O to respond to any question in this Part VI

47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Sch. C, Part II
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
49a Did the organization make any transfers to an exempt non-charitable related organization?
b If "Yes," was the related organization a section 527 organization?

Table with Yes/No columns for questions 47, 48, 49a, and 49b. Answers: 47 (No), 48 (No), 49a (No), 49b (No).

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

Table with 5 columns: (a) Name and address of each employee paid more than \$100,000; (b) Title and average hours per week devoted to position; (c) Reportable compensation (Forms W-2/1099-MISC); (d) Health benefits, contributions to employee benefit plans, and deferred compensation; (e) Estimated amount of other compensation. All entries are NONE.

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

Table with 3 columns: (a) Name and address of each independent contractor paid more than \$100,000; (b) Type of service; (c) Compensation. All entries are NONE.

d Total number of other independent contractors each receiving over \$100,000

52 Did the organization complete Schedule A? Note: All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A

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

Sign Here: Signature of officer (Jon Cantrell), Date (11-14-2013), Type or print name and title (Jon. Cantrell, President)

Paid Preparer Use Only: Print/Type preparer's name (ALBERT V. MAYS, JR.), Preparer's signature (Albert V Mays, CPA), Date (11-12-12), Check self-employed (), PTIN (P01318735), Firm's name (GRAY, GRIFFITH & MAYS, A.C.), Firm's EIN (55-0621482), Firm's address (707 VIRGINIA STREET, EAST, SUITE 400 CHARLESTON, WV 25301-2711), Phone no. (304) 345-9400

May the IRS discuss this return with the preparer shown above? See instructions

Table with Yes/No columns for question 52. Answer: Yes (X).

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

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

Section A. Public Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total |
|---|----------|----------|----------|----------|----------|-----------|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | 37,562. | 43,309. | 45,590. | 44,986. | 44,086. | 215,533. |
| 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 3 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 4 Total. Add lines 1 through 3 | 37,562. | 43,309. | 45,590. | 44,986. | 44,086. | 215,533. |
| 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) | | | | | | 23,365. |
| 6 Public support. Subtract line 5 from line 4 | | | | | | 192,168. |

Section B. Total Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total |
|---|----------|----------|----------|----------|----------|-----------|
| 7 Amounts from line 4 | 37,562. | 43,309. | 45,590. | 44,986. | 44,086. | 215,533. |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | | | | | | |
| 9 Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | |
| 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) | | | | | | |
| 11 Total support. Add lines 7 through 10 | | | | | | 215,533. |
| 12 Gross receipts from related activities, etc. (see instructions) | | | | | 12 | 367,629. |
| 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/> | | | | | | |

Section C. Computation of Public Support Percentage

| | | | |
|--|----|-------|---|
| 14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) | 14 | 89.16 | % |
| 15 Public support percentage from 2010 Schedule A, Part II, line 14 | 15 | 87.00 | % |
| 16a 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input checked="" type="checkbox"/> | | | |
| b 33 1/3% support test - 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/> | | | |
| 17a 10% -facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/> | | | |
| b 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/> | | | |
| 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/> | | | |

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

| Calendar year (or fiscal year beginning in) ► | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total |
|---|----------|----------|----------|----------|----------|-----------|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | | | | | | |
| 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | | | | | | |
| 3 Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | |
| 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 5 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 6 Total. Add lines 1 through 5 | | | | | | |
| 7a Amounts included on lines 1, 2, and 3 received from disqualified persons | | | | | | |
| b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year | | | | | | |
| c Add lines 7a and 7b | | | | | | |
| 8 Public support (Subtract line 7c from line 6) | | | | | | |

Section B. Total Support

| Calendar year (or fiscal year beginning in) ► | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total |
|---|----------|----------|----------|----------|----------|-----------|
| 9 Amounts from line 6 | | | | | | |
| 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | | | | | | |
| b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | |
| c Add lines 10a and 10b | | | | | | |
| 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | | | | | |
| 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) | | | | | | |
| 13 Total support (Add lines 9, 10c, 11, and 12) | | | | | | |

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

| | | |
|--|-----------|---|
| 15 Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f)) | 15 | % |
| 16 Public support percentage from 2010 Schedule A, Part III, line 15 | 16 | % |

Section D. Computation of Investment Income Percentage

| | | |
|---|-----------|---|
| 17 Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f)) | 17 | % |
| 18 Investment income percentage from 2010 Schedule A, Part III, line 17 | 18 | % |

19a 33 1/3% support tests - 2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000

| | | (a) Event #1 | (b) Event #2 | (c) Other events | (d) Total events |
|-----------------|----|---|--------------|-------------------------------|--------------------------------|
| | | PICTURES (event type) | (event type) | NONE (total number) | (add col (a) through col. (c)) |
| Revenue | 1 | Gross receipts | 5,809. | | 5,809. |
| | 2 | Less: Charitable contributions | | | |
| | 3 | Gross income (line 1 minus line 2) | 5,809. | | 5,809. |
| Direct Expenses | 4 | Cash prizes | | | |
| | 5 | Noncash prizes | | | |
| | 6 | Rent/facility costs | | | |
| | 7 | Food and beverages | | | |
| | 8 | Entertainment | | | |
| | 9 | Other direct expenses | 4,055. | | 4,055. |
| | 10 | Direct expense summary. Add lines 4 through 9 in column (d) | | | (4,055) |
| | 11 | Net income summary. Combine line 3, column (d), and line 10 | | | 1,754. |

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

| | | (a) Bingo | (b) Pull tabs/instant bingo/progressive bingo | (c) Other gaming | (d) Total gaming (add col. (a) through col (c)) |
|-----------------|---|-----------------------|---|---|---|
| | | 1 | Gross revenue | | |
| Direct Expenses | 2 | Cash prizes | | | |
| | 3 | Noncash prizes | | | |
| | 4 | Rent/facility costs | | | |
| | 5 | Other direct expenses | | | |
| | 6 | Volunteer labor | <input type="checkbox"/> Yes _____ % <input type="checkbox"/> No | <input type="checkbox"/> Yes _____ % <input type="checkbox"/> No | <input type="checkbox"/> Yes _____ % <input type="checkbox"/> No |
| 7 | Direct expense summary. Add lines 2 through 5 in column (d) | | | | () |
| 8 | Net gaming income summary. Combine line 1, column d, and line 7 | | | | |

9 Enter the state(s) in which the organization operates gaming activities _____
 a Is the organization licensed to operate gaming activities in each of these states? Yes No
 b If "No," explain. _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No
 b If "Yes," explain. _____

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2011

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Name of the organization

ARTS IN ACTION, INC.

Employer identification number

16-1664614

FORM 990-EZ, PART I, LINE 14, OCCUPANCY, RENT, UTILITIES, AND MAINTENANCE:

| DESCRIPTION OF EXPENSES: | AMOUNT: |
|--------------------------------------|----------------|
| DEPRECIATION | 6,408. |
| OTHER EXPENSES | 24,000. |
| TOTAL TO FORM 990-EZ, LINE 14 | 30,408. |

FORM 990-EZ, PART I, LINE 16, OTHER EXPENSES:

| DESCRIPTION OF OTHER EXPENSES: | AMOUNT: |
|--------------------------------------|----------------|
| PAYROLL TAXES | 4,051. |
| COSTUMING EXPENSE | 10,313. |
| SUPPLIES | 9,393. |
| LICENSE & FEES | 77. |
| TELEPHONE | 3,153. |
| ADVERTISING | 2,719. |
| INTEREST | 111. |
| INSURANCE | 2,783. |
| PENALTIES | 64. |
| CONTRIBUTIONS | 430. |
| TOTAL TO FORM 990-EZ, LINE 16 | 33,094. |

FORM 990-EZ, PART II, LINE 24, OTHER ASSETS:

| DESCRIPTION | BEG. OF YEAR | END OF YEAR |
|--------------------------------------|----------------|----------------|
| EMPLOYEE ADVANCE | 797. | 0. |
| OTHER DEPRECIABLE ASSETS | 17,066. | 24,535. |
| TOTAL TO FORM 990-EZ, LINE 24 | 17,863. | 24,535. |

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization **ARTS IN ACTION, INC.** Employer identification number **16-1664614**

FORM 990-EZ, PART II, LINE 26, OTHER LIABILITIES:

| DESCRIPTION | BEG. OF YEAR | END OF YEAR |
|---------------------------------------|---------------|---------------|
| ACCOUNTS PAYABLE & ACCRUED EXPENSES | 1,269. | 2,089. |
| NOTE PAYABLE TO UNRELATED THIRD PARTY | 4,338. | 0. |
| TOTAL TO FORM 990-EZ, LINE 26 | 5,607. | 2,089. |

FORM 990-EZ, PART III, PRIMARY EXEMPT PURPOSE - ARTS IN ACTION IS A NON-PROFIT, FAITH-BASED ORGANIZATION THAT PROVIDES PROFESSIONAL AND POSITIVE EDUCATION AND PERFORMANCE OPPORTUNITIES IN THE ARTS FOR ALL AGES AND ABILITIES WITH A CHRISTIAN INFLUENCE. WE ENCOURAGE AND EQUIP RESIDENTS OF PUTNAM, KANAWHA, CABELL, MASON AND LINCOLN COUNTIES AND OTHER AREAS REGARDLESS OF RACE, RELIGION, GENDER AND ECONOMIC STATUS. WE OFFER STRUCTURED AND DISCIPLINED PROGRAMS AND ACTIVITIES TAUGHT AND LEAD BY A HIGHLY-SKILLED, QUALIFIED, AND DEDICATED FACULTY AND STAFF.

FORM 990-EZ, PART III, LINE 28, PROGRAM SERVICE ACCOMPLISHMENTS: MASTERPIECE DANCE PROGRAM OFFERING TRAINING IN CLASSICAL BALLET, POINTE/TOE, MODERN, LYRICAL, CONTEMPORARY, JAZZ, HOLY HIP HOP, TAP, ADULT LYRICAL AND TAP, AND MOMMY AND ME. CLASSES FOR BEGINNER DANCERS TO ADVANCED LEVEL, AGES 2-ADULT ARE TAUGHT BY A HIGHLY-SKILLED AND PASSIONATE FACULTY DEDICATED TO EXCELLENCE IN SKILL TECHNIQUE, CREATIVITY AND ARTISTIC EXPRESSION.

FORM 990-EZ, PART III, LINE 29, PROGRAM SERVICE ACCOMPLISHMENTS: PRINCESS ACADEMY IS A FUND DAY CAMP THAT HAS DAILY DANCE CLASSES WHICH INCLUDES INSTRUCTION IN BALLET AND CREATIVE

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization

ARTS IN ACTION, INC.

Employer identification number

16-1664614

MOVEMENT WITH AN EMPHASIS ON POISE, GRACE AND TECHNIQUE.

THE STUDENTS EXPERIENCE THE ROYAL TREATMENT THROUGH DRAMATIC PLAY

ACTING USING PROPS, TIARAS, CROWNS AND COSTUMES AND DURING ART SESSIONS

THEY CREATE BEAUTIFUL PRINCESS TREASURES.

FORM 990-EZ, PART III, LINE 30, PROGRAM SERVICE ACCOMPLISHMENTS:

ART PROGRAM IS DEDICATED TO TEACHING INDIVIDUALS OF ALL

AGES, 5 THROUGH ADULT, THE MANY FORMS OF ART, SUCH AS

DRAWING, PAINTING, SCULPTURE TO NAME A FEW. THE PROGRAM

OFFERS SCHOLARSHIPS TO INDIVIDUALS UNABLE TO AFFORD THIS PROGRAM.

FORM 990-EZ, PART III LINE 31, OTHER PROGRAM SERVICE ACCOMPLISHMENTS:

LAMBS OF LIGHT IS A UNIQUE AND POWERFUL PERFORMANCE TOURING TROUPE.

THIS AUDITION-ONLY GROUP IS KNOWN FOR THEIR PASSIONATE PERFORMANCES

THAT EXUDE ADORATION FOR OUR LORD, JESUS CHRIST. COMPRISED OF DANCERS,

ACTORS AND MUSICIANS AGES 5-ADULT.

GRANTS \$ 0. EXPENSES \$ 4,105.

URBAN STAGE IS A DANCE PROGRAM DEDICATED TO OFFERING STRUCTURED AND

DISCIPLINED CLASSES LED BY A PROFESSIONAL FACULTY TO UNDERPRIVILEGED

CHILDREN AND TEENS. THE PROGRAM SERVES 45 CHILDREN WHO LIVE AT PROVERTY

LEVEL.

GRANTS \$ 5,000. EXPENSES \$ 4,541.

CRESCENDO MUSIC EDUCATION IS DESIGNED TO INTRODUCE AND DEVELOP SKILLS

IN A VARIETY OF INSTRUMENTS INCLUDING PIANO. GROUP AND PRIVATE LESSONS

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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ARE OFFERED TO MEET THE NEEDS OF THE STUDENT. THROUGH PARTNERSHIPS WITH
APPALACHIAN CHILDREN'S CHORUS, WE ARE ABLE TO OFFER EDUCATIONAL
OPPORTUNITIES IN CHOIR, AS WELL AS PERFORMANCE OPPORTUNITIES. PRIVATE
VOICE LESSONS ARE OFFERED FOR ELIGIBLE STUDENTS.

GRANTS \$ 500. EXPENSES \$ 3,134.

SPIRIT IN ACTION CHEERLEADING AND POM POMS IS A HIGH ENERGY, FUN AND
MOTIVATING PROGRAM THAT WILL BUILD A NEW INTEREST AND LOVE FOR
CHEERING. STUDENTS LEARN A PROGRESSION OF SKILLS INCLUDING JUMPS,
POSITIONS AND TRANSITIONS, CHEER DANCE, POM POM WORK, BASIC TUMBLING
AND STUNTS. STUDENTS REAP THE NUMEROUS BENEFITS OF PHYSICAL ACTIVITY
AND TEAM WORK IN A FUN AND ENCOURAGING ATMOSPHERE.

GRANTS \$ 0. EXPENSES \$ 1,118.

REVELATION THEATER IS A COMPREHENSIVE PROGRAM DEDICTED TO EDUCATE
STUDENTS OF ALL AGES IN ALL ASPECTS OF DRAMA.

GRANTS \$ 0. EXPENSES \$ 1,023.

DANCE INTENSIVE IS FOR DEDICATED AND DISCIPLINED DANCERS WHO WANT TO
REFINE THEIR TECHNICAL SKILLSWHILE BEING CHALLENGED, MOVTVATED AND
INSPIRED TO DANCE IN EXCELLENCE.

GRANTS \$ 0. EXPENSES \$ 105.