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Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047 on Open to Public on Open to Public on Open to Public on Open to Public on Open to Op

-			2011 calendar year, or tax year beginning JUL 1, 2011 and ending	TITAL 20 2010	
	A F	or the	2011 calendar year, or tax year beginning JUL 1, 2011 and ending		
1	B C	heck if	C Name of organization	D Employer identifi	cation number
	ap			ľ	
		Addres	S ARKANSAS ARTS CENTER FOUNDATION	ì	
	$\overline{}$	Name		7 23-7	337495
		Jchange ∃Initial			
	\vdash	_return	Number and street (or P.O. box if mail is not delivered to street address) Room/su		
	<u></u>	Termin	1.0. BOX 2137	(501)372-4000
		Ameno	City or town, state or country, and ZIP + 4	G Gross receipts \$	10,297,293.
		Application	LITTLE ROCK, AR 72203	H(a) is this a group re	eturn
		pendir		for affiliates?	Yes X No
			SAME AS C ABOVE	H(b) Are all affiliates inc	
•		-		⊣ ''	
					list. (see instructions)
			e: N/A	H(c) Group exemption	n number -
				ear of formation: 1972 N	vi State of legal domicile: AR
ì	·Pã		Summary		
		1	Bnefly describe the organization's mission or most significant activities: THE ARKAI	NSAS ARTS CEN	TER
	ဍီ၂	-	FOUNDATION WAS CREATED BY THE ARKANSAS ARTS	CENTER IN 197	2 TO MANAGE
	힐	٠ .			
	ē		Check this box if the organization discontinued its operations or disposed of m	1	13
	<u>۾</u> ا		Number of voting members of the governing body (Part VI, line 1a)	3	
	~	4	Number of independent voting members of the governing body (Part VI, line 1b)	. <u>4</u>	13
	Activities & Governance	5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	0
3	₹	6	Total number of volunteers (estimate if necessary)	6	15
2013	ŧ		Total unrelated business revenue from Part VIII, column (C), line 12	7a	-8,674.
7	٧		Net unrelated business taxable income from Form 990-T, line 34	7b	-8,674.
o	-		Net uniolated basiness taxable indone from 1 offi 550 1, iiile 54	Prior Year	
fmx.		_		673,597.	Current Year 4,854,926.
α	en l		Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)		
MAR	Revenue	9	0.	0.	
-	ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	467,303.	664,492.
	-	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	19,083.	-4,366.
SCANNED	1	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,159,983.	5,515,052.
=			Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,682,293.	5,411,621.
4			Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
\ddot{o}				0.	0.
Ś	Expenses		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	
	Ë		Professional fundraising fees (Part IX, column (A), line 11e)		0.
	Š	b	Total fundraising expenses (Part IX, column (D), line 25)	. The Company of the	
	ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	906,791.	794,649.
		18	Total expenses. Add lines 13-17 (must equal Fart IX, column (A), line 25) Revenue less expenses. Subtract line 18 from line 12 RECEIVED	2,589,084.	6,206,270.
		19	Revenue less expenses. Subtract line 18 from line 12 RECEIVED	-1,429,101.	-691,218.
	28		[Beginning of Current Year	End of Year
	sets or alances	20	Total assets (Part X, line 16)	27,122,640.	27,112,356.
	Base		Total assets (Part X, line 16) Total line lites (Part X, line 26) MAR 0 4 2013	1,406,703.	2,296,720.
	팔		Total liabilities (Part X, line 26)	25,715,937.	24,815,636.
	실		Net assets or fund balances. Subtract line 21 from line 20 COLONIA OF SIGNATURE BLOCK	43,113,331.	24,615,636.
	Unde	er pena	ities of perjury, I declare that I have examined this return, including accompanying schedules and stat	ements, and to the best of m	ry knowledge and belief, it is
	true,	correc	t, and esemplete. Declaration of preparer (other than officer) is based on all information of which prepare	irer has any knowledge.	
			Todd (1. xlum	2.14	· <i>13</i>
	Sigr	١	Signature of officer	Date	
	Her		TODD HERMAN, DIRECTOR		
	ner	-	Type or print name and title	·	
				Date Check	PTIN
			Print/Type preparer's name MARY ELLEN VANGILDER Preparer's Aggrature William Control of the c	1 Onton	
	Paid			02/13/13 self-employ	P00626271
		arer	Firm's name JPMS COX, PLLC	Firm's EIN	20-1776739
	Use	Only	Firm's address 11300 CANTRELL ROAD, SUITE 301		
			LITTLE ROCK, AR 72212	Phone no. 5	01-227-5800
	Mav	the II	RS discuss this return with the preparer shown above? (see instructions)		X Yes No
		01 01-2	-		Form 990 (2011)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

ARKANSAS ARTS CENTER FOUNDATION

23-7337495

Form 990 (2011)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		x	
2	If "Yes," complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
2 3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
3	public office? If "Yes," complete Schedule C, Part I	3		<u>x</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			х
=	during the tax year? If "Yes," complete Schedule C, Part II	4_		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	х	
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		X
0	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	-		
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
1	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, line 107 If "Yes," complete Schedule D,			
	Part VI .	11a	X	
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	Х	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u> </u>
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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		X
2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	X	
Ь	Was the organization included in consolidated, independent audited financial statements for the tax year?	400		х
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b		X
3	Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business.	140		
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	- 112		
_	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Х
6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
7	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	17		X
8	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		X
9	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		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	1	

	TtilV# Checklist of Required Schedules (continued)			age -
16,00	ter - in Orio or Mario a Corro and C		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
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		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	,		
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	ļ '		
	Schedule J .	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	ļ	<u> </u>
С	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		<u> </u>
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			١
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	l		.
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	1	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	l		
	of any of these persons? If "Yes," complete Schedule L, Part III	27	Mark. 4	X Acade 7
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):	201		
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	X	X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	 	<u> </u>
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,		l Ψ	
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	X	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	_	-
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation		x	
0.4	contributions? If "Yes," complete Schedule M	30	122	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	131	1	
32	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	 	1	
•	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
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	х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b				1
_	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		х
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		x
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		X

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

Form 990 (2011) ARKANSAS ARTS CENTER FOUNDATION

Part V Statements Regarding Other IRS Filings and Tax Compliance
Check if Schedule O contains a response to any question in this Part V

	Check if Schedule O contains a response to any question in this Part V			LXL
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable . 1a 1			,
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . 1b 0	į		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			. ,
	filed for the calendar year ending with or within the year covered by this return 2a 0	l		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)]
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country: ►			1.
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a		L X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	l		<u> </u>
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	i		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<u> </u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting]
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		<u> </u>
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		<u> </u>
ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		<u> </u>
10	Section 501(c)(7) organizations. Enter:	.		
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
D	Gross income from other sources (Do not net amounts due or paid to other sources against			
40-	amounts due or received from them.)			ļi
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		$\vdash \vdash \vdash$
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u></u>		 -
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		<u> </u>
	Note. See the instructions for additional information the organization must report on Schedule O.			
D	Enter the amount of reserves the organization is required to maintain by the states in which the			
_	organization is licensed to issue qualified health plans [13b]	, J		
	Enter the amount of reserves on hand			V
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
<u>D</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		<u> </u>

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

	Check if Schedule O contains a response to any question in this Part VI			\mathbf{X}
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 1a			
	If there are material differences in voting rights among members of the governing body, or if the governing		, .	
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
ь	Enter the number of voting members included in line 1a, above, who are independent 1b 13			
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	X	
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		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
•	more members of the governing body?	7a		х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
_	persons other than the governing body?	7b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	-:-		
	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
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	ĺ	х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
	1011 21 1 One To (This couldn't requised information about political not required by the internal notes had been provided in		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	103	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	104		
-	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		Х
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
. <u>_</u> _	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
Ŭ	in Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
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?			
2	The organization's CEO, Executive Director, or top management official	15a		X
ь ь	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	130		
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
.04	taxable entity during the year?	- 16a	x	
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	10a		
b	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b	- -	X
Sec	tion C. Disclosure	100		
17	List the states with which a copy of this Form 990 is required to be filed ▶AR			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a		ماد	
	for public inspection. Indicate how you made these available. Check all that apply.	4 v aliaL		
	Own website X Another's website X Upon request			
19	, · ·	d fina-	ocial	
13	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an statements available to the public during the tax year.	u mar	icidi	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	tion:		
25	LAINE HARBER, ARKANSAS ARTS CENTER FOUNDATION - 501-372-4000	uon.		
	P.O. BOX 2137 LITTLE BOCK AR 72203			

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

Check if Schedule O contains a response to any question in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. 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.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

- 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 organi	(C)								/ E\	
(A) Name and Title	(B) Average hours per week	box, offic	Position (do not check more box, unless person officer and a direct				h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(describe hours for related organizations in Schedule O)	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) WARREN STEPHENS						'				
CHAIRMAN	0.30	Х		X				0.	0.	0.
(2) GEORGE O'CONNOR										
TREASURER	0.30	Х		Х				0.	0.	0.
(3) JAMES DYKE			İ							
DIRECTOR	0.30	X		L				0.	0.	0.
(4) ROBYN HORN							Į			
DIRECTOR	0.30	Х			_	<u> </u>	<u> </u>	0.	0.	0.
(5) CURTIS FINCH JR					İ	1	ĺ			•
DIRECTOR	0.30	Х				_		0.	0.	0.
(6) PHIL COX		l								
DIRECTOR	0.30	X				L	_	0.	0.	0.
(7) BEN HUSSMAN	0.30	х						0.	0.	0
DIRECTOR	0.30	Λ	_		-	-		0.	0.	0.
(8) SANDRA CONNOR DIRECTOR	0.30	х						٥.	0.	0.
(9) CLAIBORNE DEMING	0.30	Δ	-	-		├	├	0.	0.	0.
DIRECTOR	0.30	х			1			0.	0.	0.
(10) ROBERT TUCKER	0.30	Δ		┝	├	╁	├	0.	0.	0.
DIRECTOR	0.30	x						0.	0.	0.
(11) JOHN TYSON	- 0.30	1		┢	\vdash	┢	┝	<u> </u>		<u> </u>
DIRECTOR	0.30	x						0.	٥.	0.
(12) BELINDA SHULTS		=			┢┈		\vdash	•	•	
DIRECTOR	0.30	x			l			0.	٥.	0.
(13) CHARLOTTE BRADBURY			l —	┢	\vdash		\vdash			
DIRECTOR	0.30	x						0.	٥.	0.
(14) TODD HERMAN				<u> </u>						
SECRETARY	0.30		l	x				0.	160,000.	0.
(15) TOWNSEND WOLFE					T	T		İ "'		
FORMER EXEC DIRECTOR	0.00		_		L	_	X	150,000.	0.	0.
		l		<u> </u>	L_	<u> </u>	L			

Part VII Section A. Officers, Directors, To	ustees, Key E	mple	oyee	es, a	nd l	High	est	Compensated Employ	ees (continued,)	
(A)	(B)			(0	C)			(D)	(E)	T	(F)
Name and title	Average	Position (do not check more than one						Reportable	Reportabl	e	Estimated
	hours per	box	, unle	ss pe	rson	is bot	h an	compensation	compensat		amount of
	week	-			II OC II	J/UUS	T	from	from relate	1	other
	(describe hours for	or director						the	organizatio		compensation
	related	or di	89			sated	İ	organization	(W-2/1099-M	ISC)	from the
	organizations	ĕ	trustee		 =	nbeu		(W-2/1099-MISC)			organization and related
	ın Schedule	lal	E G		훁	stcor	<u>.</u>			1	organizations
	O)	Individual	Institutional	Officer	Key employee	Highest compensati employee	Богшег				- G
		_	<u> </u>	_		L	<u> </u>				
									. ,,,,		
		\vdash			\vdash	-	-			-+	
		-		_	_	<u> </u>	_			$-\!\!\!\!\!\!+$	
Marie 1970		<u> </u>			_		_				
1b Sub-total		<u> </u>	ь	I		┰		150,000.	160,0	00.	0.
c Total from continuation sheets to Part	/II. Section A							0.		0.	0.
d Total (add lines 1b and 1c)	,							150,000.	160,0	00.	0.
Total number of individuals (including but	not limited to th	nose	liste	ed al	bove	e) wi	no r				
compensation from the organization											Yes No
3 Did the organization list any former office	r, director, or tru	uste	e, ke	ey er	nplo	yee	, or	highest compensated e	mployee on	ڐ۪	
line 1a? If "Yes," complete Schedule J for	such individual					•				ľ	3 X
4 For any individual listed on line 1a, is the								•	the organizatıoı	ר [新教教
and related organizations greater than \$1	-		-							Į.	4 X
5 Did any person listed on line 1a receive or							relat	ted organization or indiv	idual for service	ıs 🏻	W RE TO
rendered to the organization? If "Yes," con Section B. Independent Contractors	npiete Scriedai	e J i	Or Si	ucn	pers	SOLL	_				5 X
Complete this table for your five highest of	ompensated in	depe	ende	ent c	ontr	racto	ors 1	that received more than	\$100,000 of co	mpensa	ition from
the organization. Report compensation fo	r the calendar y	ear	endı	ng v	vith	or w	ıthı	n the organization's tax	year.		
(A) Name and busines	s address							(B) Description of s	ervices	Cc	(C) ompensation
STEPHENS, INC.	T. DOGT		, ,	701		1					120 106
111 CENTER STREET, LITTI	E ROCK,	Al	χ .	122	<u> 20.</u>	<u> </u>		INVESTMENT S	ERVICES	+	138,486.
							-			ـــــ	
										<u> </u>	
			_								
Total number of independent contractors \$100,000 of compensation from the organ	. •	ot li	mite	d to	tho	se li:	stec	d above) who received in	nore than		
w roo,ooo or compensation from the organ	nzation i					_				1. 中国 医多种性	eart. Ebridhan, Mariet

Page 9

						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
इड	1	а	Federated campaigns	1a				-	1
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues	1b					
الجَيْ			Fundraising events	1c	•				
i ii			Related organizations	1d					
S, E			Government grants (contribut						
<u>e</u>			All other contributions, gifts, gran	· —					
臣			similar amounts not included abo		854,926.				
Ęġ		g	Noncash contributions included in lines		900,000.				
일일		_	Total. Add lines 1a-1f			4,854,926.			j
\neg					Business Code				
g	2	а							
ارچ		b							
Se		С							
e a		d							<u>-</u>
Program Service Revenue		е							
ሬ		f	All other program service reve	enue					
		g	Total. Add lines 2a-2f		>				
	3		Investment income (including	dividends, inter	est, and				
			other similar amounts)		>	480,540.			480,540.
	4		Income from investment of ta	x-exempt bond ;	proceeds				
	5		Royalties	_					
				(i) Real	(ii) Personal				
	6	а	Gross rents						
		b	Less: rental expenses				ı		1
		С	Rental income or (loss)		<u> </u>		·]
		d	Net rental income or (loss)		▶				
	7	а	Gross amount from sales of	(i) Securities	(ii) Other				
			assets other than inventory	4966193.		4			
		b	Less: cost or other basis	4700041					
			and sales expenses	4782241.					
			Gain or (loss)	183,952.		102 052			102 052
1			Net gain or (loss) .		<u> </u>	183,952.			183,952.
enne	8	а	Gross income from fundraising	•					
Ne l			including \$	of					
Other Rev			contributions reported on line						
횰		_	Part IV, line 18	a					
ŏ			Less: direct expenses	b dravava aveata					
			Net income or (loss) from fund Gross income from gaming a	-					
	7	a	Part IV, line 19	a a		1			
		h	Less: direct expenses	a b		1			
			Net income or (loss) from gan						'
			Gross sales of inventory, less	-					
	10	•	and allowances	a		•			ı
		h	Less: cost of goods sold	b					
			Net income or (loss) from sale	-					
t		_	Miscellaneous Revenu		Business Code				
ľ	11	a	CASH SURRENDER		519100	4,308.			4,308.
		b	ENERGY TRANSFER		211110	-8,674.		-8,674.	
		С							
		d	All other revenue						
		e	Total. Add lines 11a-11d		•	-4,366.			
	12		Total revenue. See instructions.		<u> </u>	5,515,052.	0.	-8,674.	668,800.
13200 01-23	9 - 12								Form 990 (2011)

Form 990 (2011) ARKANSAS ARTS
Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a respon	ise to any question in th			<u> </u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and		_		
	organizations in the United States. See Part IV, line 21	5,411,621.	5,411,621.		
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				. <u>-</u>
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
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 salanes and wages _				
8	Pension plan accruals and contributions (include				_
	section 401(k) and section 403(b) employer contributions)				<u> </u>
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management .				
b	Legal				
C	Accounting	34,002.	34,002.		
d	Lobbying .				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees			· 	
g	Other .				
12	Advertising and promotion				
13	Office expenses				·
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest			_	
21	Payments to affiliates	127 275			<u> </u>
22	Depreciation, depletion, and amortization	427,375.	427,375.		
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)			:	
а	TRUSTEE AND INVESTMENT	138,486.	138,486.		
Ь	CONTRACT EXPENSE	104,186.	104,186.		
С	INSURANCE	77,089.	77,089.		
d	MISCELLANEOUS	12,965.	12,965.		
е	All other expenses	546.	546.		
25	Total functional expenses. Add lines 1 through 24e	6,206,270.	6,206,270.	0.	0.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2011)
Part X Balance Sheet

. . .

Par	rt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	9,808.	1	2,563.
	2	Savings and temporary cash investments	454,543.	2	654,563.
	3	Pledges and grants receivable, net	-	3	
	4	Accounts receivable, net	2,194,525.	4	1,274,284.
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II			
		of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			- "
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			,
	İ	employers and sponsoring organizations of section 501(c)(9) voluntary			
		employees' beneficiary organizations (see instructions)		6	
Assets	7	Notes and loans receivable, net		7	
Ass	8	Inventones for sale or use		8	
•	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 13,527,712	.		
	Ь	Less: accumulated depreciation 10b 6,424,962	7,530,125.	10c	7,102,750.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11	15,709,786.	12	17,280,733.
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	1,223,853.	15	797,463.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	27,122,640.	16	27,112,356.
	17	Accounts payable and accrued expenses	216,046.	17	1,151,877.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
es	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees,			
<u>ia</u>		highest compensated employees, and disqualified persons. Complete Part II			
_		of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	<u> </u>
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of	1,190,657.	25	1,144,843.
	26	Schedule D Total liabilities. Add lines 17 through 25	1,406,703.	26	2,296,720.
	20	Organizations that follow SFAS 117, check here	1,400,703.	20	2,230,720
s		lines 27 through 29, and lines 33 and 34.			
e)L	27	Unrestricted net assets	20,298,749.	27	18,832,582.
alaı	28	Temporarily restricted net assets	1,338,204.	28	1,927,073.
d B	29	Permanently restricted net assets	4,078,984.	29	4,055,981.
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here			,
orF		complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	
\SS(31	Paid-in or capital surplus, or land, building, or equipment fund		31	
et A	32	Retained earnings, endowment, accumulated income, or other funds		32	
ž	33	Total net assets or fund balances	25,715,937.	33	24,815,636.
	34	Total liabilities and net assets/fund balances	27,122,640.	34	27,112,356.

Form	990 (2011) ARKANSAS ARTS CENTER FOUNDATION	23-13	33/495	Pag	ge 12
Pa	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI			_	X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,51		
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,20		
3	Revenue less expenses. Subtract line 2 from line 1	3	-69		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	25,71		
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-20		
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	24,81	<u>5,6</u>	<u>36.</u>
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			1
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			l
	Act and OMB Circular A-133?		3a		X
þ	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		. Зь		L

Form **990** (2011)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of t	he organization	on						E	Employer i	identificati	on nu	mber
		ARKANSA	S ARTS CENTE	R FOU	NDATI	NC			23	<u>3-7</u> 337	495	
Part I.	Reason 1	or Public Chari	ty Status (All organiza	ations mus	st complet	e this part	.) See inst	ructions.				
The organ	ization is not a	private foundation b	pecause it is: (For lines 1	through 1	1, check o	nly one b	ox.)					
1 🔲		•	, or association of churc	-		•	•					
2 🗔	•		0(b)(1)(A)(ii). (Attach Sch			,						
3 🗔			al service organization of		n section	170(b)(1)(A)(iii).					
4	•		perated in conjunction					b)(1)(A)(iii). Enter ti	he hospital	's nam	ıe.
-	city, and state		poratou il roonjunotion		p		,	- N · N· · N	, ,			,
5 🔲	•		penefit of a college or un	iversity ov	vned or on	erated by	a governr	nental ur	nit describe	ed in		
э Ш	-	b)(1)(A)(iv). (Comple		iivorsity ov	med or op	crated by	a govonii	nontal a	THE GOSOND	JU		
•			•	daaanbaa	d in anatin	- 470/bV4	VAV)					
6 L 7 X	•	. •	ent or governmental unit							مراطيية		_
رها /	-		eives a substantial part o	or its supp	ort from a	governme	ntai unit o	r irom tn	ie generai į	public desc	ribeu i	n
	-	o)(1)(A)(vi). (Complet	*		D- 4 II \							
8	•		ection 170(b)(1)(A)(vi). (•							
9 📖	~	•	eives: (1) more than 33 1									
			ctions - subject to certa									
			axable income (less sect	ion 511 ta	x) from bu	sinesses a	cquired b	y the org	ganization a	after June 3	197	7 5.
		509(a)(2). (Complete	•									
10	•		erated exclusively to tes	•	-			-				
11 📖	-		erated exclusively for th									or
			tions described in section). See se c	tion 509	9(a)(3). Che	eck the box	that	
	describes the	type of supporting	organization and comple		•				_	1		
	a Type i			,,	e III - Func	•	•		d L	Type III - (
e 📖	By checking	this box, I certify tha	t the organization is not	controlled	directly or	r indırectly	by one o	r more di	squalified (persons oth	er tha	เท
	foundation m	anagers and other tl	nan one or more publicly	supporte	d organiza	tions desc	cribed in s	ection 50	09(a)(1) or	section 509	(a)(2).	
f	If the organiz	ation received a writ	ten determination from t	he IRS tha	at it is a Ty	pe I, Type	II, or Type	e III				
	supporting or	ganization, check th	is box									
g	Since August	17, 2006, has the o	rganization accepted an	ny gift or co	ontribution	from any	of the follo	owing pe	ersons?			
	(i) A person	n who directly or ind	rectly controls, either al	one or tog	ether with	persons o	lescribed i	ın (ii) and	l (ıii) below,	, <u> </u>	Yes	No
	the gove	erning body of the su	pported organization?							11g(i)		
	(ii) A family	member of a person	described in (i) above?							11g(ii)		
	(iii) A 35% d	controlled entity of a	person described in (i) o	or (ii) above	e?					11g(iii)		
h			about the supported or									
		J	.,		. ,							
(i) Name	of supported	(ii) EIN	(iii) Type of	(iv) Is the o	rganization	(v) Did you	notify the	(vi)	Is the	(vii) An	nount o	ıf
	anization	(11) = 114	organization	in col. (i) lis	sted in your	organizat	ion in col.	organiza: (i) organ	tion in col.		port	
0.9.			(described on lines 1-9 above or IRC section	governing	document?	(i) of your	support?	Ü.	.S.?		,	
			(see instructions))	Yes	No	Yes	No	Yes	No			
			······································					-				
	-					1			1 1			
				ľ								
			-						+ +			
				 				 	+ +			-
											=	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2011

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.)

Sec	ction A. Public Support										
Cale	ndar 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.")	1392700.	437,047.	1206118.	673,597.	4854926.	8564388.				
2	Tax revenues levied for the organ-										
	ization'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	1392700.	437,047.	1206118.	673,597.	4854926.	8564388.				
5	The portion of total contributions										
	by each person (other than a										
	governmental unit or publicly	İ									
	supported organization) included										
	on line 1 that exceeds 2% of the										
	amount shown on line 11,										
	column (f)		3975577.								
6	Public support. Subtract line 5 from line 4			4588811.							
	Section B. Total Support										
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total				
7	Amounts from line 4	1392700.	(b) 2008 437,047.	1206118.	673,597.	4854926.	8564388.				
8	Gross income from interest,										
	dividends, payments received on										
	securities loans, rents, royalties										
	and income from similar sources	704,840.	519,864.	503,710.	446,609.	480,540.	2655563.				
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.)	33,258.	31,683.	34,282.	28,272.	4,308.	131,803.				
11	Total support. Add lines 7 through 10	·					11351754.				
	Gross receipts from related activities	etc. (see instructi	ons)			12					
	First five years. If the Form 990 is fo			d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	· · · · · · · · · · · · · · · · · · ·				
	organization, check this box and stop						▶□				
Sec	ction C. Computation of Publ		rcentage								
14	Public support percentage for 2011 (line 6, column (f) d	ivided by line 11, o	column (f))		14	40.42 %				
15	Public support percentage from 2010	Schedule A, Part	II, line 14			15	37.99 %				
16a	33 1/3% support test - 2011. If the	organization did no	t check the box o	n line 13, and line	14 is 33 1/3% or r	nore, check this bo	ox and				
	stop here. The organization qualifies	as a publicly supp	orted organization	١			\triangleright X				
b	33 1/3% support test - 2010. If the	organization did no	ot check a box on	ine 13 or 16a, and	l line 15 is 33 1/3%	or more, check th	nis box				
	and stop here. The organization qua	lifies as a publicly :	supported organiz	ation		-	▶□				
17a	10% -facts-and-circumstances tes	t - 2011. If the org	anization did not d	check a box on line	e 13, 16a, or 16b,	and line 14 is 10%	or more,				
	and if the organization meets the "fac										
	meets the "facts-and-circumstances"	test. The organiza	ition qualifies as a	publicly supported	d organization		▶□				
b	10% -facts-and-circumstances tes	t - 2010. If the org	anızatıon did not d	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or				
	more, and if the organization meets t										
	organization meets the "facts-and-cir						ightharpoons				
18	Private foundation. If the organization						s •				

Schedule A (Form 990 or 990-EZ) 2011 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 per-						
formed, 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 bus-	•					
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to	ĺ					
or expended on its behalf	ĺ					
5 The value of services or facilities						
furnished by a governmental unit to						}
the organization without charge		<u> </u>				
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				ĺ		
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	j					
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						1
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 fo	r the organization'	s first, second, the	rd, fourth, or fifth t	tax year as a sect	on 501(c)(3) organi	zation,
check this box and stop here						
Section C. Computation of Pub	ic Support Pe	ercentage				
15 Public support percentage for 2011 (line 8, column (f) d	divided by line 13,	column (f))		15	
16 Public support percentage from 2010) Schedule A, Part	t III, line 15			16	9/
Section D. Computation of Inve	stment Incom	e Percentage	;		.,	
17 Investment income percentage for 20)11 (line 10c, colur	mn (f) dıvided by lı	ne 13, column (f))	-	17	9/
18 Investment income percentage from	2010 Schedule A,	Part III, line 17			18	9
19a 33 1/3% support tests - 2011. If the	organization did r	not check the box	on line 14, and lin	e 15 is more than	33 1/3%, and line	17 is not
more than 33 1/3%, check this box a	and stop here. The	e organization qua	lifies as a publicly	supported organi	zation	. ▶□
b 33 1/3% support tests - 2010. If the	organization did r	not check a box o	n line 14 or line 19	a, and line 16 is n	nore than 33 1/3%,	and
line 18 is not more than 33 1/3%, che	eck this box and s	top here. The org	anızatıon qualıfıes	as a publicly sup	ported organization	▶□
20 Private foundation. If the organization	on did not check a	box on line 14, 19	a. or 19b. check t	his box and see ii	nstructions	▶L_]

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990,

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047

2011

Open to Public Value inspection

Name of the organization

ARKANSAS ARTS CENTER FOUNDATION

Employer identification number 23 – 7337495

Pai	TIN Organizations Maintaining Donor Advised			ds or A	ccour	its. Complete i	
- 1	organization answered "Yes" to Form 990, Part IV, line						
			or advised funds	Ι (b) Fund	s and other acc	ounts
1	Total number at end of year						
2	Aggregate contributions to (during year)			†			
3	Aggregate grants from (dunng year)						
4	Aggregate value at end of year			 			
5	Did the organization inform all donors and donor advisors in w	riting that the	accete held in donor adv	used fun	de		
3	are the organization's property, subject to the organization's e	•		visea iuri	us	Yes	□ No
6	Did the organization inform all grantees, donors, and donor ad	ū		oo usad d	anh.	res	140
U	· · · · · · · · · · · · · · · · · · ·		-		-		
	for chantable purposes and not for the benefit of the donor or	donor adviso	r, or for any other purpos	se comer	ring	Yes	□ No
Pa	impermissible private benefit? 以此數 Conservation Easements. Complete if the orga	anization anev	vered "Ves" to Form 990	Part IV	line 7		NO
1	Purpose(s) of conservation easements held by the organization			, i aitiv,	iii le 7.		
•	Preservation of land for public use (e.g., recreation or ed	=	Preservation of an h	nietorical	ly impor	tant land area	
	Protection of natural habitat	ducation	Preservation of a ce				
	Preservation of open space		Freservation of a ce	si uneu in	Storic St	ructure	
2	• •	ad aanaaniati	an contribution in the for	m of a ac	naaniat	uan aasamant a	n the lest
_	Complete lines 2a through 2d if the organization held a qualifie day of the tax year.	eu conservan	on contribution in the ion	iii oi a cc	nisei vai	ion easement o	ii ui o iast
	day of the tax year.				1	Held at the End of	the Tay Vear
а	Total number of conservation easements				2a	nois at the Eng of	tilo rux rour
h	Total acreage restricted by conservation easements	•			2b		
c	Number of conservation easements on a certified historic stru	icture include	t in (a)		2c		
d	Number of conservation easements included in (c) acquired at		* *	cturo	=		
u	listed in the National Register	itei 6/17/00, a	ind not on a mistoric stru	Clure	2d		
3	Number of conservation easements modified, transferred, rele	ased exting	school or terminated by t	he organ		during the tay	
	year	sascu, extinge	isined, or terminated by t	are organ	iization	during the tax	
4	Number of states where property subject to conservation ease	ement is locat	ed 🕨				
5	Does the organization have a written policy regarding the period			- nf			
•	violations, and enforcement of the conservation easements it		g, mopodion, namaling c			Yes	□ No
6	Staff and volunteer hours devoted to monitoring, inspecting, a		conservation easements	durina t	he vear		
7	Amount of expenses incurred in monitoring, inspecting, and el	_		-	-		
8	Does each conservation easement reported on line 2(d) above						
	and section 170(h)(4)(B)(ii)?	· · · · · · · · · · · · · · · · ·	,	- ()()(-	-707	Yes	☐ No
9	In Part XIV, describe how the organization reports conservation	on easements	in its revenue and expen	se state	ment. ar		
_	include, if applicable, the text of the footnote to the organization		•				•
	conservation easements.				,	g	
P,a	rtilli Organizations Maintaining Collections of	Art, Histo	rical Treasures, or	Other	Simila	r Assets.	
	Complete if the organization answered "Yes" to Form 9	990, Part IV, lii	ne 8.				
1a	If the organization elected, as permitted under SFAS 116 (ASC	C 958), not to	report in its revenue stat	ement a	nd balar	nce sheet works	of art,
	historical treasures, or other similar assets held for public exhi	ıbıtion, educa	on, or research in furthe	rance of	public s	service, provide,	in Part XIV,
	the text of the footnote to its financial statements that describ	es these item	s.				
ь	If the organization elected, as permitted under SFAS 116 (ASC	C 958), to rep	ort in its revenue stateme	ent and b	alance	sheet works of a	art, historical
	treasures, or other similar assets held for public exhibition, edi	ucation, or re	search in furtherance of p	oublic se	rvice, pr	ovide the follow	ing amounts
	relating to these items:						-
	(i) Revenues included in Form 990, Part VIII, line 1				▶ \$		
	(ii) Assets included in Form 990, Part X				> \$		
2	If the organization received or held works of art, historical treat		r sımılar assets for financ	cial gain,	provide		
	the following amounts required to be reported under SFAS 11			J ,	-		
а	Revenues included in Form 990, Part VIII, line 1	. ,	=		> \$		
	Assets included in Form 990, Part X			•	▶ \$		

		S ARTS CENT					337495 Page:
Pai	- Januariono manitaming c					_	
3	Using the organization's acquisition, accessi	on, and other records	s, check any of t	he following tha	at are a sigr	nificant use of it	s collection items
	(check all that apply):						
а	Public exhibition	d	Loan or e	xchange progra	ams		
b	Scholarly research	е	Other				
C	X Preservation for future generations						
4	Provide a description of the organization's co	ollections and explain	how they further	er the organizat	ion's exem _l	pt purpose in Pa	art XIV.
5	Dunng the year, did the organization solicit of	r receive donations o	f art, historical ti	easures, or oth	er sımilar a	ssets	
	to be sold to raise funds rather than to be m						Yes X No
Pai	t IV Escrow and Custodial Arran		te if the organiza	ation answered	"Yes" to Fo	orm 990, Part IV	, line 9, or
	reported an amount on Form 990, Pa	 					
1a	Is the organization an agent, trustee, custod	ıan or other intermedi	ary for contribut	ions or other as	ssets not in	cluded	
	on Form 990, Part X?					<u>.</u> L	lYes
b	If "Yes," explain the arrangement in Part XIV	and complete the foll	lowing table:				
						-	Amount
С	Beginning balance				•	1c	
d	Additions during the year					1d	
е	Distributions during the year					1e	
f	Ending balance				•		
2a	Did the organization include an amount on F		21?	•		. L	lYes LlNo
Pai	If "Yes," explain the arrangement in Part XIV			F 000 P-+	N/ box 40		 :
Fai	rt V Endowment Funds. Complete i						k L A Four-ware book
4.	Deciment of week belongs	(a) Current year	(b) Prior year	(c) Two yea	rs back (d) Three years bac	k (e) Four years back
1a	Beginning of year balance Contributions						-
b	Net investment earnings, gains, and losses						
ر م	Grants or scholarships			+			
<u> </u>	Other expenditures for facilities						
•	and programs						
	Administrative expenses						
g	End of year balance					· · ·	
2	Provide the estimated percentage of the cur	rent year end halance	/line 1g. colum	a (a)) held as:			
a	Board designated or quasi-endowment	Torre your crid balance	%	r (a), ricid as.			
b	Permanent endowment	%	_,,				
	Temporarily restricted endowment ▶						
	The percentages in lines 2a, 2b, and 2c shou						
За	Are there endowment funds not in the posse	•	tion that are hele	d and administe	ered for the	organization	
	by:	•				· ·	Yes No
	(i) unrelated organizations						3a(i)
	(ii) related organizations						3a(ii)
b	If "Yes" to 3a(ii), are the related organization:	s listed as required or	Schedule R?				3b
4	Describe in Part XIV the intended uses of the	e organization's endo	wment funds				
Pai	t VI Land, Buildings, and Equipm	nent. See Form 990,	Part X, line 10.				
	Description of property	(a) Cost or ot	her (b) Co	ost or other	(c) Acc	umulated	(d) Book value
		basis (investm	ent) bas	sis (other)	depre	eciation	
1a	Land						
b	Buildings	518,8				L8,892.	_ 0
C	Leasehold improvements	11,982,1	82.		4,8	79,433.	7,102,749
d	Equipment						0
е	Other	1,026,6	38.		1.02	26,637.	1

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

7,102,750.
Schedule D (Form 990) 2011

Part VII Investments - Other Securities. See	e Form 990, Part X, line	12.		
(a) Description of security or category (including name of security)	(b) Book value	Co	(c) Method of valua st or end-of-year mar	
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A) U.S. GOVERNMENT		-		·
(B) OBLIGATIONS (SEE	-			
(C) STATEMENTS C AND D)	4,455,89	B. END-OF-Y	EAR MARKET	VALUE
(D) MUTUAL FUNDS (SEE	1,100,00	2112 01 1		
(E) STATEMENTS C AND D)	8,748,34	2. END-OF-Y	EAR MARKET	VALUE
(F) CORPORATE OBLIGATIONS	0,140,54	DIAD OF T	Dime innerent	VIIIOI
(G) (SEE STATEMENTS C AND D)	1,067,02) END_OF_V	EAR MARKET	VALUE
	1,007,02	7. END-OF-I	EAR MARKET	AVDOR
	2 000 47	DID OF V	DAD MADEDO	TAT III
(I) C AND D)	3,009,47		EAR MARKET	VALUE
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)	17,280,73			
Part VIII Investments - Program Related. Se	ee Form 990, Part X, lin	e 13		
(a) Description of investment type	(b) Book value	Co	(c) Method of valua st or end-of-year mar	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(8)				
(9)				
(10)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)				
Part IX Other Assets. See Form 990, Part X, line	15.			· · · ·
	Description			(b) Book value
	·			
(2)				
(3)				
(4)				
				
(5)				-
(6)				
				·
(8)				
(9)				
(10)				
Total. (Column (b) must equal Form 990, Part X, col (B) line				· · · · ·
Part X Other Liabilities. See Form 990, Part X,	line 25.	(h) Deelesselse		
1. (a) Description of liability		(b) Book value		
(1) Federal income taxes		1 1 1 4 0 4 2		
(2) OTHER LIABILITIES (DETAIL)	-990	1,144,843.		
(3)				i
(4)				
(5)				
(6)				j
(7)				
(8)				
(9)	<u> </u>			
(10)				
(11)				
	25.)	1,144,843.		
Total. (Column (b) must equal Form 990, Part X, col (B) line FIN 48 (ASC 740) F60xnote in Part XIV, provide the text of the rootnote to FIN 48 (ASC 740)	the organization's financial st	atements that reports the organ	zation's liability for uncerta	in tax positions under

Sche	dule D (Form 990) 2011 ARKANSAS ARTS CENTER FOUND				23-	7337495	Page 4
Pai	t XI Reconciliation of Change in Net Assets from Form 990 to	Audited	l Finan	cial Sta	temen		
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1		5,515	
2	Total expenses (Form 990, Part IX, column (A), line 25)			2		6,206	,270.
3	Excess or (deficit) for the year. Subtract line 2 from line 1			3		-691	,218.
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			,083.
9	Total adjustments (net). Add lines 4 through 8			9			,083.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and			10			,301.
Par	t XII Reconciliation of Revenue per Audited Financial Stateme	ents With	n Rever	nue per	Retur		
1	Total revenue, gains, and other support per audited financial statements		-	-	1	5,514	<u>,902.</u>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				İ		
а	Net unrealized gains on investments	2a	3	9,119	<u>.</u>		
b	Donated services and use of facilities	2b			_ .		
C	Recoveries of prior year grants	2c			╝		
d	Other (Describe in Part XIV.)	2d	-2	7,432	•		
e	Add lines 2a through 2d				2e	5,503	<u>,687.</u>
3	Subtract line 2e from line 1				3	5,503	,215.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:						
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a					
b	Other (Describe in Part XIV.)	4b	1	1,836	•		
C	Add lines 4a and 4b				4c	11	<u>,836.</u>
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)				5	5,515	,051.
Pa	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents Wit	h Expe	nses pe	er Retu		
1	Total expenses and losses per audited financial statements				1	6,415	<u>,203.</u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:						
а	Donated services and use of facilities	2a	 		_		
b	Prior year adjustments .	2b					
С	Other losses	2c					
d	Other (Describe in Part XIV.)	2d	22	0,770			
е	Add lines 2a through 2d	·			2e	220	,770.
3	Subtract line 2e from line 1				3	6,194	,433.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:						
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a					
b	Other (Describe in Part XIV.)	4b	1	1,836	. i		
С	Add lines 4a and 4b				4c	11	,836.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)				5	6,206	,269.
Pai	t XIV Supplemental Information						
Com	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II	II, lines 1a	and 4; Pa	rt IV, lines	1b and	2b; Part V, line	4, Part
X, lın	e 2, Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also comp	olete this p	art to pro	vide any a	ddıtiona	il information.	
PAI	RT III, LINE 1A: THE FOUNDATION'S PERMANENT	T COLI	LECTI	ON IN	CLUD	ES ART	
OB	JECTS HELD FOR EDUCATIONAL AND CURATORIAL 1	PURPOS	SES.	EACH	OF T	HE ITEM	SIS
~ .	11.00ED DDGGDDVED 11D G1DED 50D 11D 10DT						
CA.	ALOGED, PRESERVED AND CARED FOR, AND ACTIV	VITLES	VER	TLAIN	G TH	EIR	
EV.	STENCE AND ASSESSING THEIR CONDITION ARE 1	סק מקות	MED	CONTE	MITOIT	CTV	
EA.	STENCE AND ASSESSING THEIR CONDITTON ARE	PERFOR	THED	CONTI	NOOO	<u>201.</u>	
THI	COLLECTIONS, WHICH HAVE BEEN ACQUIRED THE	ROUGH	PURC	HASES	AND		
COI	TRIBUTIONS SINCE THE FOUNDATION'S INCEPTION	ON, AI	RE NO	T REC	OGNI	ZED AS	
ASS	SETS ON THE STATEMENTS OF FINANCIAL POSITION	ONI. PI	IRCHA	SES O	ም ሮር	<u>፣</u> .ፒ.ছሮሞፕርነ	NJ.
	O Diministra Of Limitorian LONGITI	<u> </u>	2101111	210 0		dule D (Form 9	

132054 01-23-12

PartXV Supplemental Information (continued)
ITEMS ARE RECORDED AS DECREASES IN UNRESTRICTED NET ASSETS IN THE YEAR IN
WHICH THE ITEMS ARE ACQUIRED. NET ASSETS THAT ARE TEMPORARILY RESTRICTED
FOR THE ACQUISITION OF ART OBJECTS ARE RELEASED FROM RESTRICTION WHEN USED
TO PURCHASE ITEMS FOR THE PERMANENT COLLECTION. PROCEEDS FROM DEACCESSIONS
OR INSURANCE RECOVERIES ARE RECORDED AS INCREASES IN UNRESTRICTED NET
ASSETS; HOWEVER, THE COLLECTIONS ARE SUBJECT TO A BOARD POLICY THAT
REQUIRES PROCEEDS FROM THEIR SALES TO BE USED TO ACQUIRE OTHER ITEMS FOR
THE COLLECTION.
PART XII, LINE 2D - OTHER ADJUSTMENTS:
OTH REVENUE ON BOOKS NOT INCL 990 -27,432.
PART XII, LINE 4B - OTHER ADJUSTMENTS:
PASSTHROUGH INVESTMENT INCOME NETTED WITH EXPENSES 11,836.
PART XIII, LINE 2D - OTHER ADJUSTMENTS:
OTH EXPS ON BOOKS NOT INCL 990 220,770.
PART XIII, LINE 4B - OTHER ADJUSTMENTS:
PASSTHROUGH INVESTMENT INCOME NETTED WITH EXPENSES 11,836.
PAGE 4, PART XI, LINE 8 BREAKOUT:
ACQUISITIONS OF WORKS OF ART -220,770
UNREALIZED GAINS IN ACCRODANCE WITH FAS 124 39,119
INTEREST DECREASE IN PERPETUAL TRUST -27,432
TOTAL -209,083

SCHEDULE (Form 990) Department of the Treasury

Internal Revenue Service

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

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

OMB No 1545-0047

Schedule I (Form 990) (2011) % × Employer identification number OUNDATION IS TO SUPPORT 23-7337495 (h) Purpose of grant THE MISSION OF THE or assistance Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any HIS ENTITY. recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000 Part II can be duplicated if additional space is needed ame and address of organization (book, if applicable cash grant assistance cash grant cash gra Does the organization maintain records to substantiate the amount of the grants or assistance, the grants or assistance, and the selection N/A Ε¥Ω . 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States P實門層 Grants and Other Assistance to Connect the United States 5,411,621 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ARKANSAS ARTS CENTER FOUNDATION LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table 115 71-0332820 Partil General Information on Grants and Assistance criteria used to award the grants or assistance? 1 (a) Name and address of organization LITTLE ROCK, AR 72203 ARKANSAS ARTS CENTER Name of the organization P.O. BOX 2137

Page 2 Schedule I (Form 990) (2011) (f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) (Form 990) (2011) ARKANSAS ARTS CENTER FOUNDATION Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Part IV. Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance Schedule | (Form 990) (2011) 132102 01-27-12 Partill

23-7337495

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" to Form 990,
Part IV, line 23.

➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

ARKANSAS ARTS CENTER FOUNDATION

Employer identification number 23-7337495

Pa	rt I Questions Regarding Compensation							
			Yes	No				
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,							
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.							
	First-class or charter travel Housing allowance or residence for personal use							
	Travel for companions Payments for business use of personal residence							
	Tax indemnification and gross-up payments Health or social club dues or initiation fees							
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)							
		ł						
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or							
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b						
2								
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?							
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's							
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to							
	establish compensation of the CEO/Executive Director. Explain in Part III.							
	Compensation committee Written employment contract							
	Independent compensation consultant Compensation survey or study							
	Form 990 of other organizations Approval by the board or compensation committee			İ				
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing							
	organization or a related organization:							
a	Receive a severance payment or change-of-control payment?	4a		X				
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X				
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X				
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.							
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.							
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation							
	contingent on the revenues of:							
а	The organization?	5a		X				
b	Any related organization?	5b_		X				
	If "Yes" to line 5a or 5b, describe in Part III.							
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation							
	contingent on the net earnings of:		_					
а	The organization?	6a		X				
b	Any related organization?	6b		X				
	If "Yes" to line 6a or 6b, describe in Part III.]				
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments	ŀ]					
	not described in lines 5 and 6? If "Yes," describe in Part III	7		X				
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the							
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	<u> </u>	X				
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in							
	D							

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2011

Schedule J (Form 990) 2011 ARKANSAS ARTS CENTER FOUNDATION 23-7337495

Pattil Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. ARKANSAS ARTS CENTER FOUNDATION

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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W	V-2 and/or 1099-MISC compensation	SC compensation	(0)	(Q)	(E)	(F)
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(f)-(D)	reported as deferred in prior Form 990
	€		0	0	0	0	0	0
1 TODD HERMAN	≘	160,00	0	- 1	0	0		0
	Ξ	}	• •	150,000.	0	0	150,00	
2 TOWNSEND WOLFE		0	0	0	0	0	0	0
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4	≘≘							
	ξ							
5	(E)							
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7	(ii)							
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6	(ii)							
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16	(11)							
							Schedul	Schedule J (Form 990) 2011

SCHEDULE L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions With Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. ➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions. OMB No 1545-0047

Open To Public. Inspection

Name of the organization

Employer identification number ARKANSAS ARTS CENTER FOUNDATION 23-7337495

(a) Name of dia					(L) D					(c) Con	ected
(a) Name of dis	squalitied pers	on			(b) Description	of transa	ection			Yes	No
		· · · · · · · · · · · · · · · · · · ·									_
											
									_		
										<u> </u>	
Enter the amount of tax imp section 4958		Ū	J	·		e year ur	der	> \$			
Enter the amount of tax, if a	ny, on line 2,	above, rein	ibursed b	y the organiza	luon			▶ ⊅			
art II Loans to and/o	r From Int	erested	Person	S.							
			on Form	990, Part IV,	ine 26, or Form 990-E	Z, Part \	/, line 38		-	т	
(a) Name of interested person and purpose		to or from	(c) Origi	nal principal mount	(d) Balance due) In ault?	by bo	oroved ard or uttee?	(g) W agree	
	То	From	ļ <u>.</u>			Yes	No	Yes	No	Yes	No
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								ļ <u>.</u>			
	-		1			<u> </u>		-			
	+		<u> </u>					1			
			1								
tal .	-			▶ \$			•				
art III Grants or Assis		_									
Complete if the orga		vered "Yes					-				
(a) Name of interested	person		(b) Helat	ionship betwe the or	en interested person ganization	and			ount an assistar	d type o	f
		-									
							+				_
-							1				
	, <u>.</u>										

Part IV | Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c. (e) Sharing of (d) Description of (a) Name of interested person (b) Relationship between interested (c) Amount of organization's person and the organization transaction transaction revenues? Yes No WARREN STEPHENS CHAIRMAN OF AACF AN 138,486.AACF PAID X Part V Supplemental Information Complete this part to provide additional information for responses to questions on Schedule L (see instructions). SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS: (A) NAME OF PERSON: WARREN STEPHENS (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: CHAIRMAN OF AACF AND OWNERSHIP INTEREST IN STEPHENS INC. (D) DESCRIPTION OF TRANSACTION: AACF PAID STEPHENS INC FOR INVESTMENT MANAGEMENT FEES.

Schedule L (Form 990 or 990-EZ) 2011 ARKANSAS ARTS CENTER FOUNDATION

23-733749<u>5</u> Page 2

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

Noncash Contributions

➤ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

➤ Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

Name of the organization

ARKANSAS ARTS CENTER FOUNDATION

Employer identification number 23-7337495

Pa	rt i Types of Property							
		(a)	(b)	(c)	(d))		
		Check if	Number of	Noncash contribution	Method of d			
		applicable	contributions or	amounts reported on Form 990, Part VIII, line 1g	noncash contrib	ution a	mount	is
1	Art - Works of art	X	31	0.	_			
2	Art - Historical treasures						-	
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles					-		
7	Boats and planes					_		
8	Intellectual property				_			
9	Securities - Publicly traded							
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Secunties - Miscellaneous					-		
13	Qualified 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							
23	Scientific specimens							
24	Archeological artifacts							
25	Other PLEDGES	Х	5	900,000.	FMV			
26	Other ()							
27	Other ()							
28	Other ()			· · · · · · · · · · · · · · · · · · ·	<u> </u>			
29	Number of Forms 8283 received by the organic		•					
	for which the organization completed Form 82	83, Part IV, I	Donee Acknowled	gement 29				
200	Dismon the sees and the executation sees to						Yes	No
Sua	During the year, did the organization receive by							
	at least three years from the date of the initial of the entire holding period?	contribution,	, and which is not	required to be used for exer	npt purposes for			X
h	If "Yes," describe the arrangement in Part II.	•		-		30a		
31	Does the organization have a gift acceptance i	nolicy that re	actures the review	of any non-standard contrib	utions?		x	
	Does the organization hire or use third parties			-		31		
	contributions?	or related Of	garizations to SOII	cit, process, or sell noncash		220		X
ь	If "Yes," describe in Part II.					32a		
33	If the organization did not report an amount in	column (c) f	or a type of proper	rty for which column (a) is ch	necked			
	describe in Part II.	- 5.G (O) 1	o. a typo or proper	ity for winor column (a) is the	iconeu,			

Schedule M (Form 990) (2011) ARKANSAS ARTS CENTER FOUNDATION	23-7337495	Page 2
Supplemental Information. Complete this part to provide the information required by Part the organization is reporting in Part I, column (b), the number of contributions, the number of items Also complete this part for any additional information.	I, lines 30b, 32b, and 33, and serviced, or a combination of	d whether
SCHEDULE M, PART I, COLUMN (B): SEE ATTACHMENT		
		,
		
	· ·	
	·	

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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2011
Copenito Public

Name of the organization

ARKANSAS ARTS CENTER FOUNDATION

Employer identification number 23-7337495

Interest of the contract of th
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
AND ADMINISTER AN ENDOWMENT FUND FOR THE BENEFIT OF THE CENTER AND TO
HOLD LEGAL TITLE TO THE COLLECTION OF ART OBJECTS.
FORM 990, PART V, LINE 3B: THE UNRELATED BUSINESS OPERATIONS RESULTED IN A
LOSS FOR THE YEAR ENDED JUNE 30, 2012. THEREFORE, INCOME WAS NOT GREATER
THAN \$1,000; HOWEVER, THE FORM 990-T WILL BE FILED.
FORM 990, PART VI, SECTION A, LINE 2: ROBERT TUCKER, DIRECTOR, WORKS AT
STEPHENS INC FOR WARREN STEPHENS, THE CHAIRMAN OF THE BOARD.
FORM 990, PART VI, SECTION A, LINE 2: BELINDA SHULTS, DIRECTOR AND SERVES
ON THE AAC BOARD.
FORM 990, PART VI, SECTION A, LINE 2: CHARLOTTE BRADBURY, DIRECTOR AND
SERVES ON THE AAC BOARD.
FORM 990, PART VI, SECTION B, LINE 11: A COPY OF THE FORM 990 WILL BE
REVIEWED BY THE INVESTMENT COMMITTEE AND DISCUSSED AMONGST THE ENTIRE
BOARD.
FORM 990, PART VI, SECTION B, LINE 12C: REGULAR BOARD MEETINGS AND
DISCLOSURE WITHIN MEETINGS.
FORM 990, PART VI, SECTION C, LINE 19: UPON REQUEST, THE INFORMATION WILL

BE MADE AVAILABLE.

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization ARKANSAS ARTS CENTER FOUNDATION	Employer identification number 23-7337495
FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:	
ACQUISITIONS OF WORKS OF ART	-220,770.
UNREALIZED GAINS IN ACCORDANCE WITH FAS 124	39,119.
INTEREST DECREASE IN PERPETUAL TRUST	-27,432.
TOTAL TO FORM 990, PART XI, LINE 5	-209,083.
PART XI, LINE 2C	
RESPONSIBILITY OF BOARD FOR AUDIT AND SELECTION OF ACCOUNT	TANT.
AT THE RECOMMENDATION OF THE INVESTMENT COMMITTEE THE AUD	DITORS ARE
CHOSEN. THE INVESTMENT COMMITTEE WITH FURTHER ACCEPTANCE	BY THE ENTIRE
BOARD, REVIEWS AND DISCUSSES THE ANNUAL AUDIT.	

Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Name of the organization

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.

Open to Public

OMB No 1545-0047

Employer identification number 23-7337495

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) ARKANSAS ARTS CENTER FOUNDATION Part

Direct controlling entity End-of-year assets e Total income € Legal domicile (state or foreign country) Primary activity Name, address, and EIN of disregarded entity

Part II dentification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a)	(q)	(0)	(D)	(e)	()	(g)	
Name, address, and EIN	Primary activity	Legal domicile (state or	ode	Public charity	Direct controlling	Section 512(b)(13) controlled	2(b)(13) lled
of related organization		foreign country)		status (if section	entity	entity?	0
				501(c)(3))		Yes	%
ARKANSAS ARTS CENTER - 71-0332820							
P.O. BOX 2137				GOVERMENT			
LITTLE ROCK, AR 72203	MUSEUM	ARKANSAS	115	ENTITY			×
	T						
	-						
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	ns for Form 990.				Schedule R (Form 990) 2011	Form 990	2011

132161 01-23-12 LHA

23-7337495

Schedule R (Form 990) 2011 ARKANSAS ARTS CENTER FOUNDATION

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

3	General or Percentage managing ownership partner?	N/A	N/A	
5	General or F managing partner?	Ą	4	
Ľ	Gene mans part	N/A	N/A	
8	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	N/A	N/A	
3	ations.	ď	4:	
	Disprop ate alloc	N/A	N/A	
(6)	Share of end-of-year assets	N/A		
()	Share of total income	N/A	N/A	
(e)	Predominant income (related, unrelated, excluded from tax under sections 512-514)	N/A	N/A	
(p)	Direct controlling entity	N/A	N/A	
(0)	Legal domicile (state or foreign country)	AR	XT	
(q)	Primary activity	INVESTMENTS	OIL & GAS	
(a)	Name, address, and EiN of related organization	STEPHENS AGS DEBT LLC - 20-3482783, P.O. BOX 3507, LITTLE ROCK, AR 72203	ENERGY TRANSFER EQUITY, LP - 30-0108820, 3738 OAK LAWN, DALLAS, TX 75219	

(a)	(q)	(0)	(p)	(e)	(J)	(6)	ε
Name, address, and EIN of related organization	Primary activity	흗	Direct controlling Type of entity (C corp. S corp. or trust)	Type of entity (C corp, S corp, or trust)	Share of total	Share of Pend-of-year assets	Percentage ownership

Schedule R (Form 990) 2011

Page 3

Yes

4 ဗ ₽

Part 👺 Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

- During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
- a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity
 - **b** Gift, grant, or capital contribution to related organization(s)
- Gift, grant, or capital contribution from related organization(s)
- d Loans or loan guarantees to or for related organization(s)
- Loans or loan guarantees by related organization(s)
- Sale of assets to related organization(s)
- Purchase of assets from related organization(s)
 - Exchange of assets with related organization(s)
- Lease of facilities, equipment, or other assets to related organization(s)
- Lease of facilities, equipment, or other assets from related organization(s)
- Performance of services or membership or fundraising solicitations for related organization(s)
- Performance of services or membership or fundraising solicitations by related organization(s)
 - m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

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<u>0</u>

- Sharing of paid employees with related organization(s)
- Reimbursement paid to related organization(s) for expenses 0
- p Reimbursement paid by related organization(s) for expenses
- q Other transfer of cash or property to related organization(s)
- r Other transfer of cash or property from related organization(s)

z if the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	vno must complete tr	ils line, including covered r	elationships and transaction thresholds.
(a) Name of other organization	(b) Transaction type (a-t)	(c) Amount involved	(d) Method of determining amount involved
ARKANSAS ARTS CENTER FOUNDATION GRANTS (1) FUNDS TO THE ARTS	В	5,411,621.COST	COST
(2) CENTER		0.	
(3) HAVE ANY EMPLOYEES	1	0	
ALL THE SERVICES PERFORMED FOR THE (4) FOUNDATION ARE PERFORMED		0.	
(5) BY THE ARTS CENTER EMPLOYEES		0	
ARKANSAS ARTS CENTER FOUNDATION DOES NOT (6) HAVE ANY EMPLOYEES	М	0.	

23-7337495

ARKANSAS ARTS CENTER FOUNDATION

Schedule R (Form 990)

Part. Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
OR A FACILITY. IT UTILIZES THE (7)FACILITIES OF THE ARTS CENTER		0.	
T ITS OPERATIONS		0.	
ARKANSAS ARTS CENTER FOUNDATION DOES NOT (9)HAVE ANY EMPLOYEES	N	0.	
ALL THE SERVICES PERFORMED FOR THE (10) FOUNDATION ARE PERFORMED		0.	
(11)BY THE ARTS CENTER EMPLOYEES		0.	
>1		0.	
TRANSFER EQUITY, LP. AND RECEIVED (13)DISTRIBUTIONS	æ	8,397.	COST
ARKANSAS ARTS CENTER FOUNDATION HAS (14) INVESTMENTS IN STEPHENS AGS DEBT, LLC		0.	
(15)AND MADE CONTRIBUTIONS TO THAT ENTITY	Ø	55,802.	COST
(16)			
(17)			
(18)			
(19)			
(20)			
(21)			
(22)			
(23)			
(24)			

Page 4

Schedule R (Form 990) 2011 ARKANSAS ARTS CENTER FOUNDATION

িত্তীয়ায়ী Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to 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.

(k) rrcentage wnership								Schedule R (Form 990) 2011
al or N								E E
(j) General or managing partner? Yes No								R (F
Code V-UBI General or Percentage amount in box 20 managing of Schedule K-1 partner? (Form 1065)								Schedule
(h) Disproportonate allocations?								
2 % 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6								
(g) Share of end-of-year assets					!			
		-					-	
(f) Share of total income								
(e) Are all partners sec 501(c)(3) 0195? 4) Yes No								
e part 50 50 4) Ye								
(d) Predominant income (related, unrelated, excluded from tax under section 512-514)								
ile rign	_			-				
(c) Legal domicile (state or foreign country)								
						1		
(b) Primary activity				ļ				
(b)								
Prim								
	 	 	<u> </u>		, , ,			
Q EIN								
(a) Name, address, and EIN of entry								
(a) ddres of ent			$ \ \ \ $					
me, a								
Nai								
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Schedule R	(Form 990) 2011	ARKANSAS	ARTS	CENTER	FOUNDAT	ION	23-133/495	Page 5
Part VIII	(Form 990) 2011 Supplemental Info	rmation						
	Complete this part to pre	ovide additional info	rmation for	responses to	questions on S	Schedule R (see instr	ructions)	
•								
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Schedule R (Form 990) 2011

132165 01-23-12

THE ARKANSAS ARTS CENTER FOUNDATION SCHEDULE OF INVESTMENTS JUNE 30, 2012

	PAR VALUE		
	OR NUMBER		MARKET
	OF SHARES	COST	VALUE
MUTUAL FUNDS			
ISHARES IBOXX INV CPBD	6,490	700,403.28	763,159.10
ISHARES MSCI EAFE INDEX FUND	5,940	318,730 20	296,762 40
ISHARES RUSSELL MIDCAP INDX FUND	12,250	1,138,250 40	1,290,660 00
ISHARES RUSSELL 1000 VALUE	22,200	1,446,272.76	1,514,484.00
ISHARES RUSSELL 1000 GROWTH	22,080	1,111,343 96	1,396,118.40
ISHARES RUSSELL 2000 INDX FD	7,330	486,667.29	583,174.80
ISHARES S&P US PREFERRED	10,000	395,897.25	390,300 00
WILLIAM BLAIR SM CAP GWTH CL I	8,376	180,000.00	191,475 11
DODGE AND COX INTL STOCK FD	5,301	176,375.41	160,146.05
AMERICAN GROWTH FD CLASS F	25,321	759,043 13	794,073 87
MAINGATE MLP FUND CL I	21,266	206,549 85	212,236.57
VANGUARD FIXED INCOME SECS INT	28,488	314,590 27	335,015 45
ISHARES MSCI EAFE INDEX FUND	1,260	66,490 20	62,949 60
ISHARES RUSSELL MIDCAP INDX FUND	2,590	195,660 30	272,882 40
ISHARES RUSSELL 1000 VALUE	3,660	199,526 22	249,685 20
ISHARES RUSSELL 1000 GROWTH	3,330	149,749.43	210,555.90
ISHARES RUSSELL 2000 INDX FD	310	18,054.40	24,663.60
TOTAL MUTUAL FUNDS		7,863,604	8,748,342
U.S. GOVERNMENT OBLIGATIONS			
ISHARES BARCLAYS 1-3 YR TREAS BD FD	5,730	469,159.05	483,440 10
FEDERAL HOME LOAN BANK	75,000	77,004 00	76,999 50
UNITED STATES TREASURY NOTE	55,000	56,267.58	56,819 95
UNITED STATES TREASURY NOTE	85,000	87,432 42	86,507 05
UNITED STATES TREASURY NOTE	92,000	88,348 52	97,459.28
FEDERAL NATIONAL MITGE ASSN	80,000	75,763 75	85,358 40
FEDERAL NATIONAL MTGE ASSN	85,000	84,983 00	93,149.80
FEDERAL NATIONAL MTGE ASSN	115,000	117,042 58	122,771 70
UNITED STATES TREASURY NOTE	70,000	67,036 72	73,850 00
UNITED STATES TREASURY NOTE	50,000	49,796.88	51,590 00
UNITED STATES TREASURY NOTE	55,000	54,613.28	55,756.25
UNITED STATES TREASURY NOTE	65,000	66,193 36	66,370 85
UNITED STATES TREASURY NOTE	100,000	101,843 75	105,109.00
ISHARES BARCLAYS 1-3 YR TREAS BD	1,190	99,864 80	100,400.30
ISHARES BARCLAYS INT CREDIT BOND	2,300	239,770 40	251,436 00
ISHARES S&P US PREFERRED	2,500	100,075 00	97,575.00
FEDERAL HOME LOAN MORTGAGE CORP	50,000	48,734 38	52,205 50
UNITED STATES TREASURY NOTE	170,000	174,834 38	173,014.10
FEDERAL HOME LOAN MORTGAGE CORP	25,000	25,365 08	25,832.75
FEDERAL HOME LOAN MORTGAGE CORP	88,000	85,607.29	93,581.84
FEDERAL NATIONAL MTGE ASSN	100,000	96,439.50	106,698 00
UNITED STATES TREASURY NOTE	100,000	103,015 63	102,813 00
FEDERAL NATIONAL MORTGAGE ASSN	75,000	71,418 00	82,191 00
FEDERAL HOME LN MTGE CORP	110,000	110,891 00	122,678 60
UNITED STATES TREASURY NOTE	100,000	100,796 88	101,570 00
UNITED STATES TREASURY NOTE	105,000	106,017 19	108,339 00
UNITED STATES TREASURY NOTE	125,000	124,121 09	126,718.75
UNITED STATES TREASURY NOTE	110,000	112,028 13	115,619 90
ISHARES BARCLAYS 1-3 YR TREAS BD	290	24,099.00	24,467.30
ISHARES BARCLAYS 1-3 YR CREDIT	230	23,945.30	24,083 30
ISHARES BARCLAYS 7-10 YR TREAS BD	2,200	200,068 00	237,446.00
ISHARES BARCLAYS 1-3 YR TREAS BD	4,770	399,964 50	402,444.90
ISHARES BARCLAYS 1-3 YR CREDIT	4,280	433,555 79	448,158 80
ISHARES BARCLAYS 1-3 YR TREAS BD	2,180	182,418.96	183,926 60

ISHARES S&P US PREFERRED	500	20,010.00 4,278,525	19,515 00 4,455,898
SPECIAL INVESTMENT Stephens AGS Debt LLC			
	TOTAL	16,092,020	17,575,733 17,575,733 -
			17,280,733 295,000
			(Continued)

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THE ARKANSAS ARTS CENTER FOUNDATION SCHEDULE OF INVESTMENTS JUNE 30, 2012

	PAR VALUE OR NUMBER OF SHARES	COST	MARKET VALUE
EQUITIES			
ARRON RENTS	370	9,665.44	10,474.70
ACACIA RESEARCH ACACIA TECH	225	8,135 50	8,379 00
ACTIVISION BLIZZARD INC	475	3,305.67	5,695.25
ADVISORY BOARD CO	430	9,059.01	21,323 70
AFFILIATED MANAGERS GROUP INC	105	6,242 16	11,492 25
AIRGAS INC	145	9,773 30	12,181.45
AKAMAI TECHNOLOGIES	185	6,136 89	5,873 75
ALLIANCE DATS SYSTEMS CORP	135	6,557 47	18,225 00
ANSYS INC	140	3,477.18	8,835.40
ARM HOLDINGS PLC	365	2,270 92	8,683.35
ASPEN TECHNOLOGY INC	350	7,945 60	8,102.50
BJ'S RESTAURANTS INC	280	6,521.20	10,640 00
CARMAX GROUP INC	325	7,071 85	8,430 50
CERNER CORP	205	4,571 50	16,945.30
CONCUR TECHNOLOGIES	140	4,206.20	9,534.00
COSTAR GROUP INC	185	8,880 57	15,022.00
COVANCE INC	115	5,496 15	5,502 75
DISCOVERY COMMUNICATIONS INC	235	8,932 33	11,771.15
DRIL-QUIP	105	7,910 56	6,886 95
EAST WEST BANCORP INC	350	5,396 74	8,211.00
FMC TECHNOLOGIES INC	230	3,657 30	9,022.90
FACTSET RESEARCH SYSTEMS INC	75	3,335 25	6,970.50
FAMILY DOLLAR STORE	105	5,624.85	6,980 40
F5 NETWORKS INC	80	8,898 11	7,964 80
FIRST CASH FINL SERVICES	245	5,731 92	9,841.65
GLOBAL PAYMENTS INC	210	9,079 69	9,078.30
HMS HOLDING CORP	455	5,116 73	15,156 05
HITTITE MICROWAVE CORP	125	6,096 41	6,390 00
ICON PLC ADR	345	10,450 20	7,772 85
IDEXX LABS	170	7,100 30	16,342 10
IHS INC CLASS A	125	6,114 33	13,466 25
ILLUMINA INC	215	7,176 39	8,683.85
IMAX CORP	400	9,143.66	9,612.00
INTERCONTINENTAL EXCHANGE	60	7,151 20	8,158 80
INTUITIVE SURGICAL INC	30	4,556 40	16,613 70
IRON MOUNTAIN INC	295	8,285 98	9,723 20
KNIGHTS TRANSPORTATION INC	365	7,320 76	5,836.35
LKQ CORP	370	7,053.37	12,345.05
LIFE TECHNOLOGIES CORP	165	6,726 28	7,423.35
LIONS GATE ENTERTAINMENT	585	7,757 10	8,622 90
MSC INDUSTRIAL DIRECT CO	145	6,911.69	9,504.75
MICROS SYSTEMS INC	180	3,689.26	9,216 00
MICROCHIP TECHNOLOGY	305	10,232.57	10,089.40
NATIONAL CINEMEDIA	805	10,767.98	12,211 85
NATIONAL INSTRUMENTS CORP	322	5,334 47	8,648.92
NEOGEN CORP	250	3,626 13	11,550.00
NUANCE COMMUNICATIONS INC	345	4,300.45	8,217 90
NUVASIVE INC	340	10,447 88	8,622.40
OSI SYSTEMS INC	215	12,223 30	13,618 10

OCEANEERING NTL INC	260	7,536 28	12,443 60
PORTFOLIO RECOVERY ASSOC	195	7,607.99	17,795 70
PRECISION CASTPARTS	50	5,882.65	8,224 50
RANGE RESOURCES CORP	140	3,952 50	8,661 80
RED HAT INC	245	6,989.20	13,837.60
RESMED INC	300	6,142 20	9,360 00
ROSS STORES	150	5,461 50	18,741 00
SXC HEALTH SOLUTIONS CORP	150	5,206 66	14,881 50
SALESFORCE COM	85	5,313 63	11,752.10
SHUTTERFLY INC	290	12,503 83	8,900 10
SOUTHWESTERN ENERGY COMPANY	220	3,567.63	7,024.60
STERICYCLE INC	145	4,577 51	13,292.15
TRACTOR SUPPLY	115	8,986 26	9,551 90
TREEHOUSE FOOD INC	150	7,648.85	9,343.50
UNITED NATURAL FOODS	270	8,049 15	14,812.20
VCA ANTECH INC	275	7,458 00	6,044.50
VERISIGN INC	230	7,303 69	10,021.10
VOCUS INC	390	8,829 33	7,254.00
WHITING PETROLEUM CORP LL	135	6,787 80	5,551.20
WHOLE FOODS MARKETING	160	4,481.90	15,251 20
CHECK POINT SOFTWARE TECHNOLOGY	155	8,342.09	7,686 45
ASML HOLDING NV	266	5,545 11	13,677 72
CORE LABORATORIES INC	125	3,446 76	14,487 50
QIAGEN NV	325	4,551.53	5,427 50
VANGUARD SHORTTERM CORP ETF	1,500	117,195 00	118,725 00
VANGUARD INTERMEDIATE TERM	1,250	103,375.00	106,512.50
VANGUARD SHORTTERM CORP ETF	6,450	503,938 50	510,517.50
VANGUARD INTERMEDIATE TERM	6,600	546,324 80	562,386 00
AT&T INC	1,000	33,359.90	35,660 00
ABBOTT LABORATORIES INC	500	31,154 95	32,235.00
AMERICAN ELECTRIC POWER	1,000	38,328 50	39,900.00
BRISTOL-MYERS SQUIBB COMPANY	900	29,564 91	32,355.00
DUKE ENERGY CORP	2,000	39,979.80	46,120 00
ENERGY TRANSFER EQUITY LP	3,910	82,110 00	160,388.20
ENTERGY CORP	1,000	65,928.00	67,890 00
EXELON CORP	1,000	42,140.00	37,620 00
JP MORGAN CHASE & CO	3,000	108,147 30	107,190 00
JOHNSON AND JOHNSON	500	31,845 00	33,780 00
ELI LILLY & COMPANY	750	30,457 43	32,182 50
MERCK CO INC	800	30,486 80	33,400.00
NEXTERA ENERGY INC	1,000	54,767 50	68,810 00
PFIZER INCORPORATED	1,350	30,509 87	31,050 00
SOUTHERN COMPANY	1,000	42,678 00	46,300.00
WINDSTREAM CORP	14,755	148,461.06	142,533 30
TOTAL MUTUAL FUNDS	•	2,602,391	3,009,473
CORPORATE BOND			
FORD MOTOR CREDIT CO	1,000,000	1,052,500.00	1,067,020 00
TOTAL CORPORATE BOND		1,052,500	1,067,020
CERTIFICATE OF DEPOSITS			
CD CDAR 5%	295,000	295,000.00	295,000.00
TOTAL CERTIFICATE OF DEPOSITS		295,000	295,000
•			

Paul Thomas, *Joyce Joins Telemachus at the Feast*, 2005, graphite, pencil on paper, gift of Jackye and Curtis Finch, Jr. in honor of Thom Hall

LOANS

(artist, title, date, medium, lender)

Thomas Hart Benton, Clay County Farm, 1971, oil on canvas, Anonymous Loan

Thomas Hart Benton, Carrying Cotton, n.d., pencil on paper, Anonymous Loan

Thomas Hart Benton, M A Jagendorf & Joe Stella, n.d., pencil on paper, Anonymous Loan

Thomas Hart Benton, Sorghum Mill, 1969, Iithograph, Anonymous Loan

Albrecht Durer, Title page of "The Great Passion", 1510, wood engraving, Anonymous Loan

Barbara Hepworth, *Genesis II*, 1966, oil, pencil on board, Anonymous Loan

Barbara Hepworth, Two Heads, 1966, white marble, Anonymous Loan

Rodger Mack, Four Circles, n.d., bronze, Anonymous Loan

Rodger Mack, Tall Bronze, n.d , bronze, Anonymous Loan

Henri Matisse, Maternity, n.d., lithograph, Anonymous Loan

Joan Miró, La Pluie Matinale au Clair de Lune (Morning Rain in Moonlight), 1958, color aquatint with pochoir hand coloring, Anonymous Loan

Georgia O'Keeffe, Shell Pink – 3, n.d., pastel on board, Anonymous Loan

Pablo Picasso, Mother Holding a Child, 1904, reproduction, Anonymous Loan

Pablo Picasso, *Nude & Tambourine Player*, 1934, etching, Anonymous Loan

Georges Rouault, Untitled from "Passion", n.d., color aquatint, Anonymous Loan

Jacques Villon, Landscape from "Dents de Lait, Dents de loup," n d , drypoint, Anonymous Loan

Toots Zynsky, *Roboante*, 2009, fused and thermo-formed glass threads, Collectors Group Fund

GIFTS

(artist, title, date, medium, donor)

- Sigmund Abeles, Study for Alfred Brendel in Rehearsal in Jerusalem, 1989, etching on blue paper, gift of Jackye and Curtis Finch, Jr
- Bill Amundson, Nervous Patriot with Logo Tie, 2004, pencil on paper, gift of Jackye and Curtis Finch, Jr. in honor of Thom Hall
- Anonymous, Academy Study, late 18th Century, sanguine crayon on paper, gift of Edward J. Olszewski, Cleveland, Ohio, to commemorate the appointment of Todd Herman as Executive Director of the Arkansas Arts Center
- Robert Arneson, *Me and Jackson*, 1984, 12 color lithograph, gift of Jackye and Curtis Finch, Jr. in honor of Thom Hall
- Steven Assael, *Untitled*, 1992-1995, graphite, pen and wash on paper, gift of Jackye and Curtis Finch, Jr. in honor of Thom Hall
- Luis Cruz Azaceta, King for a Day #6, 1980, ink, black chalk on paper, gift of Jackye and Curtis Finch, Jr. in honor of Thom Hall
- Will Barnet, Self Portrait, 1989, pencil on paper, gift of Jackye and Curtis Finch, Jr. in honor of Thom Hall
- Arnold Bittleman, Self Portrait III, 1981, pencil, charcoal on paper, gift of Jackye and Curtis Finch, Jr. in honor of Thom Hall
- Stephen Brown, My Father, 2000, graphite heightened with white gouache on paper, gift of Jackye and Curtis Finch, Jr. in honor of Thom Hall
- Tarrence Corbin, *Untitled (Crate Series)*, circa 1980s, acrylic, collage on paper, gift of Blanche and Beadle Moore
- Gaela Erwin, Self Portrait "Ze-bra," circa 2006-2007, pastel on paper, gift of Jackye and Curtis Finch, Jr. in honor of Thom Hall
- Hugo Gellert, *Portrait of Edward Corsi*, before 1965, black chalk, pencil on paper, gift of Jackye and Curtis Finch, Jr. in honor of Thom Hall
- John Himmelfarb, Meeting Cut Short, 1990-1994, brush and ink on paper, gift of Jackye and Curtis Finch, Jr. in honor of Thom Hall

- Stefan Hirsch, Self Portrait, circa 1927, pencil on paper, gift of Jackye and Curtis Finch, Jr. in memory of Missy Wright Anderson
- Kurt Kemp, Half of Me Is Ocean, 2001, collage, watercolor, pen and ink over etching, gift of Jackye and Curtis Finch, Jr. in honor of Thom Hall
- Jules Kirschenbaum, Self Portrait in Army Jacket, 1954, pencil on paper, gift of Jackye and Curtis Finch, Jr. in honor of Thom Hall
- Marianne Kolb, Walt Whitman #16, 2004, mixed media on paper, gift of Jackye and Curtis Finch, Jr. in honor of Thom Hall
- Nancy Lawton, Self Portrait (Large Night Sky, Looking Up), 1990, graphite on paper, gift of Jackye and Curtis Finch, Jr. in honor of Thom Hall
- Jack Levine, Self Portrait, circa 1944, ink on paper, gift of Jackye and Curtis Finch, Jr. in honor of Thom Hall
- David Lippenberger, Commission Wrapped in White, 2004, mixed media on paper, gift of Jackye and Curtis Finch, Jr. in honor of Thom Hall
- Jan Matułka, Young Woman, possibly Mrs. Matulka, circa 1925, litho crayon on paper, gift of Jackye and Curtis Finch, Jr. in honor of Thom Hall
- Jennifer McCurdy, Butterfly Vessel, 2010, wheel-thrown, altered, carved porcelain, gift of Ethel and Arthur Furman, Alexandria, Virginia
- Jerome Myers, Self Portrait, Twice, 1920, crayon on paper, gift of Jackye and Curtis Finch, Jr in memory of Missy Wright Anderson
- Glenn Priestley, Markham Road, 1993, oil on paper, gift of Jackye and Curtis Finch, Jr. in honor of Thom Hall
- Patrick Rodriguez, *Tribe*, 1994, mixed media on paper, gift of Jackye and Curtis Finch, Jr. in honor of Thom Hall
- Arnold Ronnebeck, *Portrait of a Man*, 1924, graphite on paper, gift of Jackye and Curtis Finch, Jr. in memory of Missy Wright Anderson
- Peri Schwartz, Self Portrait, 2003, charcoal on paper, gift of Jackye and Curtis Finch, Jr. in honor of Thom Hall
- John Sloan, Nude, n.d., black ink on paper, gift of Jackye and Curtis Finch, Jr. in memory of Missy Wright Anderson
- Aj Smith, *Body Gear*, 1995, Inthograph, gift of Jackye and Curtis Finch, Jr. in honor of Thom Hall

Form **8868**

(Rev. January 2012)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

1110-110-11	Tino a sop	агате арр	BCBLIOII TOI GBCIII GEBITI.						
	If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box								
	are filing for an Additional (Not Automatic) 3-Month Ex								
	complete Part II unless you have already been granted								
	nic filing (e-file). You can electronically file Form 8868 if								
	d to file Form 990-T), or an additional (not automatic) 3-mo								
	to file any of the forms listed in Part I or Part II with the ex								
	al Benefit Contracts, which must be sent to the IRS in par		(see instructions). For more details of	on the ele	ectronic filing of this	form,			
	w.irs.gov/efile and click on e-file for Charities & Nonprofits								
Part			· · · · · · · · · · · · · · · · · · ·		_				
	pration required to file Form 990-T and requesting an autor	natic 6-m	onth extension - check this box and	complete		_			
Part I o	• • • • • • • • • • • • • • • • • • • •					. [_]			
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.									
Type o	Type or Name of exempt organization or other filer, see instructions. Employer identifications.					oer (EIN) or			
·	ARKANSAS ARTS CENTER FOUND	ATION		\mathbf{x}	23-7337495				
File by the due date f	le by the			Social security number (SSN)					
filing your	ng your P.O. BOX 2137					,			
return. Sa Instruction		reign add	Iress, see instructions.						
	LITTLE ROCK, AR 72203	Ū	·						
Enter the Return code for the return that this application is for (file a separate application for each return)									
Applica	tion	Return	Application			Return			
Is For						Code			
Form 99	90	01				07			
Form 99						08			
Form 99		01				09			
Form 99						10			
	00-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11			
	00-T (trust other than above)	06	Form 8870			12			
LAINE HARBER, ARKANSAS ARTS CENTER FOUNDATION									
• The I	pooks are in the care of P.O. BOX 2137								
	phone No.		FAX No. ▶						
If the organization does not have an office or place of business in the United States, check this box									
If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this									
box . If it is for part of the group, check this box and attach a list with the names and ElNs of all members the extension is for.									
1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until									
FEBRUARY 15, 2013, to file the exempt organization return for the organization named above. The extension									
is for the organization's return for:									
▶									
► X tax year beginning JUL 1, 2011 , and ending JUN 30, 2012 .									
•					~~				
2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return									
[Change in accounting period								
_									
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any									
nonrefundable credits. See instructions.					0.				
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and									
estimated tax payments made Include any prior year overpayment allowed as a credit.				3ь	\$	0.			
The state of the s									
	using EFTPS (Electronic Federal Tax Payment System). S			3c	. \$	0.			
Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.									
vauliuli	in 100 are going to make an electronic folia will drawar w	110 1 4		50, 5	101 pay 1110111 11100				