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SCANNED UN 03 2014

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

Open to Public Inspection

OMB No 1545-0047

<u>A</u> [or the	2012 calendar year, or tax year beginning OCT 1, 2012 and	ending	<u>SEP 30, 2013</u>	
В	Check if	C Name of organization		D Employer identific	cation number
â	pplicable	NATIONAL ASSEMBLY OF STATE ARTS			
	Addres	s			
	□Name			d 62−0	913689
\vdash	lchange lnitial	<u> </u>	Da a /at		· · · · · · · · · · · · · · · · · · ·
⊨	lreturn Termin	Number and street (or P.O. box if mail is not delivered to street address)	Room/suit	1 = '	
<u></u>	ated		200	(202)347-6352
L	Ameno	City, town, or post office, state, and ZIP code		G Gross receipts \$	2,484,034.
	Application	WASHINGTON, DC 20005		H(a) Is this a group re	eturn
	pendin	F Name and address of principal officer JONATHAN KATZ		for affiliates?	Yes X No
		SAME AS C ABOVE		H(b) Are all affiliates inc	
	Fav.eve	empt status X 501(c)(3)	or 52	-	list (see instructions)
		e: ► WWW.NASAA-ARTS.ORG	01 [] 32	⊣	
			T. v	H(c) Group exemptio	
		organization: X Corporation	I L Yea	r of formation: 19/4 N	M State of legal domicile: MO
Pa		Summary			
ø	1 1	Briefly describe the organization's mission or most significant activities $ { t SEE} $	PART	III, LINE 1.	
& Governance					
L S	2	Check this box if the organization discontinued its operations or dispose	sed of mo	re than 25% of its net as	ssets
Š	3	Number of voting members of the governing body (Part VI, line 1a)		3	22
ၓ	1	Number of independent voting members of the governing body (Part VI, line 1b)		4	22
∞5					16
ĕ	1	Total number of individuals employed in calendar year 2012 (Part V, line 2a)		_5	
Ξ	1	Total number of volunteers (estimate if necessary)		6	108
Activities	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
_	b	Net unrelated business taxable income from Form 990-T, line 34		7b	0.
	1			Prior Year	Current Year
a	8	Contributions and grants (Part VIII, line 1h)		719,036.	923,895.
ž		Program service revenue (Part VIII, line 2g)		1,409,389.	1,552,305.
Revenue		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		10,960.	7,834.
æ					
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		18,318.	0.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,157,703.	2,484,034.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	<u> </u>	0.	0.
ģ	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1	1,316,856.	1,388,869.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
e E	h	Total fundraising expenses (Part IX, column (D), line 25) 61, 2	07.		
ŭ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	~ ·	821,849.	1,007,423.
	17	Total expenses (Fart IA, Column (A), lines Tra-Tro	-	2,138,705.	
	18	Total expenses Add lines 13-17 (must equal part IXT of error (at line 25)	;		2,396,292.
	19	To		18,998.	87,742.
SOC		Total assets (Part X, line 16)	` <u> E</u>	leginning of Current Year	End of Year
Set	20	Total assets (Part X, line 16)		1,294,259.	1,432,133.
Net Assets or Fund Balances	21	Total liabilities (Part X, line 26)		610,859.	645,175.
Set	22	Net assets or fund balances Subtract line 21 from line 20		683,400.	786,958.
P	art II	Signature Block	L		, , , , , , , , , , , , , , , , , , , ,
		Ities of perjury, I declare that I have examined this return, including accompanying schedule	ne and etate	ments, and to the best of m	ov knowledge and belief it is
					ly knowledge and belief, it is
true	, correc	t, and complete Declaration of preparer (other than officer) is based on all information of w	nich prepar	er nas any knowledge.	
		June 1			
Sig	n	Sugnature of officer		Date	
He	re	JONATHAN KATZ, CEO			
		Type or print name and title			
	•	Print/Type preparer's name , Preparer's signature	7	Date/ Check	P01330558
Pai	d	Andreas Akxandrou		4/13/14-11	
				Self employ	
	parer	Firm's name GELMAN, ROSENBERG & FREEDMAN		/ Firm's EIN	52-1392008
use	Only	Firm's address 4550 MONTGOMERY AVE SUITE 650N		1	***
		BETHESDA, MD 20814-2930		Phone no. (<u>301) 951-9090</u>
<u>Ma</u>	y the If	RS discuss this return with the preparer shown above? (see instructions)			X Yes No
2320	001 12-1	0-12 LHA For Paperwork Reduction Act Notice, see the separate instructi	ions.		Form 990 (2012)

Par	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission
	THE NATIONAL ASSEMBLY OF STATE ARTS AGENCIES IS THE MEMBERSHIP
	ORGANIZATION THAT UNITES, REPRESENTS AND SERVES THE NATION'S STATE AND
	JURISDICTIONAL ARTS AGENCIES.
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
_	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported
4a	(Code) (Expenses \$ 1,034,154. including grants of \$) (Revenue \$ 779,876.)
	THE NATIONAL ASSEMBLY OF STATE ARTS AGENCIES (NASAA) IS THE MEMBERSHIP ORGANIZATION THAT UNITES, REPRESENTS AND SERVES THE NATION'S STATE AND JURISDICTIONAL ARTS AGENCIES. EACH OF THE 56 STATES AND JURISDICTIONS HAS CREATED AN AGENCY TO SUPPORT EXCELLENCE IN AND ACCESS TO THE ARTS. WE REPRESENT THEIR INDIVIDUAL AND COLLECTIVE INTERESTS, EMPOWER THEIR WORK THROUGH KNOWLEDGE, AND ADVANCE THE ARTS AS AN ESSENTIAL PUBLIC BENEFIT.
	WE FULFILL OUR MISSION IN THREE WAYS:
	1. KNOWLEDGE: NASAA FACILITATES THE TRANSFER OF IDEAS, HELPING STATE ARTS AGENCIES TO PIONEER, SHARE AND APPLY KNOWLEDGE (SEE SCHEDULE O)
4b	(Code) (Expenses \$600,947. including grants of \$) (Revenue \$772,429.)
	CONTRACTS-COOPERATIVE AGREEMENTS: AGREEMENTS ENTERED INTO BETWEEN NASAA
	AND A FEDERAL AGENCY TO ASSIST IN CARRYING OUT A SHARED PUBLIC PURPOSE.
4c	(Code) (Expenses \$
4d	Other program services (Describe in Schedule O)
	(Expenses \$ including grants of \$) (Revenue \$)
4e_	Total program service expenses ▶ 1,635,101.
232002	Form 990 (2012
12-10-	

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Form 990 (2012) AGENCIES, IN Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	_1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		37
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	_		v
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6_		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-		v
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		_X_
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, for escrow or custodial account liability; serve as a custodian for	0		<u> </u>
3	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		х
10	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	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? 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		X
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	ļ. —	_X_
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			37
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	v	X
e 4	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e	X	
f	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	1 1 f	х	
19a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	111	Λ	
124	Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	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		<u>X</u> _
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	-	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			v
10	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	-	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	10	ł	y
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18	 	<u> X</u>
19	complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
			990	(2012)

62-0913689 Form 990 (2012) AGENCIES. INC. Page 4 Part IV | Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the Х United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, Х column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 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 Х Schedule J 23 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 Х 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a Х disqualified person during the year? If "Yes," complete Schedule L, Part I 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Х Schedule L, Part I 25b 26 Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disgualified Х person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial 27 contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member Х of any of these persons? If "Yes," complete Schedule L, Part III 27 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) Х a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a Х b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L. Part IV 28c Х 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Х 30 Did the organization liquidate, terminate, or dissolve and cease operations? 31 Х If "Yes," complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 Schedule N, Part II 32 X Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 Х sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 Х X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 Х If "Yes," complete Schedule R, Part V, line 2

38 X Form **990** (2012)

X

37

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Did the organization conduct more than 5% of its activities through an entity that is not a related organization

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

Note. All Form 990 filers are required to complete Schedule O

Fo <u>rm</u>	990 (2012) AGENCIES, IN	NC.	62-0913	689	Pa	age 5
Par		S Filings and Tax Compliance				
	Check if Schedule O contains a response t	to any question in this Part V				
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096.	6. Enter -0- if not applicable	1a 23			
b	Enter the number of Forms W-2G included in line	1a Enter -0- if not applicable	1b 0			
С	Did the organization comply with backup withhold	ding rules for reportable payments to vendors and re	portable gaming			
	(gambling) winnings to prize winners?			1c	х	
2a	Enter the number of employees reported on Form	www.3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the	ne year covered by this return	2a 16			
b	If at least one is reported on line 2a, did the organ	nization file all required federal employment tax return		2b	х	
	Note. If the sum of lines 1a and 2a is greater than	n 250, you may be required to e-file (see instructions)	ı			
За	Did the organization have unrelated business gros	ss income of \$1,000 or more during the year?		За		Х
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 orga	anization have an interest in, or a signature or other a	uthority over, a			
	financial account in a foreign country (such as a b	pank account, securities account, or other financial a	ccount)?	4a		X
b	If "Yes," enter the name of the foreign country.	•				
	See instructions for filing requirements for Form T	TD F 90-22 1, Report of Foreign Bank and Financial A	ccounts			
5a	Was the organization a party to a prohibited tax sl	shelter transaction at any time during the tax year?		5a		Х
b	Did any taxable party notify the organization that i	it was or is a party to a prohibited tax shelter transaction	ction?	5b		Х
С	If "Yes," to line 5a or 5b, did the organization file F	Form 8886-T?		5c		
6a	Does the organization have annual gross receipts	s that are normally greater than \$100,000, and did the	e organization solicit			
	any contributions that were not tax deductible as	charitable contributions?		6a		X
b	If "Yes," did the organization include with every so	olicitation an express statement that such contribution	ons or gifts			
	were not tax deductible?			6b		ļ
7	Organizations that may receive deductible con-	ntributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 $$	made partly as a contribution and partly for goods and serv	vices provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the	he value of the goods or services provided?		7b		<u> </u>
С	Did the organization sell, exchange, or otherwise of	dispose of tangible personal property for which it wa	s required			
	to file Form 8282?	ı	1	7c		X
d	If "Yes," indicate the number of Forms 8282 filed	during the year	7d			
е	Did the organization receive any funds, directly or	r indirectly, to pay premiums on a personal benefit co	ontract?	7e		X
f		ms, directly or indirectly, on a personal benefit contra		7f		X
g		lified intellectual property, did the organization file Fo		7g		
h	-	s, boats, airplanes, or other vehicles, did the organiza		7h		
8		funds and section 509(a)(3) supporting organizations Did				
	- · ·	sponsoring organization, have excess business holdings at a	iny time during the year?	8		
9	Sponsoring organizations maintaining donor a					
a	Did the organization make any taxable distribution			_9a		-
b	Did the organization make a distribution to a dono	or, donor advisor, or related person?		9b	 	
10	Section 501(c)(7) organizations. Enter		1			
a	Initiation fees and capital contributions included of	· · · · · · · · · · · · · · · · · · ·	10a			
b	Gross receipts, included on Form 990, Part VIII, lii	ine 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter	1	1			
a	Gross income from members or shareholders		11a			
þ	Gross income from other sources (Do not net amo	iounts due or paid to other sources against	441			
40	amounts due or received from them)	1. In the expenses the Free 200.	11b	4.0		
		ts. Is the organization filing Form 990 in lieu of Form		12a	 	
	If "Yes," enter the amount of tax-exempt interest if		12b			
13	Section 501(c)(29) qualified nonprofit health ins			46	-	
а	Is the organization licensed to issue qualified hea			13a		
L	Note. See the instructions for additional informati			l I		
D	Enter the amount of reserves the organization is r	•	13b			
	organization is licensed to issue qualified health p	μιαι ιο	_IQU_[ı		1

14b Form **990** (2012)

14a

X

c Enter the amount of reserves on hand

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

13c

NATIONAL ASSEMBLY OF STATE ARTS

Form 990 (2012)

AGENCIES, INC.

62-0913689

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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		·			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		22				
	If there are material differences in voting rights among members of the governing body, or if the governing			ŀ				
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.							
b	Enter the number of voting members included in line 1a, above, who are independent	1b		22				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	ip with	any other					
	officer, director, trustee, or key employee?			2		Х		
3	Did the organization delegate control over management duties customarily performed by or under the	ne direc	ct supervision					
	of officers, directors, or trustees, or key employees to a management company or other person?			3		_X_		
4	Did the organization make any significant changes to its governing documents since the prior Form	990 wa	as filed?	4		X		
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?		5		Х		
6	Did the organization have members or stockholders?			6	Х			
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoint	one or					
	more members of the governing body?			7a	Х			
b	b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or							
	persons other than the governing body?							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ear by th	ne following:					
а	The governing body?	•	-	8a	х			
b	Each committee with authority to act on behalf of the governing body?			8b	Х			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re	ached	at the					
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X		
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal F	Revenu	e Code)		<u> </u>			
					Yes	No		
10a	Did the organization have local chapters, branches, or affiliates?			10a		X		
b	If "Yes," did the organization have written policies and procedures governing the activities of such of	chapter	s, affiliates,					
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b	Х	<u> </u>		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?							
þ	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>		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris			12b	X	ļ		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "	Yes," d	escribe	İ				
	ın Schedule O how this was done			12c	X	<u> </u>		
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 approve		ndependent					
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision	7						
а	The organization's CEO, Executive Director, or top management official			15a	X	 		
b	Other officers or key employees of the organization			15b	X	ļ		
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ement v	with a		1	37		
	taxable entity during the year?	_1		16a	 	X		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu		· · · · · ·					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization	anızatıc	onis	400				
500	exempt status with respect to such arrangements? tion C. Disclosure			16b				
	List the states with which a copy of this Form 990 is required to be filed NONE							
17	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	T (Sec	tion 501/c)/3)s or	ulu) availal				
18	for public inspection. Indicate how you made these available. Check all that apply	, (GeC	11011 00 1 (C)(3)S 01	iiy <i>i</i> avallal	71 0			
	Own website Another's website X Upon request Other (explain	n in So	hedule (1)					
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, or		•	and fine	ncial			
statements available to the public during the tax year								
20	State the name, physical address, and telephone number of the person who possesses the books	and red	cords of the organ	nization •	•			
	DENNIS DEWEY - (202)347-6352							
	1029 VERMONT AVENUE NW # 2, WASHINGTON, DC 20005							
23200 12-10	6			Forr	n 990	(2012)		

Form 990 (2012) Part VII 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 (Ď), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A) Name and Title	(B) Average hours per		not c		ntion more	than		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director			recto	Highest compensated name	tee)	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) ARLYNN FISHBAUGH	5.00							_		_
PRESIDENT		Х	_	X				0.	0.	0
(2) PAM BREAUX	5.00	l								
1ST VICE PRESIDENT		Х		Х	<u> </u>	ļ		0.	0.	0
(3) PHILIP HORN	5.00	l								
2ND VICE PRESIDENT	5 00	X		X				0.	0.	0
(4) BOBBY KADIS	5.00									•
TREASURER	F 00	X		X	_			0.	0.	0
(5) JOHN BRACEY	5.00	1,,		۱ ۲۶					0	•
SECRETARY	2.00	X	-	X		-		0.	0.	0
(6) ALEX ALDRICH	2.00	X						0.	0.	0
DIRECTOR	2.00	^			\vdash		-	1	0,	
(7) KIM BAKER DIRECTOR	2.00	X						0.	0.	0
(8) BENJAMIN BROWN	2.00					-	\vdash	•	0.	
DIRECTOR	2.00	x						0.	0.	0
(9) MICHAEL J. CHARRON	2.00	<u> </u>				1	\vdash			-
DIRECTOR		X				ļ		0.	0.	o
(10) CHRISTINE D'ARCHY	2.00		ļ			Π				
DIRECTOR		X						0.	0.	0
(11) JOHN DIVINE	2.00		Ī							
DIRECTOR		X	İ					0.	0.	0
(12) GARY GIBBS	2.00									
DIRECTOR		Х					ļ	0.	0.	0
(13) JULIE HENAHAN	2.00				1					
DIRECTOR		X					L	_0.	0.	0
(14) MARGARET HUNT	2.00			1						
DIRECTOR		X	_	<u> </u>			_	0.	0.	0
(15) SUSAN LANDIS	2.00				1					
DIRECTOR		X	1	<u> </u>	<u> </u>	 _	<u> </u>	0.	0.	0
(16) TODD LOWE	2.00			1						1
DIRECTOR		X	<u> </u>	<u> </u>	<u> </u> _	 	<u> </u>	0.	0.	0
(17) BILL MANDICOTT	2.00							_		_
DIRECTOR		X	1	<u></u>	<u> </u>	L_,	L_	0,	0.	Form 990 (201

Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, and	d Hi	ghe	st C	Compensated Employe	es (continued)				
(A) Name and title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					h an		(E) Reportable compensation from related		Esti amo	(F) mated ount o	
	(list any hours for related organizations below line)	tee or director	Institutional trustee	Officer		Highest compensated employee	<u> </u>	the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)		compo froi orgai	m the nization relate	e on ed
(18) REBECCA T.B. QUINN DIRECTOR	2.00	х						0.	().			0.
(19) RANDALL ROSENBAUM	2.00												
DIRECTOR		X				_		0.	().			0.
(20) MALISSA FERUZZI SHRIVER DIRECTOR	2.00	X						0.	(0.
(21) LIONELL THOMAS	2.00												_
DIRECTOR	2 00	X	├-		_	-	├	0.).			0.
(22) LEWIS RICCI DIRECTOR	2.00	x						0.	().			0.
(23) JONATHAN KATZ CEO	40.00			х				150,260.).	17	,16	57.
(24) KELLY BARSDATE	40.00		T		Т		T					<i>,</i> ~ `	
CHIEF PROGRAM OFFICER		1			1	X		118,028.	(. (14	, 59	95.
(25) LAURA S. SMITH	40.00												
CHIEF ADVANCEMENT OFFICER		1				Х		100,461.	1).	13	,51	14.
		Ì											
		_	<u></u>		<u> </u>	<u> </u>							
1b Sub-total								368,749.).	45	, 2	<u> 76.</u>
c Total from continuation sheets to Part V	II, Section A							0.) .			<u>0.</u>
d Total (add lines 1b and 1c)						>		368,749.	·) .	45	, 2	<u> 76.</u>
2 Total number of individuals (including but r	ot limited to th	nose	liste	ed al	bove	e) w	ho i	received more than \$100	0,000 of reportable				_
compensation from the organization					-							/es	3 No
3 Did the organization list any former officer,	director, or tru	uste	e, ke	ey er	mplo	oyee	, or	highest compensated e	mployee on	Γ			-110
line 1a? If "Yes," complete Schedule J for s	such individual										3	- 1	X
4 For any individual listed on line 1a, is the si	um of reportab	le c	omp	ensa	atior	n an	d ot	ther compensation from	the organization	Γ		Ī	
and related organizations greater than \$15	0,000? If "Yes,	" cc	mpl	ete S	Sch	edul	e J	for such individual		L	4	Х	
5 Did any person listed on line 1a receive or	accrue compe	nsat	ion	from	any	y un	rela	ted organization or indiv	idual for services				
rendered to the organization? If "Yes," com	plete Schedul	e J	for s	uch	per	son					5		<u> </u>
Section B. Independent Contractors									4400 000 /				
Complete this table for your five highest co the organization. Report compensation for										ensa	mon ire	ווזכ	
(A)	trio calcinaar y	<u></u>	Cildi	9 •		0		(B)	year.		(C)		
Name and business	address							Description of s	services	Co	ompen		า
INTERPERSONAL FREQUENCY								PARTNERSHIP	DATA				
154 GRANT STREET, NEW YO	RK, NY	<u>10</u>	01	3				PORTAL CONSU	LTING		114	. , 38	89.
						<u> </u>							
		•											
O Total number of salaran death and	and all and a second							d als area visite and a second					
2 Total number of independent contractors (\$100,000 of compensation from the organ	-	iOI l	imite	a to	ino	ose I 1	ste	a above) who received r	nore than				
or compensation from the organ	Lation									F	Form 9	90 (2	20121

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Form 990 (2012) AGENCIE:
Part VIII Statement of Revenue

AGENCIES, INC.

		Check if Schedule O conta	ains a response	to any question i	n this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts st	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b	_		1		
اڳڙي	С	Fundraising events	1c					
i ii	d	Related organizations	1d					
, <u>iii</u>	е	Government grants (contributi	ons) 1e	825,213.				
in Sign	f	All other contributions, gifts, grant	ts, and					
호		similar amounts not included above	/e 1f	98,682.				
들이	g	Noncash contributions included in lines	1a-1f \$					
<u>3 ह</u>	h	Total. Add lines 1a-1f		. ▶	923,895.			
				Business Code				
8	2 a			900099	772,429.	772,429.		
E e	b			900099	663,445.	663,445.		
Program Service Revenue	С	ANNUAL MEETING	FEES	900099	97,780.	97,780.		
Par	d	EARNED INCOME		900099	18,408.	18,408.		
5	е	PUBLICATIONS		900099	243.	243.		
_	f All other program service revenue				4 550 005			
	g	·		<u> </u>	1,552,305.			
	3	Investment income (including	dividends, intere	est, and	7 024			7 024
		other similar amounts)			7,834.			7,834.
	4	Income from investment of tax	k-exempt bond p	proceeds				
	5	Royalties	() D1					
	6 -	Grana ranta	(ı) Real	(II) Personal				
	6 a							
	b	Rental income or (loss)						
	d		t	-				
		Gross amount from sales of	(ı) Securities	(iı) Other			· · · · · · · · · · · · · · · · · · ·	
	, ,	assets other than inventory	(1) 0000111100	(1)				
	b	Less cost or other basis						
		and sales expenses						
	С							
	d							
an	8 a	Gross income from fundraising	g events (not				-	
		including \$	of					
Other Reven		contributions reported on line	1c) See					
er F		Part IV, line 18	а					
£	b	Less direct expenses	b		·			
_		: Net income or (loss) from fund	=					
	9 a	Gross income from gaming ac	tivities See					
		Part IV, line 19	a					
		Less direct expenses	b					
		Net income or (loss) from gam	_					-
	10 a	Gross sales of inventory, less						
		and allowances	а					
		Less cost of goods sold	b of inventors					
		: Net income or (loss) from sale Miscellaneous Revenu		Business Code				
	11 -	·		Dualitess Code				
	11 a							
							· · · · · · · · · · · · · · · · · · ·	
								
	_	Total, Add lines 11a-11d						
_	12	Total revenue See instructions.		•	2,484,034.	1,552,305.	0.	7,834.
23200	9 - 12			-	•			Form 990 (2012)

Form 990 (2012) AGENCIES, INC.
Part IX Statement of Functional Expenses

	Check if Schedule O contains a responsion include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
1	Grants and other assistance to governments and		expenses	general expenses	expenses
•	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in			, <u></u>	
_	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				
4	Benefits paid to or for members				-
5	Compensation of current officers, directors,				
	trustees, and key employees	181,202.	155,834.	25,368.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	976,726.	620,235.	312,105.	44,386
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	28,055.	17,061.	9,567.	1,427
9	Other employee benefits	116,753.	76,351.	35,543.	4,859
10	Payroll taxes	86,133.	57,488.	25,295.	3,350
11	Fees for services (non-employees)				
а	Management				· · · · · · · · · · · · · · · · · · ·
b	Legal	1,450.	1,224.	226.	
	Accounting	27,271.	23,014.	4,257.	
d	Lobbying				·
e	Professional fundraising services. See Part IV, line 17	`			
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25,	224 500	107 065	26 615	
40	column (A) amount, list line 11g expenses on Sch O.)	234,580.	197,965.	36,615.	
12	Advertising and promotion Office expenses	54,954.	30,748.	20,442.	3,764
13 14	Information technology	74,890.	63,200.	11,690.	3,704
15	Royalties	14,000.	03,200.	11,000.	
16	Occupancy	173,790.		173,790.	
17	Travel	153,729.	152,890.	1/3,/50.	839
18	Payments of travel or entertainment expenses	133,7230	132,030.		
.0	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	216,681.	216,681.		
20	Interest	===,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	8,521.		8,521.	
23	Insurance	8,509.	111.	8,016.	382
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 (1)				
а	EQUIPMENT	23,992.	14,625.	9,367.	
b	PUBLICAT., DUES & FEES	12,131.	6,766.	3,305.	2,060
С	BAD DEBT EXPENSE	6,520.		6,520.	
d	MERCHANT FEES	3,120.	41.	2,939.	140
е	All other expenses	7,285.	867.	6,418.	
<u>2</u> 5	Total functional expenses Add lines 1 through 24e	2,396,292.	1,635,101.	699,984.	61,207
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)				

Part X	Ba	ance	Sheet

art	X	Balance Sheet			
		Check if Schedule O contains a response to any question in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing	52,272.	1	83,333.
	2	Savings and temporary cash investments	613,677.	2	679,961.
	3	Pledges and grants receivable, net	262,492.	3	273,564.
	4	Accounts receivable, net	71,803.	4	40,950.
	5	Loans and other receivables from current and former officers, directors,			, , , , , , , , , , , , , , , , , , , ,
		trustees, key employees, and highest compensated employees. Complete	7	ŀ	
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			· ·
i		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	37,347.	9	51,590.
.	10a	Land, buildings, and equipment cost or other			
		basis Complete Part VI of Schedule D 10a 138,068	,		
ı	b	Less accumulated depreciation 10b 109,636		10c	28,432.
-	11	Investments - publicly traded securities	232,167.	11	260,393.
.	12	Investments other securities See Part IV, line 11		12	
.	13	Investments - program-related See Part IV, line 11		13	
.	14	Intangible assets		14	
.	15	Other assets See Part IV, line 11	13,910.	15	13,910.
.	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,294,259.	16	1,432,133.
Τ.	17	Accounts payable and accrued expenses	143,805.	17	191,087.
.	18	Grants payable		18	
-	19	Deferred revenue	368,935.	19	356,511.
1	20	Tax-exempt bond liabilities		20	
1	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
12	22	Loans and other payables to current and former officers, directors, trustees,			
		key employees, highest compensated employees, and disqualified persons			
		Complete Part II of Schedule L		22	
2	23	Secured mortgages and notes payable to unrelated third parties		23	
2	24	Unsecured notes and loans payable to unrelated third parties		24	
:	25	Other liabilities (including federal income tax, payables to related third			
Ì		parties, and other liabilities not included on lines 17-24) Complete Part X of			
1		Schedule D	98,119.	25	97,577.
1	26	Total liabilities. Add lines 17 through 25	610,859.	26	645,175.
		Organizations that follow SFAS 117 (ASC 958), check here X and			
		complete lines 27 through 29, and lines 33 and 34.			
:	27	Unrestricted net assets	683,400.	27	786,958.
:	28	Temporarily restricted net assets		28	
:	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117 (ASC 958), check here			
		and complete lines 30 through 34.			
;	30	Capital stock or trust principal, or current funds		30	
;	31	Paid-in or capital surplus, or land, building, or equipment fund		_31	
;	32	Retained earnings, endowment, accumulated income, or other funds		32	
:	33	Total net assets or fund balances	683,400.	33	786,958.
	34	Total liabilities and net assets/fund balances	1,294,259.	34	1,432,133.

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form 990 (2012)

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.

2012

Open to Public

Employer identification number Name of the organization NATIONAL ASSEMBLY OF STATE ARTS 62-0913689 AGENCIES INC. Part I Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h d ____ Type III - Non-functionally integrated _ Type Ⅱ c Type III - Functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes No the governing body of the supported organization? 11g(i) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). (iv) Is the organization (v) Did you notify the (vi) Is the organization in col. (i) organized in the U.S.? (iii) Type of organization (i) Name of supported (ii) EIN (vir) Amount of monetary in col. (ı) listed in your organization in col. (described on lines 1-9 organization support laovernina document? (i) of your support? above or IRC section (see instructions)) Yes Yes Yes **Total** LHA For Paperwork Reduction Act Notice, see the Instructions for Schedule A (Form 990 or 990-EZ) 2012

232021 12-04-12

Form 990 or 990-EZ.

NATIONAL ASSEMBLY OF STATE ARTS

Schedule A (Form 990 or 990-EZ) 2012 AGENCIES, INC.

62-0913689_Page 2

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III) Section A. Public Support (d) 2011 (e) 2012 (f) Total Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 1 Gifts, grants, contributions, and membership fees received (Do not 719,036. include any "unusual grants") 765,284. 849,144. 923,895. 1,308,635 4 565 994. 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 765,284. 849,144. 719,036 923,895. Total. Add lines 1 through 3 4,565,994. 1,308,635 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subtract line 5 from line 4 4,565,994, Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total 765,284 849,144. 719,036. 923,895. 7 Amounts from line 4 1,308,635 4,565,994. 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties 4.775 6,525. 10,960. 7,834. 41,455. 11,361. and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital 37,379 8,144 18.318 79,702. 15,861. assets (Explain in Part IV) 11 Total support. Add lines 7 through 10 4 687 151. 5,624,536. 12 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 97.42 14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) % 14 15 Public support percentage from 2011 Schedule A, Part II, line 14 97.17 15 % 16a 33 1/3% support test - 2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and $\triangleright \overline{X}$ stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Schedule A (Form 990 or 990-EZ) 2012

b 10% -facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

organization meets the "facts-and circumstances" test. The organization qualifies as a publicly supported organization.

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.

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)

Sec	tion A. Public Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total, Add lines 1 through 5						
	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						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar sources		•				
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses				-		
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						<u> </u>
	activities not included in line 10b, whether or not the business is						
	regularly carried on	ļ					
12	Other income Do not include gain						
	or loss from the sale of capital assets (Explain in Part IV)				<u> </u>		
13	Total support. (Add lines 9, 10c, 11, and 12)						
	First five years. If the Form 990 is for	r the organization'	s first, second, thi	rd, fourth, or fifth t	tax year as a sect	ion 501(c)(3) organi	zation,
	check this box and stop here						▶□
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
15	Public support percentage for 2012 (line 8, column (f) d	livided by line 13,	column (f))		15	%
	Public support percentage from 2011					16	%
Sec	tion D. Computation of Inve	stment Incom	e Percentage) 		-1	
17	Investment income percentage for 20)12 (line 10c, colu	mn (f) divided by li	ne 13, column (f))		17	%
18	Investment income percentage from	2011 Schedule A,	Part III, line 17			18	%
19a	33 1/3% support tests - 2012. If the	organization did i	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 organ	ızatıon	ightharpoons
b	33 1/3% support tests - 2011. If the	organization did i	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	anization qualifies	as a publicly sup	ported organization	▶ □
20	Private foundation If the organization	on did not chack a	hoy on line 14, 19	a or 19h chack t	this how and sad i	netrijetione	\blacksquare

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations: Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B. Do not complete Part II-A

 Section 501(c)(4), (5), or (6) orga 	," to Form 990, Part IV, line 5 (Proxy nizations Complete Part III	Tax), or Form 990-E	Z, Part V, line 35c (Proxy I	ax), then
	NAL ASSEMBLY OF STA	ATE ARTS	Empl	oyer identification number
AGENC	IES, INC.			<u>62-0913689</u>
Part I-A Complete if the	organization is exempt unde	er section 501(c)	or is a section 527 or	rganization.
 Provide a description of the org Political expenditures Volunteer hours 	ganization's direct and indirect politica	al campaign activities i		
Part I-B Complete if the	organization is exempt unde	er section 501(c)	(3).	
L	tax incurred by the organization und		▶\$	
2 Enter the amount of any excise	tax incurred by organization manage	rs under section 4955	▶ \$	
•	ection 4955 tax, did it file Form 4720 t			Yes No
4a Was a correction made?		•		Yes No
b If "Yes," describe in Part IV				
Part I-C Complete if the	organization is exempt und	er section 501(c)	, except section 501(c)(3).
1 Enter the amount directly expe	nded by the filing organization for sec	tion 527 exempt func	tion activities > \$	
2 Enter the amount of the filing o	rganization's funds contributed to oth	ner organizations for se	ection 527	
exempt function activities			▶\$	
3 Total exempt function expendit	tures Add lines 1 and 2 Enter here a	nd on Form 1120-POL	,	
line 17b			▶\$	
4 Did the filing organization file Fe	orm 1120-POL for this year?			Yes No
5 Enter the names, addresses an	d employer identification number (EII	N) of all section 527 po	olitical organizations to which	h the filing organization
made payments For each orga	inization listed, enter the amount paid	I from the filing organi	zation's funds. Also enter th	e amount of political
contributions received that wer	e promptly and directly delivered to a	ı separate political org	anization, such as a separa	te segregated fund or a
political action committee (PAC) If additional space is needed, provi	de information in Part	IV	
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds if none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
		-		
				1
				-

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

Schedule C (Form 990 or 990-EZ) 2012

232041 01-07-13

•	NATIONAL ASS		THIE WALD	<i></i>	012600 -		
Schedule C (Form 990 or 990 EZ) 2012 . Part II-A Complete if the org	AGENCIES, II	NC.	501/c)/3\ and fil	62-0	913689 Page 2		
(election under sec		ipi under section	1 30 I(C)(S) and in	ea i oilli 5700			
	tion belongs to an affili	ated group (and list in	Part IV each affiliated	group member's nam	address FIN		
	e of excess lobbying e	-	ran iv each anniated	group member s nam	e, address, Liiv,		
	tion checked box A and	•	visions apply				
			violotio appi)	(a) Filing	(b) Affiliated group		
	ts on Lobbying Expen			organization's	totals		
(The term "expend	ditures" means amour	its paid or incurred.)		totals			
1a Total lobbying expenditures to infli	uence public opinion (g	rass roots lobbying)		2,094.			
b Total lobbying expenditures to infli	uence a legislative body	y (direct lobbying)		219.			
c Total lobbying expenditures (add li	nes 1a and 1b)			2,313.	<u> </u>		
d Other exempt purpose expenditure	es			2,393,979.			
e Total exempt purpose expenditure	s (add lines 1c and 1d)			2,396,292.			
f_Lobbying nontaxable amount_Ent	er the amount from the	following table in both	n columns	269,815.			
If the amount on line 1e, column (a) o	r(b) is: The lobb	ying nontaxable amo	ount is:				
Not over \$500,000		he amount on line 1e.					
Over \$500,000 but not over \$1,000		O plus 15% of the exc					
Over \$1,000,000 but not over \$1,5		O plus 10% of the exc					
Over \$1,500,000 but not over \$17		O plus 5% of the exce	ss over \$1,500,000				
Over \$17,000,000	\$1,000,0	00	·				
g Grassroots nontaxable amount (er	ter 25% of line 1ft			67,454.			
h Subtract line 1g from line 1a If zer	0,						
Subtract line 1f from line 1c If zero	0.						
j If there is an amount other than ze	ation file Form 4720		<u> </u>				
reporting section 4911 tax for this		, 3		[Yes No		
4-Year Averaging Period Under Section 501(h)							
· · · · · · · · · · · · · · · · · · ·	ations that made a se						
cc	lumns below. See the	instructions for line	s 2a through 2f on pa	age 4.)			
	Lobbying Expen	ditures During 4-Yea	r Averaging Period				
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total		
2a Lobbying nontaxable amount	254,962.	258,376.	256,935.	269,815.	1,040,088.		
b Lobbying ceiling amount	234,302.	230,370.	230,933.	209,013.	1,040,000.		
(150% of line 2a, column(e))					1,560,132.		
					2/300/2021		
c Total lobbying expenditures	6,123.	14,230.	4,037.	2,313.	26,703.		
	-		-				
d Grassroots nontaxable amount	63,741.	64,594.	64,234.	67,454.	260,023.		
e Grassroots ceiling amount							
(150% of line 2d, column (e))					390,035.		
	· •			I .	1		

Schedule C (Form 990 or 990-EZ) 2012

Schedule C (Form 990 or 990-EZ) 2012 AGENCIES, INC. 62-0913689 Page 3
Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(a)	(t)
of the lobbying activity	Yes	No	Amo	ount
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of a Volunteers?				
 b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? 				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities?				
j Total Add lines 1c through 1i		ĺ		
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912			İ	
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912		1		
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			 	 -
Part III-A Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6).	tion 501(c)(5), or se	ection	
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		
Part III-B Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	-			ne 3, is
Dues, assessments and similar amounts from members		1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of poexpenses for which the section 527(f) tax was paid).	litical			
a Current year		2a		
b Carryover from last year		2b		
c Total		2c		
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying ar				
expenditure next year?		4		
5 Taxable amount of lobbying and political expenditures (see instructions)		5	<u> </u>	
Part IV Supplemental Information Complete this part to provide the descriptions required for Part I-A, line 1, Part I B, line 4, Part I C, line 5 and Part II-B, line 1 Also, complete this part for any additional information	, Part II-A (affi	liated group	list), Part II	-A, line 2,

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ 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. 2012
Open to Public Inspection

Name of the organization

NATIONAL ASSEMBLY OF STATE ARTS

Employer identification number 62-0913689

<u> </u>	AGENCIES, INC.	d Francis on Other Cinciles Francis on	62-U913689
Par			Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin		0.5
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised for	unds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be used	d only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose cont	ferring
	impermissible private benefit?		Yes No
Par	t II Conservation Easements. Complete if the or	ganization answered "Yes" to Form 990, Part I	V, line 7
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).	
	Preservation of land for public use (e.g., recreation or e	education) Preservation of an historic	cally important land area
	Protection of natural habitat	Preservation of a certified	historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of a	conservation easement on the last
	day of the tax year		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the org	janization during the tax
	year▶		-
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements	it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	, and enforcing conservation easements during	g the year ▶
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during the	year ► \$
8	Does each conservation easement reported on line 2(d) abo	ve satisfy the requirements of section 170(h)(4	
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservat	ion easements in its revenue and expense sta	tement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza	ation's financial statements that describes the	organization's accounting for
	conservation easements		
Pai	t III Organizations Maintaining Collections of	of Art, Historical Treasures, or Othe	r Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8	
1a	If the organization elected, as permitted under SFAS 116 (A	SC 958), not to report in its revenue statement	and balance sheet works of art,
	historical treasures, or other similar assets held for public ex		
	the text of the footnote to its financial statements that descri	ribes these items	•
b	If the organization elected, as permitted under SFAS 116 (A		d balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e		
	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 tre	easures, or other similar assets for financial da	
-	the following amounts required to be reported under SFAS		in provide
а	Revenues included in Form 990, Part VIII, line 1	To vice soo, rolating to these items	> \$
	Assets included in Form 990, Part X		► \$ ► \$
b	, woods included in Form 550, Falt A		Ψ

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. $^{232051}_{12\cdot10\cdot12}$

Schedule D (Form 990) 2012

NATIONAL ASSEMBLY OF STATE ARTS

Sche	dule D (Form 990) 2012 AGENCIE	S, INC.				(<u> 52-09</u>	1368	9 Pa	age 2
Par	t III Organizations Maintaining C	Collections of A	t, Historical Tr	easures, o	r Other	r Simila	ar Asse	ts(contir	nued)	
3	Using the organization's acquisition, access	on, and other record	s, check any of the	following that	are a sig	ınıfıcant ı	use of its	collection	n item	s
	(check all that apply)									
а	Public exhibition	d	Loan or exc	hange progra	ms					
b	Scholarly research	е	Other							
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explaii	n how they further t	he organizatio	n's exem	npt purpo	se in Parl	: XIII		
5	During the year, did the organization solicit of	or receive donations of	of art, historical trea	sures, or othe	er sımılar a	assets				
	to be sold to raise funds rather than to be m	aintained as part of t	he organization's c	ollection?				Yes		<u> No</u>
Par	t IV Escrow and Custodial Arran		ete if the organization	on answered "	Yes" to F	orm 990	, Part IV, I	ıne 9, or		
	reported an amount on Form 990, Pa	rt X, line 21			·					
1a	Is the organization an agent, trustee, custod	ian or other intermed	liary for contribution	ns or other ass	sets not 11	ncluded		_		
	on Form 990, Part X?							Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table							
								Amoun	t	
С	Beginning balance					1c				
d	Additions during the year					1d				
е	Distributions during the year					1e				
f	Ending balance					1f				
2 a	Did the organization include an amount on F	orm 990, Part X, line	217					Yes		No
<u>b</u>	If "Yes," explain the arrangement in Part XIII									<u>] </u>
Par	t V Endowment Funds. Complete	f the organization an	swered "Yes" to Fo	rm 990, Part I	IV, line 10)		_		
		(a) Current year	(b) Prior year	(c) Two years	s back (d) Three y	ears back	(e) Four	years	back
1a	Beginning of year balance	256,827.	214,321,	. 217	,118,	2	01,172.		187	924.
þ	Contributions									
С	Net investment earnings, gains, and losses	34,281.	42,506.	<2,797.> 15,946.				13,	248.	
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs						_			
f	Administrative expenses									
g	End of year balance	291,108.	256,827. 214,321. 217,118. 201,17					172.		
2	Provide the estimated percentage of the cur	rent year end balanc	e (line 1g, column (a	a)) held as						
а	Board designated or quasi-endowment	100.00	_%							
b	Permanent endowment	%								
С	Temporarily restricted endowment ▶	%								
	The percentages in lines 2a, 2b, and 2c show	uld equal 100%								
За	Are there endowment funds not in the posse	ession of the organization	ation that are held a	and administer	red for th	e organız	ation			
	by								Yes	_No
	(i) unrelated organizations							3a(i)		<u>X</u>
	(ii) related organizations							3a(ii)		<u>X</u>
þ	If "Yes" to 3a(II), are the related organization	s listed as required o	n Schedule R?					3b		
4	Describe in Part XIII the intended uses of the									
Par	t VI Land, Buildings, and Equipn	nent. See Form 990	, Part X, line 10							
	Description of property	(a) Cost or o	, , ,	t or other	(c) Ac	cumulate	ed	(d) Boo	k valu	е
		basis (investr	nent) basis	(other)	dep	reciation				
1a	Land									<u>-</u>
b	Buildings									
С	Leasehold improvements									
d	Equipment			2,831.		64,3		2	<u>8,4</u>	
е	Other		4	15,237.		45,2	37 .			0.

Schedule D (Form 990) 2012

28,432.

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

2. FIN 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2012

232053 12-10-12

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

97,577

	,	•		ASSEMBLY O	F STATE	ART	S			
		(Form 990) 2012	AGENCIES,	INC.				62-	<u>0913689 Pag</u>	<u>e 4</u>
Par	t XI	Reconciliation of	Revenue per	Audited Financi	ial Statemen	its W	ith Revenue per R	eturr		
1	Total	revenue, gains, and oth	er support per aud	ited financial stateme	ents		•	1	2,510,74	<u>0.</u>
2	Amou	nts included on line 1 b	ut not on Form 990), Part VIII, line 12						
а	Net u	nrealized gains on inves	itments			2a	<u> 26,706.</u>]		
b	Donat	ed services and use of	facilities	-		2b				
С	Recov	venes of prior year grant	ts			2c]		
d	Other	(Describe in Part XIII)				2d]		
е	Add I	nes 2a through 2d						2e_	26,70	<u>6.</u>
3	Subtra	act line 2e from line 1						3	2,484,03	<u>4.</u>
4	Amou	nts included on Form 9	90, Part VIII, line 12	2, but not on line 1						
а	Invest	tment expenses not inc	luded on Form 990	, Part Vill, line 7b		4a		<u> </u>		
b	Other	(Describe in Part XIII)				4b				
C	Add I	nes 4a and 4b						4c		0.
5		revenue Add lines 3 an						5_	2,484,03	<u>4.</u>
Par	t XII	Reconciliation of	f Expenses per	Audited Finance	cial Stateme	nts V	Vith Expenses per	Retu		
1	Total	expenses and losses pe	er audited financial	statements				1_	2,396,29	<u>2.</u>
2	Amou	ints included on line 1 b	ut not on Form 990), Part IX, line 25 [.]						
а	Donat	ted services and use of	facilities			2a				
b	Prior y	year adjustments				2b				
С	Other	losses				2c		_		
d	Other	(Describe in Part XIII)				2d		4		_
е	Add II	nes 2a through 2d			-			2e		<u>0 .</u>
3		act line 2e from line 1						3	2,396,29	<u>2.</u>
4		ints included on Form 9		-						
а		tment expenses not inc	luded on Form 990	, Part VIII, line 7b		4a		_		
b		(Describe in Part XIII)				4b				_
		nes 4a and 4b						4c		<u>0.</u>
		expenses Add lines 3 a Supplemental In		equal Form 990, Part	1, line 18)			5	2,396,29	<u> </u>
				d for Dod II been 0. f					05 D-+V b 4 D-	_
X, line	2, Pa	nis part to provide the d rt XI, lines 2d and 4b, a ' , LINE 4: TI	nd Part XII, lines 2d	and 4b Also compl	ete this part to p	orovide	any additional informat	tion	S TO	rı
MAI	NTA	IN A SURPLUS	S FOR CONT	INGENCIES	WHICH MA	Y A	RISE FROM-BU	JT A	RE NOT	_
LIM	IITE	D TO-OPERAT	ING SHORTA	GES, CAPIT	AL NEEDS	5, 0	R UNANTICIPA	ATED	<u> </u>	
EXI	GEN	CIES. THE	STABILIZAT	CION FUND T	ARGET IS	CU	RRENTLY \$300	00,00	0.	
EXF	END	OITURES OF S'	<u> FABILIZATI</u>	ON FUND PR	INCIPAL	REQ	UIRE BOARD A	APPR	OVAL.	
PAF	RT X	(, LINE 2: FO	OR THE YEA	ARS ENDED S	EPTEMBER	30	, 2013 AND 2	2012	, NASAA	
HAS	DC	CUMENTED IT	S CONSIDER	RATION OF F	'ASB ASC	740	-10, INCOME	TAX	ES, THAT	
							 -		dule D (Form 990) 2	2012

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.

2012

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service

Name of the organization

Department of the Treasury

► Attach to Form 990. ► See separate instructions.

NATIONAL ASSEMBLY OF STATE ARTS AGENCIES, INC.

Employer identification number 62-0913689

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 Health or social club dues or initiation fees Tax indemnification and gross-up payments Discretionary spending account Personal services (e.g., maid, chauffeur, chef) 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 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2 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, but explain in Part III Compensation committee Written employment contract X Compensation survey or study Independent compensation consultant X Approval by the board or compensation committee Form 990 of other organizations 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 X a Receive a severance payment or change-of-control payment? 4a X b Participate in, or receive payment from, a supplemental nonqualified retirement plan? X c Participate in, or receive payment from, an equity-based compensation arrangement? 4c 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. 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 X a The organization? 5a Х Any related organization? 5b If "Yes" to line 5a or 5b, describe in Part III 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 a The organization? 6a Х X Any related organization? 6b If "Yes" to line 6a or 6b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments X not described in lines 5 and 69 If "Yes," describe in Part III 7 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the Х initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III 8 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

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232111 12-10-12

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

Schedule J (Form 990) 2012

NATIONAL ASSEMBLY OF STATE ARTS

INC. AGENCIES,

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed Schedule J (Form 990) 2012

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

Page 2

62-0913689

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 V	(B) Breakdown of W 2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	
(A) Name and Title		(i) Base compensation	(II) Bonus & Incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(D)-(I)(B)	reported as deferred in prior Form 990
(1) JONATHAN KATZ	≘ 3	150,260.	000	000	8,289.	8,878.	167,427.	00
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NATIONAL ASSEMBLY OF STATE ARTS AGENCIES, INC.

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information

232113 12-10-12

Schedule J (Form 990) 2012

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

OMB No 1545-0047
2012
Open to Public Inspection

Name of the organization

NATIONAL ASSEMBLY OF STATE ARTS AGENCIES, INC.

Employer identification number 62-0913689

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
ABOUT SERVING THE PUBLIC EFFECTIVELY. NASAA'S RESEARCH AND EDUCATION
SERVICES INFORM AND INSPIRE, EMPOWERING PUBLIC-SECTOR LEADERSHIP FOR
THE ARTS IN EVERY STATE.
2. REPRESENTATION: NASAA PROVIDES NATIONAL REPRESENTATION FOR STATE
ARTS AGENCIES, ENSURING THAT THEIR POLICY AND RESOURCE INTERESTS HAVE A
PERSUASIVE VOICE. NASAA ADVANCES THE VALUE OF STATE ARTS AGENCIES,
BRINGING VISIBILITY AND RECOGNITION TO THEIR ACCOMPLISHMENTS. NASAA
ALSO CHAMPIONS THE ARTS AND STATE ARTS AGENCIES, ADVOCATING FOR A
ROBUST PUBLIC-SECTOR ROLE IN AMERICAN CULTURAL LIFE.
3. COMMUNITY: NASAA CONNECTS STATE ARTS AGENCY STAFF AND COUNCIL
MEMBERS, MAKING THE COLLECTIVE EXPERIENCES AND WISDOM OF THE FIELD A
RESOURCE FOR EVERYONE. NASAA EMBRACES BOTH THE DIFFERENCES AND
SIMILARITIES AMONG STATES, WIDENING UNDERSTANDING AND CREATING COMMON
CAUSE. PARTICIPATION IN A REWARDING AND WELCOMING PROFESSIONAL
COMMUNITY STRENGTHENS STATE ARTS AGENCIES IN ALL CORNERS OF THE
COUNTRY.
FORM 990, PART VI, SECTION A, LINE 6: THE MEMBERSHIP OF THE ASSEMBLY
CONSISTS OF THE STATE ARTS AGENCIES, REPRESENTED BY THE CHAIRMAN AND THE
DIRECTOR OR THE CHIEF EXECUTIVE OFFICER OF EACH OF THE CONSTITUENT
AGENCIES.

FORM 990, PART VI, SECTION A, LINE 7A: THE NOMINATING COMMITTEE PREPARES

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

Schedule O (Form 990 or 990-EZ) (2012)

232211 01-04-13

Schedule O (Form 990 or 990-EZ) (2012)	Page 2
Name of the organization NATIONAL ASSEMBLY OF STATE ARTS AGENCIES, INC.	Employer identification number 62-0913689
THE SLATE AND THE FULL MEMBERSHIP ELECTS NEW BOARD MEMBERS	S ANNUALLY.
FORM 990, PART VI, SECTION A, LINE 7B: THE MEMBERSHIP MAY	AMEND, REVISE OR
REPLACE THE BYLAWS.	<u>.</u>
FORM 990, PART VI, SECTION B, LINE 11: THE DRAFT FORM 990	WAS PREPARED BY
THE OUTSIDE ACCOUNTANT AND WAS REVIEWED BY SENIOR MANAGEM	ENT. A FINAL COPY
OF THE FORM 990 WAS SENT TO THE FULL BOARD FOR REVIEW PRICE	OR TO FILING WITH
THE IRS.	
FORM 990, PART VI, SECTION B, LINE 12C: A CONFLICT OF INT	
THE INTERESTS OF AN EMPLOYEE OR ANOTHER OUTSIDE PARTY ACT	UALLY OR
POTENTIALLY AFFECT THE ORGANIZATION IN A NEGATIVE WAY. IF	IT IS DETERMINED
THAT AN EMPLOYEE'S WORK IS BEING ADVERSELY AFFECTED BY OU	TSIDE ACTIVITIES,
THE EXECUTIVE DIRECTOR MAY TAKE ACTION NORMALLY TAKEN IN	RESPONSE TO
UNSATISFACTORY WORK PERFORMANCE.	
ANY BOARD MEMBER MUST DISCLOSE ANY CONFLICTS OF INTEREST	IMMEDIATELY. IF A
CONFLICT OF INTEREST ARISES, THE BOARD MEMBER RECUSES HIM	SELF/HERSELF FROM
VOTING ON THE MATTER.	
FORM 990, PART VI, SECTION B, LINE 15: THE EXECUTIVE COMM	ITTEE APPROVES
THE COMPENSATION RANGES FOR THE CEO. THE PROCESS IS BASED	ON REVIEW OF
COMPARABLES, MARKET TRENDS AND EVALUATION. ALL DECISIONS	REGARDING
COMPENSATION ARE DOCUMENTED.	
ALONG WITH THE CHIEF OF STAFF RECOMMENDATIONS, THE EXECUT	IVE COMMITTEE

Schedule O (Form 990 or 990-EZ) (2012)