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Form **990**

Return of Organization Exempt From Income Tax

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

<u> </u>	For the	2014 cale	ndar year, or tax year beginning , 2014, and ending			, 20
В	Check if	applicable	C Name of organization Mobile Arts Council, Inc.	D	Employ	er identification number
	Address	change	Doing business as	63	3-04	17538
$\overline{\Box}$	Name ch	-	Number and street (or P.O box if mail is not delivered to street address) Room/suite) E	Telepho	ne number
	Initial ret	-	Post Office Box 372	25	51-4	32-9796
$\overline{\Box}$		m/terminated	0.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1			
Ħ.	Amende		Mobile, AL 36601	l G	Gmss r	eceipts \$ 397,641
\exists			F Name and address of principal officer Charles Smoke			subordinates? Yes No
_	Applicati	ion ponding	same as item C above	1		s included? Yes No
	Tay-eye	mpt status.	∑ 501(c)(3)			a list (see instructions)
<u>:</u>	_		learts.org	H(c) Group exe		•
			☐ Corporation ☐ Trust ☐ Association ☐ Other		-	e of legal domicile: AL
_	art I	Sumn		1300	- Otate	or legal dofficite. 711
'	1		escribe the organization's mission or most significant activities The O	ranizati	0D 14	as formed for
a	1	-	-			
Activities & Governance			rpose of coordinating and developing literacy and			ctivities of the
Ē			rts and sciences in the metropolitan area of Mob			ito not conoto
Š	2		ns box If the organization discontinued its operations or disposed or	i iliole tilali 2.	1 -	1
Ŏ	3 .		of voting members of the governing body (Part VI, line 1a).	•	3	18
S			of independent voting members of the governing body (Part VI, line 1b)		4	18
ij	~ 5		mber of individuals employed in calendar year 2014 (Part V, line 2a)		5	1 270
Ę	6 6		mber of volunteers (estimate if necessary)	•	6	370
⋖	1		related business revenue from Part VIII, column (C), line 12		7a	
	<u> </u>	Net unre	lated business taxable income from Form 990-T, line 34	Daine Voca	7b	C
	I.		itions and grants (Part VIII, line 1h) RECEIVED	Prior Year	1.55	Current Year
ē	(L) 8			397	<u>, 465</u>	
ē	129		service revenue (Part VIII, line 2g)	- 1	0	
Še	對0	Investm	ent income (Part VIII, column (A) hes ချေနျ ဆွာတ္ခ7များ ြ		0	<u> </u>
_	≸11	Other re	venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 116).		0	<u> </u>
	112		renue—add lines 8 through 11 (must equal Part VIII; column (A), line 12)		, 465	
	13		and similar amounts paid (Part IX, column A) firms 1-3)	53	<u>,137</u>	
	14		paid to or for members (Part IX, column (A), line 4)		0	
es	15		other compensation, employee benefits (Part IX, column (A), lines 5–10)	172	,853	·
Expenses	16a		onal fundraising fees (Part IX, column (A), line 11e)		0	0
Ž	. b		ndraising expenses (Part IX, column (D), line 25) 54,060		-	
ш	17		(penses (Part IX, column (A), lines 11a–11d, 11f–24e)		, 706	
	18		penses. Add lines 13–17 (must equal Part IX, column (A), line 25)		<u>, 696</u>	
	19	Revenu	e less expenses Subtract line 18 from line 12		<u>,769</u>	
ō	S S		<u> </u>	eginning of Curre		
Net Assets	20		sets (Part X, line 16)		,660	
¥.	월 21		bilities (Part X, line 26) .		,242	
	_		ets or fund balances Subtract line 21 from line 20	85	<u>,418</u>	47,132
	art II		ature Block			
U	nder pen	alties of per	jury, I declare that I have examined this return, including accompanying schedules and stater	nents, and to the	best of	my knowledge and belief, it is
	ue, corre	ct, and com	plete Declaration of preparer (other than officer) is based on all information of which preparer			
_			Charlermohe		19/2	015
	ign	1!	nature of officer	Date		
H	ere		narles Smoke			
_			pe or print name and title			lanu
P	aid	ı	Type preparer's name Preparer's signature Da		Check	X if PTIN
	repan	er KIM		19/2015		nployed P00989337
	se Or	NV Firm's	name ►KIM K. ENIKEIEFF, CPA			46-4292196
		Firm's	address ▶ POST OFFICE BOX 8754 MOBILE, AL 36689	Phone	no 2	51-460-2972
_			ss this return with the preparer shown above? (see instructions)			X Yes ☐ No
Fo	or Paper	rwork Red	luction Act Notice, see the separate instructions.			Form 990 (2014)

Part i		
1	Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission:	
1	,	1 : + 0 = 0 = 0
	The Organization was formed for the purpose of coordinating and developing	
	and education activities of the fine arts and sciences in the metropolitan	irea oi
	Mobile, Alabama.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
_		Yes 🛮 No
	If "Yes," describe these new services on Schedule O	1162 110
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
3]V ∇ N-
		Yes 🛚 No
4	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 expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocated the services of the services	
	the total expenses, and revenue, if any, for each program service reported.	ions to others
	the total expenses, and revenue, if any, for each program service reported.	
4a	(Code.) (Expenses \$ 217,815 including grants of \$ 47,137) (Revenue \$)
	Services for member organizations - members include theatrical, musical, ar	
	and historical preservation groups. Approximately 450 programs are sponsor	
	annually.	
4b		
	Cultural calendar - calendar of cultural events in the Mobile area distribu	
	approximately 1,800 member organizations and community members electronical	ly.
4c	(Code) (Expenses \$ 21,513 including grants of \$) (Revenue \$)
	Information services - information about art organizations and their progra	ms over
	the phone.	
4d	Other program services (Describe in Schedule O)	
	(Expenses \$ 44,982 including grants of \$) (Revenue \$)	
40	Tetal program convenes > 299, 956	

Part I∀

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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
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		Х
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		Х
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		X
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		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 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		-	
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		
	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		Х
d	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
	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 the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11e		X
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 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
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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.	445		.,
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	14b		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? 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, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		х
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV	Checklist of Required Schedules (continued))

			162	MÔ
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government 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 or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		 _
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 25a.	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		X
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L., Part I	24d 25a		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		х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		х
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 of any of these persons? If "Yes," complete Schedule L, Part III.	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)	, -		
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV. A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.	28a 28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		х
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		X
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 Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	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
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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	35a 35b		X
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			
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	37	Х	X
		For	m 99() (2014)

Form **990** (2014)

art	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . 14			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable .			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	X	ļ
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 4			ŀ
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	<u>X</u>	ļ
•	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?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, 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: ▶	70		 ^-
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR).			
5a	in it is a second of the contract of the contr	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		ļ
7	Organizations that may receive deductible contributions under section 170(c).	.		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	 _ '	ľ	<u> </u>
_	and services provided to the payor?	7a	<u> </u>	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		-
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	1	l ,
_	· ·	76	 	X
d e	If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	·	Х
f	Did the organization receive any funds, directly of indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
ď	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		Х
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		1	
	sponsoring organization have excess business holdings at any time during the year?	8	```	
9	Sponsoring organizations maintaining donor advised funds.	-		Ţ.
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	<u> </u>	↓
10	Section 501(c)(7) organizations. Enter.			1
a	Initiation fees and capital contributions included on Part VIII, line 12	4	ľ	
ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]	4-	1	1
11	Section 501(c)(12) organizations. Enter Gross income from members or shareholders			
a b	Gross income from other sources (Do not net amounts due or paid to other sources	┥.		1
	against amounts due or received from them)	ľ	1	
12a		12a		-,
b			1	1
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	7		
а	the state of the second of the second banks of the second banks of the second of the s	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which	.:		
	the organization is licensed to issue qualified health plans	_		
C	L	 	 	
14a		14a	4-	X
	If "Vee " heart filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	13/11	3 i	1

Part \	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S Check if Schedule O contains a response or note to any line in this Part VI					
Section	on 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 18			1		
	If there are material differences in voting rights among members of the governing body, or			į		
	of the governing body delegated broad authority to an executive committee or similar			İ		
	committee, explain in Schedule O			ĺ		
ь 2	Enter the number of voting members included in line 1a, above, who are independent 18 18 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		X		
6	Did the organization have members or stockholders?	6		X		
7a	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?	7-		١.,		
		7a		X		
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		x		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following					
а	The governing body?	8a	Х			
b	Each committee with authority to act on behalf of the governing body?	8b	Х	<u> </u>		
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		Х		
Section B. Policies (This Section B requests information about policies not required by the Internal Revenue						
			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 chapters, affiliates, 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	 		
b	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			
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х			
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	12c	Х			
13	Did the organization have a written whistleblower policy?	13	Х			
14	Did the organization have a written document retention and destruction policy?	14	Х			
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official	15a	Х			
b	Other officers or key employees of the organization	15b		Х		
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		_			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		x		
b						
	participation 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	-			
Sect	ion C. Disclosure	1	4			
17	List the states with which a copy of this Form 990 is required to be filed ▶ None					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	n 501	(c)(3)	s only)		
	Own website Another's website Upon request Other (explain in Schedule O)					
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of in financial statements available to the public during the tax year.	terest	polic	y, and		
20	State the name, address, and telephone number of the person who possesses the organization's books and re Charles Smoke, 318 Dauphin Street, Mobile, AL 36602 (251)-432-9	ecords	s. >			

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

Check if Schedule O contains a response or note to any line 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
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) Average hours per week (list any	(do n box, i	Pos leck s pe d a d	tion more rson irect	e than one n is both an tor/trustee)		(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other	
	hours for related organizations below dotted line)		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) Bunky Ralph	5									
President		Х		X	<u>L</u>			0	0	0
(2) Marianne Terry	5									
Vice President		X	l	Х				0	0	0
(3) Jeff Marcus	5									-
Treasurer] x		Х				0	0	0
(4) Chappell Williams Brady	5		[
Secretary		X	L	Х			<u> </u>	0	0	0
(5) Alison Herlihy	5	[
Immediate Past President		Х		X	<u> </u>	ļ		0	0	0
(6) Jennifer Hataway Blount	5				ŀ	İ	Ì			
Board Member		X		_	_	<u> </u>	┖	0	0	0
(7) John Coleman	5]		1			ı			
Board Member		Х			<u> </u>		<u> </u>	0	0	0
(8) Stacy Hamilton	5									
Board Member		Х	<u> </u>	_		Ĺ	1	0	0	0
(9) Jeff Lawrence	5	.]								
Board Member		<u> </u>				ļ	\perp	0	.0	0
(10) John Mims	5							1		
Board Member		X			_	<u> </u>	┸	0	0	0
(11) Harriet Shade	5	-4			1	1				
Board Member		X			┸		<u> </u>	0	0	0
(12)Richard Shields	5			1						
Board Member		X	$oldsymbol{\perp}$	↓_	<u> </u>	<u> </u>	\downarrow	C	0	0
(13)Maggie Smith	5	<u>. </u>								
Board Member		X		1	1_	1	\perp	c	0	0
(14) Debbie Stevens	5	-1			1	-	1			
Board Member		X			1		丄		0	0

Part \	Section A. Officers, Directors, Trust	ees, Key Eı	mploy	ees/	i, ar	nd H	lighes	t C	ompensated E	mployees (cont	inued	1)	
(A) Name and title		(B) Average hours per week (list any	nv					an ee)	(D) Reportable compensation from	(E) Reportable compensation fron related	(F) Estima n amoun othe		of
		related organizations below dotted line)	ndıvıdua or directo	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)		compens from to organization and relations organization	ation he ation ated
(15) Sa	lly Adams Trufant	5									\top		•
	ard Member		X	<u> </u>					0	(니		0
	ry Cousar	5	+					ļ					_
	eritus Board Member	 _	X	_		₩			0	(9		0
	te Seawell	5	1	ł						!			0
	meritus Board Member		X	 —	-				0		<u> </u>	 .	0
22	netta Whitt-Mitchell meritus Board Member	5	x				Ì		0				0
	bbert B. Burnett, Jr.	40	+	├	1	╁┈	 		<u> </u>		_		
	secutive Director	 	†		x	ľ			57,320				21,148
(20)					i i				37,7323				27,210
(21)							ļ						
(22)						-							
(23)		ļ								_			
(24)			 			+						-	
(25)			 										
1b	Sub-total .	<u> </u>	 	L			1		57,320			· ·	21,148
c	Total from continuation sheets to Part	t VII. Sectio	on A	•	•	•		•	0.,520		<u> </u>		22,210
d	Total (add lines 1b and 1c)							>	57,320		0		21,148
2	Total number of individuals (including bureportable compensation from the organ					sted	abov	e) v			000 c		
	roportubio compensation nein the engal				•							Y	es No
3	Did the organization list any former of employee on line 1a? If "Yes," complete							em	ployee, or hig	hest compensa	ated	3	х
4	For any individual listed on line 1a, is th							on a	and other com	pensation from	the		-
•	organization and related organizations	greater th	nan \$	150	,00	02	If "Ye	es,"	complete Sc	hedule J for s	uch		ĺ
	ındividual											4	х
5	Did any person listed on line 1a receive for services rendered to the organization									zation or individue.	dual	5	х
Section	on B. Independent Contractors												
1	Complete this table for your five highest compensation from the organization. Re year												's tax
	(A) Name and business ad	dress							(B) Description of	services	С	(C) ompensat	ion
								+					
								‡					
								+	· · · · · · · · · · · · · · · · · · ·				
2	Total number of independent contract received more than \$100,000 of competitions.							to t	hose listed al	oove) who			

Form 95		<u> </u>						Page 9
Part	VIII	Statement of Reve	nue					
		Check if Schedule O	contains a resp	onse or note to	any line in this	Part VIII		
	- •	1			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
\$ S	1a	Federated campaigns	1a	•	7	7.15	र (स्टर (सकर)	, ,
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b		-			
ا ع ت	c	Fundraising events	1c			٠	*	
\$ Z	_				,	,	, ,	
<u>a</u>	d	Related organizations					, , ,	
S. F.	e	Government grants (con		111,650		, ,	'a .	•
윤监	Т	All other contributions, gi			2000		` ' '	*
혈美		and similar amounts not incl		285,991	, , ,			
들일	g	Noncash contributions includ	led in lines 1a-1f.\$, . j -		-
္တိ ၕ	h	Total. Add lines 1a-11	f .		397,641	, ,	,	
9				Business Code	,	- •	` '	
ē	2a						·	
8	b						T	· ·· · · · · · · · · · · · · · · · · ·
8	С							
e S	d						-	
S	<u> </u>							
<u> </u>		All other program con	/ioo royonyo			<u> </u>		
Program Service Revenue	' '	All other program sent Total. Add lines 2a-2			0	10 (\$ 1 V V V	1 (**** -, , , , , , , , , , , ,	<u> </u>
-	<u>g</u>	Investment income		ondo interest	<u> </u>	1 / , 5 !	(* ', ', ', ', ', ', ', ', ', ', ', ', ',	
	3	and other similar amo	•	enas, interest,				
	4	Income from investment	t of tax-exempt be	ond proceeds >				
	5	Royalties	· · · · · ·	<u> </u>				
			(i) Real	(ii) Personal	<u> </u>	5		
	6a	Gross rents] , , , ,		· , · · · · · · · · · · · · · · · · · ·	14
	b	Less rental expenses						
	С	Rental income or (loss)	0	0	1.5.7.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.			7,37,777
	d	Net rental income or ((loss)		Ö			
	7a	Gross amount from sales of	(i) Securities	(ii) Other	1 to the 18 miles	(1976) · 1739 畫	A STATE OF THE PARTY OF THE PAR	
		assets other than inventory			[10] [[[[[]]]] [[[]]	A P		
	ь	Less cost or other basis						\$ 7
	-	and sales expenses	,					, .
	င	Gain or (loss)	0	0			; - ' , , , , , , , , , , , , , , , , , ,	se ,
	d	Net gain or (loss)			· ' \	*· · · · · · · · · · · · · · · · · · ·	-	/ [*] -
	ı u	Net gain of (loss)	•	· · · · · ·	0		, - •	
单	8a	Gross income from fu	Indraising	1	3, 4	14.	\$ 15	135
Ĕ	l oa	events (not including \$	indialsing		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	3 × 2 × 3 × 3	San Carlotte	, ,
ě		·			. विश्व किया			Z:8
~		of contributions reporte See Part IV, line 18	ed on line 1c)		· " 新大气花气"。	- 1	Section 19 Section	* * * * * * * * * * * * * * * * * * * *
Other Revenue	١.	·	а		1 . ~ · · · · · ·	1 1 1 1 1 1 1 1 1 1		******
5	b	Less. direct expenses			T 13 18 - 1			(4) = 44 ,
		Net income or (loss) f		events >	0	1 3		
	9a	Gross income from ga	aming activities		1 2 4 24 1 5	1 1 2 1 2		- ·
		See Part IV, line 19	а			7 (5	;	k ·
	b	Less: direct expenses			January Carlotte	1. 45 6	4	
	С	Net income or (loss) f		ivities . >	0			
	10a			1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		· 静生 例(1)(1)	, 154 5 4
		returns and allowance	es . a					1. 1. 1. 1.
	b	Less cost of goods s					J. 10 51.14.	
	С	Net income or (loss) f		entory .	7	,,,,,,		1.
		Miscellaneous F	Revenue	Business Code	電打 1 - "	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	C. W.	:
	11a				7 -		1	1
	b							
	С	***************************************		<u> </u>				
	d	All other revenue		****	<u> </u>			
	e	Total. Add lines 11a-	-11d		0	7, -4, -001		3 6 ,
	12	Total revenue. See i			397,641			
						ı	i	1

Page **10**

Part Section	Statement of Functional Expenses of 501(c)(3) and 501(c)(4) organizations must com	plete all columns Al	l other organizations	s must complete col	umn (A)
	Check if Schedule O contains a respons	<u> </u>			
	t include amounts reported on lines 6b, 7b, 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 domestic organizations and domestic governments. See Part IV, line 21	47,137	47,137	12	
2	Grants and other assistance to domestic individuals. See Part IV, line 22			,	
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	57,530	39,696	5,753	12,081
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 8	Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	92,409	63,762	9,241	19,406
9	Other employee benefits .	32,806	22,637	3,280	6,889
10	Payroll taxes	12,827	8,850	1,283	2,694
11	Fees for services (non-employees).	25,02		1,200	
а	Management				
b	Legal				
С	Accounting	4,000		4,000	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17			17:31 · . · ·	
f g	Investment management fees Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion	12,990	"		12,990
13	Office expenses	19,759		19,759	
14	Information technology	1,810		1,810	
15	Royalties				
16	Occupancy	27,171		27,171	
17	Travel	447		447	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .				
20	Interest	493		493	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,129		1,129	
23	Insurance	7,241		7,241	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e if line 24e amount exceeds 10% of line 25, column				, ' 91
	(A) amount, list line 24e expenses on Schedule O)		2° 3 4 € 1.	* W . 4 *	
a	Program expenses	117,874	117,874		
c b	Miscellaneous	304		304	
d e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	435,927	299,956	81,911	54,060
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)	433,321	233,330	01,311	34,000

33

34

Total net assets or fund balances

Total liabilities and net assets/fund balances

Balance Sheet Part X Check if Schedule O contains a response or note to any line in this Part X (A) (B) End of year Beginning of year 47,767 Cash—non-interest-bearing 67,186 1 2 2 Savings and temporary cash investments . 3 Pledges and grants receivable, net . . 50,807 3 31,480 4 Accounts receivable, net 4 763 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 Assets 7 Notes and loans receivable, net 8 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 9 1,793 10a Land, buildings, and equipment: cost or other basis Complete Part VI of Schedule D 10a 28,234 Less accumulated depreciation . 10b 23,696 5,667 10c 4,538 11 11 Investments—publicly traded securities 12 Investments—other securities See Part IV, line 11 12 13 13 Investments—program-related See Part IV, line 11 14 14 Intangible assets . 15 Other assets. See Part IV, line 11 15 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 123,660 86,341 17 Accounts payable and accrued expenses 17 21,715 14,962 18 Grants payable . . 8,280 18 19 Deferred revenue . 5,000 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D . 21 Loans and other payables to current and former officers, directors, 22 trustees, key employees, 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 10,000 24 9,214 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 39,209 26 38,242 **26** Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ □ **Assets or Fund Balances** complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 72,153 27 36,797 13,265 28 10,335 28 Temporarily restricted net assets . . . 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

47,132

86,341

85,418

123,660

33

34

art	XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI						
1	Total revenue (must equal Part VIII, column (A), line 12)	1		397,	641		
2	Total expenses (must equal Part IX, column (A), line 25)	2		435,	927		
3	Revenue less expenses Subtract line 2 from line 1						
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		85,	418		
5	Net unrealized gains (losses) on investments .	5					
6	Donated services and use of facilities	6					
7	investment expenses	7					
8	Prior period adjustments	8					
9	Other changes in net assets or fund balances (explain in Schedule O)	9					
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line	ľ					
	33, column (B))	10		47,	132		
Part							
	Check if Schedule O contains a response or note to any line in this Part XII		·				
			F	Yes	No		
1	Accounting method used to prepare the Form 990 Cash Accrual Other		.				
	If the organization changed its method of accounting from a prior year or checked "Other," ex	olain in		i			
_	Schedule O						
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?						
	If "Yes," check a box below to indicate whether the financial statements for the year were compreviewed on a separate basis, consolidated basis, or both.	onea or		}	ļ		
	•						
	Separate basis Consolidated basis Both consolidated and separate basis		0.		}		
Ь	Were the organization's financial statements audited by an independent accountant?		2b	X	ļ.—		
	If "Yes," check a box below to indicate whether the financial statements for the year were audite separate basis, consolidated basis, or both	on a	! -				
	•		İ		!		
	Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or	(orought			l		
С	of the audit, review, or compilation of its financial statements and selection of an independent account		2c	x			
	If the organization changed either its oversight process or selection process during the tax year, ex						
	Schedule O.	Piaili II	' ·				
20	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth in	.	1	ł		
Jd	the Single Audit Act and OMB Circular A-133?	.0101111	За	-	x		
ь		rao the		 	1-		
Ð	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		зь				
				m 990	2014)		
			. 01		~ ~ · ~ ,		

SCHEDULE'A (Form 990 or 990-EZ)

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.

Department of the Treasury Internal Revenue Service Name of the organization

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 2014

Open to Public Inspection

Employer identification number

support from gross investment income and junrelated 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		Tie Arts Council, Inc.					03-041/538		
1								1S.	
2 A school described in section 170(b)(1)(A)(iii), (Attach Schedule E) 3 A shophald or a cooperative hospital service organization described in section 170(b)(1)(A)(iii), 4 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 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iii), (Complete Part II) 6 A community for a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iii), (Complete Part II) 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(iii), (Complete Part II) 9 An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and jurrelated business taxable income (less section 511 tax) from businesses acquired by the organization offer june 30, 1975 See section 59(a)(2), (Complete Part III) 10 An organization organization after june 30, 1975 See section 59(a)(2), (Complete Part III) 11 An organization organization operated exclusively to test for public safety See section 599(a)(4). 12 An organization organization operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organization operated, supervised, or controlled by its supported organization(s), typically by giving the supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving this supported organization(s) the power to regularly appoint or el	he	<u>~</u>		•	-	•	•		
a					oed in sec	ction 170	(b)(1)(A)(i).		
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 5	_			•					
hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(iv). A regamization 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)(iv). (Complete Part II) A community trust described in section 170(b)(1)(A)(iv). (Complete Part II) A community trust described in section 170(b)(1)(A)(iv). (Complete Part II) A community trust described in section 170(b)(1)(A)(iv). (Complete Part II) A community trust described in section 170(b)(1)(A)(iv). (Complete Part II) A community trust described in section 170(b)(1)(A)(iv). (Complete Part II) A community trust described in section 170(b)(1)(A)(iv). (Complete Part III) An organization organization and operated exclusively to test for public safety. See section 509(a)(4). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (Complete Part III) An organization organization operated exclusively to test for public safety. See section 509(a)(4). (Complete Part III) An organization organization 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 in lines 11a through 11d that describes the type of supporting organization and completes 11a, and 11g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization (s) the supported organization (s) the supported organization organizati	_								
Section 170(b)(1)(A)(iv). (Complete Part II) 6	4	_	•	njunction with a nosp	ital descri	ibed in se	ection 1/0(b)(1)(A)(i	II). Enter the	
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 III) 8	5	☐ An organization operated for t	he benefit of a o	college or university of	owned or	operated	d by a governmenta	al unit described in	
9	_	An organization that normally	receives a subst	antial part of its supp				the general public	
9	8				Part II)				
11	_	An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses							
11	10	☐ An organization organized and	operated exclus	ively to test for public	safety S	ee sect io	on 509(a)(4).		
the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B b		An organization organized and one or more publicly supported	operated exclusive organizations de	vely for the benefit of, escribed in section 5 0	to perforn)9(a)(1) or	n the fund section	ctions of, or to carry 509(a)(2). See sections	on 509(a)(3). Check	
control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C c	;	the supported organization(s) the power to re	gularly appoint or ele	•				
tts supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E d	1	control or management of the	e supporting org	anızatıon vested ın th					
that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V e	1		• •				•	/ integrated with,	
functionally integrated, or Type III non-functionally integrated supporting organization f Enter the number of supported organizations g Provide the following information about the supported organization(s). (ii) Name of supported organization (iii) EN (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) (iv) Is the organization listed in your governing document? Yes No (A) Youth Empowered for Success (B) Gulf Coast Ethinic and Heritage Jazz (C) Mobile Opera (C) Mobile Symphonic Pops		that is not functionally integra	ated. The organiz	zation generally must	satisfy a	distributio	on requirement and		
f Enter the number of supported organizations g Provide the following information about the supported organization(s). (ii) Name of supported organization (iii) EN (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) (iv) Is the organization (v) Amount of monetary support (see instructions) (vi) Amount of other support (see instructions) (vi) Amount of monetary support (see instructions) (vii) Amount of other support (see instructions) (viii) EN (viii) Type of organization (street in your governing document? (vi) Amount of monetary support (see instructions) (viii) EN (viii) EN (viii) Amount of monetary support (see instructions) (viii) Amount of monetary support (see instructions) (viii) Amount of monetary support (see instructions) (viii) Amount of monetary support (see instructions) (viii) Amount of monetary support (see instructions) (viii) Amount of monetary support (see instructions) (viii) Amount of monetary support (see instructions) (viii) Amount of monetary support (see instructions) (viii) Amount of monetary support (see instructions) (viii) Amount of monetary support (see instructions) (viii) Amount of monetary support (see instructions) (viii) Amount of monetary support (see instructions) (viii) Amount of monetary support (see instructions) (viii) Amount of monetary support (see instructions) (viii) Amount of monetary support (see instructions) (viii) Amount of monetary support (see instructions) (viii) Amount of monetary support (see instructions) (viii) Amount of monetary support (see instructions)		—						, Type III	
(ii) Name of supported organization (iii) EN (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) (A) Youth Empowered for Success (63-1285189) (63-1285189) (63-1219788) (70) Mobile Opera (63-6045261) (60) Mobile Symphonic Pops (iv) Is the organization (iv) Is the organization (listed in your governing document? (v) Amount of monetary support (see instructions) (vi) Amount of monetary support (see instructions) (vi) Amount of monetary support (see instructions) (vi) Amount of monetary support (see instructions) (vi) Amount of monetary support (see instructions) (vi) Amount of monetary support (see instructions) (vi) Amount of monetary support (see instructions) (vi) Amount of monetary support (see instructions) (vi) Amount of monetary support (see instructions) (vi) Amount of monetary support (see instructions) (vi) Amount of monetary support (see instructions) (vi) Amount of monetary support (see instructions)		f Enter the number of supported of	organizations			,	•	5	
Yes No (A) Youth Empowered for Success 63-1285189 9 X 6,000 0 (B) Gulf Coast Ethinic and Heritage Jazz 63-1219788 9 X 6,409 0 (C) Mobile Opera 63-6045261 9 X 18,027 0 (D) Mobile Symphonic Pops			1	(iii) Type of organization (described on lines 1–9 above or IRC section	(iv) is the or	r governing	support (see ,	other support (see	
Success 63-1285189 9 X 6,000 0 Gulf Coast Ethinic and Heritage Jazz 63-1219788 9 X 6,409 0 CO				(000 11.0.100110110))	Yes	No			
Success 63-1285189 9 X 6,000 0 Gulf Coast Ethinic and Heritage Jazz 63-1219788 9 X 6,409 0 CO		Youth Empowered for							
B Gulf Coast Ethinic and Heritage Jazz 63-1219788 9 X 6,409 0 C Mobile Opera 63-6045261 9 X 18,027 0 C Mobile Symphonic Pops X 18,027 0	(A)		63-1285189	9		х	6,000	0	
(C) Mobile Opera 63-6045261 9 X 18,027 0 (D) Mobile Symphonic Pops	(B)	Gulf Coast Ethinic and				Х		0	
Mobile Symphonic Pops	(C)	Mobile Opera						0	
	(D)	Mobile Symphonic Pops						0	

23-7070234 9

(E) Mobile Symphony

0

11,239

47,137

Х

Total

_	(Complete only if you checked the Part III. If the organization fails to						ality under
	on A. Public Support						
Calend	dar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") .						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)				,		
6	Public support. Subtract line 5 from line 4	-					
	on B. Total Support						•
Calen	dar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4 .			1	_		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10	-	· ·	3, y -	1, 1, 2, 3	7,	
12	Gross receipts from related activities, etc	. (see instruct	ions) .	•		12	·
13	First five years. If the Form 990 is for the		n's first, secor	nd, third, fourth	n, or fifth tax y	ear as a section	n 501(c)(3)
	organization, check this box and stop he						▶ 🗆
<u>Secti</u>	on C. Computation of Public Suppor		*************************************				
14	Public support percentage for 2014 (line		•	11, column (f))		14	%%
15	Public support percentage from 2013 Sci			: .:		15	%
16a	331/3% support test—2014. If the organi				d line 14 is 33	1/3% or more, c	
	box and stop here. The organization qua	•		_		. 45 001 0/	P [
b	331/3% support test—2013. If the organ check this box and stop here. The organ					9 15 IS 331/3%	or more,
17a	10% -facts-and-circumstances test—2 10% or more, and if the organization me Part VI how the organization meets the "torganization	ets the "facts	-and-circumsta	ances" test, ch	eck this box a	nd stop here . I	Explain in
b	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organiza Explain in Part VI how the organization is supported organization.	tion meets th	e "facts-and-o	rcumstances"	test, check t	his box and st	top here a publicly
18	Private foundation. If the organization d instructions		a box on line 13	3, 16a, 16b, 17	a, or 17b, che	ck this box and	see

Schedule A (Form 990 or 990-EZ) 2014

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	on A. Public Support				···	<u></u>	
Calen	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants")	I		İ			
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities	ļ					
	furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an		 				
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
-	organization's benefit and either paid						•
	to or expended on its behalf					1	
5	The value of services or facilities	-			<u> </u>		
3	furnished by a governmental unit to the			ĺ			
	organization without charge						
6	Total. Add lines 1 through 5		 	<u> </u>		<u>_</u>	
	Amounts included on lines 1, 2, and 3		 	-		-	
74	received from disqualified persons						
	, ,		 				
D	Amounts included on lines 2 and 3	1	Ì				
	received from other than disqualified persons that exceed the greater of \$5,000	l					
	or 1% of the amount on line 13 for the year	}					
_	Add lines 7a and 7b			 		 	
8	Public support (Subtract line 7c from		1		,		
0	line 6 \	'	· [•	,	ľ	
Carti		<u> </u>	,				
	on B. Total Support	(=) 2040	(b) 2044	(0) 2042	(4) 2042	(-) 2044	10 T-4-1
Galen 9	dar year (or fiscal year beginning in) ► Amounts from line 6	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
10a	Gross income from interest, dividends,			 		-	
IVa	payments received on securities loans, rents,						
	royalties and income from similar sources						
.	Unrelated business taxable income (less			"			<u> </u>
D	section 511 taxes) from businesses						
	acquired after June 30, 1975						1
_	4.11		4				
	Net income from unrelated business		-		+	 	
11	activities not included in line 10b, whether						
	or not the business is regularly carried on						
42			+	-	 	ļ	
12	Other income. Do not include gain or loss from the sale of capital assets						
	(Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11,				 	 	
	and 12)				1		1
14	First five years. If the Form 990 is for t	he organization	n's first, seco	nd, third, fourt	h, or fifth tax v	ear as a secti	on 501(c)(3)
. •	organization, check this box and stop he	_		,, (0.016)	, <u></u>		· • □
Secti	on C. Computation of Public Suppo		ge				<u> </u>
15	Public support percentage for 2014 (line			13. column (f))		15	%
16	Public support percentage from 2013 Sc		-			16	%
	ion D. Computation of Investment In				·····		
17	Investment income percentage for 2014			by line 13, colu	ımn (f)) .	17	%
18	Investment income percentage from 201	•			.,,	18	%
19a	331/3% support tests—2014. If the organ				and line 15 is r		
	17 is not more than 331/3%, check this box						
ь	331/3% support tests—2013. If the organi						_
-	line 18 is not more than 331/3%, check this						
20	Private foundation. If the organization of	did not check a	a box on line 1	4, 19a, or 19b,	check this box	and see instr	

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Secti	on A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain	1		х
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2	-	х
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		Х
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3c	:	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		Х
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
C	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a		X
	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
6	Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	5c		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)	7		X
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990)	8		X
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		X
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		X
С	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If: "Yes," provide detail in Part VI .	9c		X
10a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.	10a		х
b		10b		v v

Part.	Supporting Organizations (continued)		<u>·</u>	
-			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?			,,
b	A family member of a person described in (a) above?	11a 11b		X
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .	11c		X
	on B. Type I Supporting Organizations	110	L	
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization	2		
Secti	on C. Type II Supporting Organizations	1 2	<u> </u>	L
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
<u>Secti</u>	on D. All Type III Supporting Organizations			,
_			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	X	-
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)	2	x	
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3	x	
Sect	ion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	instru	ction	s)·
а	The organization satisfied the Activities Test Complete line 2 below.			
ь	The organization is the parent of each of its supported organizations. Complete line 3 below			
С	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in:	st <i>ruct.</i>	ions).
2	Activities Test Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b		
3 a	Parent of Supported Organizations. Answer (a) and (b) below. Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
b		3h		

instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org			·
1	trus	st on Nov. 20, 1970. See in:	structions. All
other Type III non-functionally integrated supporting organizations must con	nple	ete Sections A through E	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4	0	0
5 Depreciation and depletion	5	1,586	1,129
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	(1,586)	(1,129
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year).			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b	30,782	37,613
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d	30,782	37,613
e Discount claimed for blockage or other factors (explain in detail in Part VI)	,	,	
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3	30,782	37,613
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	462	564
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	30,320	37,049
6 Multiply line 5 by 035	6	106	130
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8	106	130
Section C - Distributable Amount		·	Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		(1,586
2 Enter 85% of line 1	2	,	(1,348
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		106
4 Enter greater of line 2 or line 3	4	•,	106
5 Income tax imposed in prior year	5	, .	
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	W 21	1.06

7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see

Part.	Type III Non-Functionally Integrated 509(a)(3	S) Supporting Organi	zations (continued)	 -
Section	on D - Distributions	<u>, ,, , , , , , , , , , , , , , , , , ,</u>		Current Year
1	Amounts paid to supported organizations to accomplish e	exempt purposes		47,137
2	Amounts paid to perform activity that directly furthers exe	empt purposes of suppo	rted	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI) See instructions			
7	Total annual distributions. Add lines 1 through 6			47,137
8	Distributions to attentive supported organizations to whice	h the organization is res	ponsive	
	(provide details in Part VI) See instructions			47,137
9	Distributable amount for 2014 from Section C, line 6			106
10	Line 8 amount divided by Line 9 amount			445
Se	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6		· · · · · · · · · · · · · · · · · · ·	106
2	Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)		0	
3	Excess distributions carryover, if any, to 2014	·		
а		, , , , , ,		 _
b		2 2)	``````````````````````````````````````	
С	**			
d		1 - 12" ; 1 - 12 1"		
е	From 2013			
f_	Total of lines 3a through e	0		·
g	Applied to underdistributions of prior years	' ,	0	
<u>h</u>	Applied to 2014 distributable amount	11 ,		0
<u> i </u>	Carryover from 2009 not applied (see instructions)		- · · · · · · · · · · · · · · · · · · ·	
<u>j_</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f	0		
4	Distributions for 2014 from Section D, line 7: \$, - , -	•	
а	Applied to underdistributions of prior years		0	
b	Applied to 2014 distributable amount		·	106
С	Remainder. Subtract lines 4a and 4b from 4.	0	<u> </u>	
5	Remaining underdistributions for years prior to 2014, if			
	any Subtract lines 3g and 4a from line 2 (if amount		_	
	greater than zero, see instructions)		0	
6	Remaining underdistributions for 2014. Subtract lines 3h		, '	
	and 4b from line 1 (if amount greater than zero, see instructions)	* '	,	
7	Excess distributions carryover to 2015 Add lines 3	, ,		<u> </u>
,	and 4c.		,	
8	Breakdown of line 7	0		
_ _ a	Disardown of file?	 		
<u>a</u>				
<u>c</u>		. 70		
U	Excess from 2013			
<u>u</u>	Excess from 2014	7	. ,-	
			And the second s	A 45 000 000 551 0044

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions.)
Part IV, Section A, 1 - The Organization has over 200 supported member organizations. The
designated organizations are music member organizations that benefit the community at
large.
Part IV, Section D, 3 - The Organization has an adequate working relationship with all of
the supported organizations and because of this working relationship, the supported
organizations have a significant voice in the supporting organization's investment
policies, timing of grants, manner of making grants, selection of grant recipients, and
other use of income or assets.
,
,
,

SCHEDULE D (Form 990)

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.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

ame of	the organization		Employer identification number
10bi	le Arts Council, Inc.		63-0417538
Part			ds or Accounts.
	Complete if the organization answered '		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year) .		
4	Aggregate value at end of year		1
5	Did the organization inform all donors and donor		
^	funds are the organization's property, subject to the		
6	Did the organization inform all grantees, donors, a only for charitable purposes and not for the bene		
	conferring impermissible private benefit?		
Pari	Conservation Easements.		· · · · · · · · · · · · · · · · · · ·
· ui	Complete if the organization answered	"Yes" to Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the		
•	Preservation of land for public use (e.g., recrea		f a historically important land area
	Protection of natural habitat	·	f a certified historic structure
	Preservation of open space	 .	
2	Complete lines 2a through 2d if the organization he	eld a qualified conservation contribution	on in the form of a conservation "
	easement on the last day of the tax year.	ı	Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easemen	ts	. 2b
c	Number of conservation easements on a certified	, ,	
d	Number of conservation easements included in		on a
_	· · · · · · · · · · · · · · · · · · ·		· · 2d
3	Number of conservation easements modified, tran	isferred, released, extinguished, or terr	minated by the organization during the
4	tax year ► Number of states where property subject to conse	envation easement is located	
4 5	Does the organization have a written policy re		spection handling of
Ū	violations, and enforcement of the conservation ea	· - · ·	·
6	Staff and volunteer hours devoted to monitoring,		
		nope etting, and enneroung eemeer tailer	. case, we have a considerable of the constant
7	Amount of expenses incurred in monitoring, inspe	cting, and enforcing conservation ease	ements during the year
	▶ \$	_	-
8	Does each conservation easement reported on line	• • • • • • • • • • • • • • • • • • • •	
	and section 170(h)(4)(B)(ii)?		· · · · · · · · · · · · · · · · · · ·
9	In Part XIII, describe how the organization reports		
	balance sheet, and include, if applicable, the text		nancial statements that describes the
Daw	organization's accounting for conservation easem till Organizations Maintaining Collection		Other Similar Accets
Par	Organizations Maintaining Collection Complete if the organization answered		
1a			
	works of art, historical treasures, or other similar		
	public service, provide, in Part XIII, the text of the		
ь	If the organization elected, as permitted under	SFAS 116 (ASC 958), to report in its	revenue statement and balance sheet
	works of art, historical treasures, or other similar		
	public service, provide the following amounts rela	iting to these items:	
	(i) Revenue 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 ar		
	following amounts required to be reported under		
а	Revenue included in Form 990, Part VIII, line 1		· · · · • • • • • • • • • • • • • • • •
h	Assets included in Form 990, Part X		> \$

Part	Urganizations Maintaining	Collections of A	Art, Hist	orical Treasure	s, or Ot	her Similar As	ssets (continued)
3	Using the organization's acquisition, a collection items (check all that apply):	ccession, and oth	er record	ds, check any of	the follov	ving that are a	significant use of its
а	☐ Public exhibition		d [Loan or excha	nge progi	ams	
b	☐ Scholarly research		e [
С	Preservation for future generations						
4	Provide a description of the organization XIII.	on's collections a	nd explai	in how they furthe	er the org	anızation's exe	mpt purpose in Part
5	During the year, did the organization s	solicit or receive o	donations	s of art, historical	treasures	s, or other simil	ar
	assets to be sold to raise funds rather	than to be maintai	ned as p	art of the organiza	ation's co	llection?	🗌 Yes 🔲 No
Part	IV Escrow and Custodial Arrai	ngements.					
	Complete if the organization 990, Part X, line 21.					•	
1a	Is the organization an agent, trustee, included on Form 990, Part X?						ot ☐ Yes ☐ No
þ	If "Yes," explain the arrangement in Pa	rt XIII and comple	te the fol	lowing table:	 -	1 7	Amount
_	Paginning balance				-		
C	Beginning balance				. <u>1c</u>		·
đ	Additions during the year						
e	Distributions during the year				. <u>1e</u>		
f	Ending balance				•		Van 🗆 Na
2a	If "Yes," explain the arrangement in Pa						-
Pari		III AIII. CHECK HER	i the ex	pianation has bee	en provide	o in Part Alli .	· · · · <u>L</u> J
rai	Complete if the organization	answered "Ves"	to Form	n 990 Part IV li	ne 10		
	Complete if the organization	(a) Current year	(b) Pric		ears back	(d) Three years bad	k (e) Four years back
1a	Beginning of year balance	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		(0, 1, 1, 0, 0, 1, 1, 0, 0, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,		(-,	(0) 000 000
b	Contributions						
	Net investment earnings, gains, and losses						 -
_	 						
0	Grants or scholarships Other expenditures for facilities and						
_	programs						
f	Administrative expenses						
g	End of year balance					_ _	
2	Provide the estimated percentage of the	=	_	e (line 1g, column	(a)) held	as:	
a	Board designated or quasi-endowmen		_%				
b	Permanent endowment	%					
С	Temporarily restricted endowment	······································	00/				
2-	The percentages in lines 2a, 2b, and 2 Are there endowment funds not in the			action that are he	ld and ad	ministered for t	ha
3a	organization by:	e possession or in	e organi	cation that are ne	iu anu au	ministered for t	Yes No
	-						3a(i) 3a(i)
	(i) unrelated organizations (ii) related organizations						3a(ii)
	If "Yes" to 3a(ii), are the related organi						3b
b 4	Describe in Part XIII the intended uses		•				. 55
Dar	VI Land, Buildings, and Equip						
r ai	Complete if the organization		" to Forr	n 990 Part IV li	ne 11a	See Form 990	Part X line 10
	Description of property	(a) Cost or ot		(b) Cost or other bas		Accumulated	(d) Book value
	Description of property	(investm		(other)		epreciation	(4) 500% (200
1a	Land			·			
b	Buildings						
c	Leasehold improvements			4,44	8	1,652	2,796
d	Equipment			23,78	6	22,044	1,742
е	Other	•					
Total	. Add lines 1a through 1e. (Column (d) n	nust equal Form 9	90, Part	X, column (B), line	10c.) .	🕨	4,538

Part VII	Investments – Other Securities.		
	Complete if the organization answered "Yes" to F	orm 990, Part IV, line	1b. See Form 990, Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
1) Financial	derivatives		
	neld equity interests		
3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)	61 - 1 - 1 - 000 B (V		
	(b) must equal Form 990, Part X, col. (B) line 12.)		
Part VIII	Investments—Program Related.	Town 000 Doubly line:	11a Caa Farm 000 Dart V line 10
	Complete if the organization answered "Yes" to F (a) Description of investment		
	(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
/1\			
(1)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Part IX	Other Assets. Complete if the organization answered "Yes" to I (a) Description	Form 990, Part IV, line	11d. See Form 990, Part X, line 15.
(1)			
(0)			
(2)			
(3)			
(3) (4)			
(3) (4) (5)			
(3) (4) (5) (6)			
(3) (4) (5) (6) (7)			
(3) (4) (5) (6) (7) (8)			
(3) (4) (5) (6) (7) (8) (9)	umn (b) must equal Form 990. Part X. col. (B) line 15.)		
(3) (4) (5) (6) (7) (8) (9) Total. (Colu	umn (b) must equal Form 990, Part X, col. (B) line 15.)		•
(3) (4) (5) (6) (7) (8) (9)	umn (b) must equal Form 990, Part X, col. (B) line 15.) . Other Liabilities. Complete if the organization answered "Yes" to line 25.		
(3) (4) (5) (6) (7) (8) (9) Total. (Cold	Other Liabilities. Complete if the organization answered "Yes" to	Form 990, Part IV, line	
(3) (4) (5) (6) (7) (8) (9) Total. (Cold Part X	Other Liabilities. Complete if the organization answered "Yes" to line 25.	Form 990, Part IV, line	
(3) (4) (5) (6) (7) (8) (9) Total. (Colo Part X	Other Liabilities. Complete if the organization answered "Yes" to line 25. (a) Description of liability (b) Book value.	Form 990, Part IV, line	
(3) (4) (5) (6) (7) (8) (9) Total. (Cold Part X 1. (1) Federal (2) (3)	Other Liabilities. Complete if the organization answered "Yes" to line 25. (a) Description of liability (b) Book value.	Form 990, Part IV, line	
(3) (4) (5) (6) (7) (8) (9) Total. (Cold Part X 1. (1) Federal (2) (3) (4)	Other Liabilities. Complete if the organization answered "Yes" to line 25. (a) Description of liability (b) Book value.	Form 990, Part IV, line	
(3) (4) (5) (6) (7) (8) (9) Total. (Cold Part X 1. (1) Federal (2) (3) (4) (5)	Other Liabilities. Complete if the organization answered "Yes" to line 25. (a) Description of liability (b) Book value.	Form 990, Part IV, line	
(3) (4) (5) (6) (7) (8) (9) Total. (Cold Part X 1. (1) Federal (2) (3) (4) (5) (6)	Other Liabilities. Complete if the organization answered "Yes" to line 25. (a) Description of liability (b) Book value.	Form 990, Part IV, line	
(3) (4) (5) (6) (7) (8) (9) Total. (Columbia Columbia Co	Other Liabilities. Complete if the organization answered "Yes" to line 25. (a) Description of liability (b) Book value.	Form 990, Part IV, line	
(3) (4) (5) (6) (7) (8) (9) Total. (Colo Part X 1. (1) Federal (2) (3) (4) (5) (6) (7) (8)	Other Liabilities. Complete if the organization answered "Yes" to line 25. (a) Description of liability (b) Book value.	Form 990, Part IV, line	
(3) (4) (5) (6) (7) (8) (9) Total. (Colo Part X 1. (1) Federal (2) (3) (4) (5) (6) (7) (8) (9)	Other Liabilities. Complete if the organization answered "Yes" to line 25. (a) Description of liability (b) Book value.	Form 990, Part IV, line	

4	Complete if the organization answered "Yes" to Form 990, F			207 (41
1	Total revenue, gains, and other support per audited financial statements		• • • • • • • • • • • • • • • • • • • •	397,641
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	ا ما		
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
C	Recoveries of prior year grants	2c		
ď	Other (Describe in Part XIII.)	2d		0
e	Add lines 2a through 2d		<u>2e</u>	0
3	Subtract line 2e from line 1		3	397,641
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1.1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
C	Add lines 4a and 4b		· · 4c	207 (11
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			397,641
Part	<u> </u>		ses per Ketum.	
_	Complete if the organization answered "Yes" to Form 990,	Part IV, line 12a.		425 003
1	Total expenses and losses per audited financial statements	• • • • • • •	1	435,927
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	11		
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
C	Other losses	2c		
d	Other (Describe in Part XIII.)	2d	 	
e	Add lines 2a through 2d		2e	425 005
3	Subtract line 2e from line 1	i	3	435,927
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С 5	Add lines 4a and 4b		4c	435,927
	XIII Supplemental Information.	16 10.)	· · [5]	433,921
2; Par 	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this par	t to provide any addi	tional information.	

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				<i></i>

chedule D (Fo	rm 990) 2014	Page 5
art XIII	Supplemental information (continued)	
	,	

SCHEDULEI (Form 990)

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

Open to Public Inspection

▶ Information about Schedule I (Form 990) and its instructions is at www.lrs.gov/form990.

Employer identification number 63-0417538 **8** □

General Information on Grants and Assistance Mobile Arts Council, Inc. Part

Department of the Treasury Internal Revenue Service Name of the organization

⊠ Yes Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. Part II

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1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Youth Empowered for Sucess 465 Dexter Ave., Mobile, AL	63-1285189		9, 000				Jazz Program
(2) Gulf Coast Ethnic and Jazz P.O. Box 40404, Mobile, AL	63-1219788		6,409				Jazz Program
(3) Mobile Opera 257 Dauphin St., Mobile, AL	63-6045261		18,027				
(4) Mobile Symphonic Pops 257 Dauphin St., Mobile, AL	63-1053495		5,462				Concerts
(5) Mobile Symphony 257 Dauphin St., Mobile, AL	23-7070234		11,239				Concerts
(9)							
(7)							
(8)							
(6)							
(10)							
(11)							
(12)							
 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table 	501(c)(3) and goverganizations listed	ernment organization the line 1 table	tions listed in the lir	ne 1 table	-		2

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

Schedule I (Form 990) (2014)

Schedule I (FC	Schedule I (Form 990) (2014)					
Part III	Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.	mestic Individu space is needec	als. Complete if the 1.	e organization answ	rered "Yes" to Form 990, I	⊬ап IV, line ZZ.
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
-						
7						
က						
4						
ည						
မှ						
,						
Part IV	Part IV Supplemental Information. Provide the information of the properties that the grant recit	the information in	tion. Provide the information required in Part I, line 2, F	ie 2, Part III, column (b), and an		other additional information.
regardii	regarding expenditures and outcomes.	Such reports	ts are compared	,	grant	and significant variances
are reviewed.	iewed.					
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
; 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
		i			ı	Schedule I (Form 990) (2014)

SCHEDULE O (Form 990 or 990-EZ)

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.

20**14**

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.
► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization	Employer identification number
Mobile Arts Council, Inc.	63-0417538
Form 990, Part VI, Line 11a - The Form 990 and the required sched	ules were provided to
the Board of Directors electronically for their review prior to t	he return being filed.
Form 990, Part VI, Line 12c - The Organization, on an annual basi	s, asks each member of
the Board of Directors to review the Conflict of Interest Policy	to verify that they do
not have any conflicts of interest with the Organization.	
Form 990, Part VI, Line 15a - The compensation of the Executive D	irector was reviewed by
the Budget and Finance Committee and approved by the Board of Dir	ectors as part of the
annual budget.	
Form 990, Part VI, Line 18 - The Organization's Form 990 will be	mailed to anyone who
requests a copy of the form.	
Form 990, Part VI, Line 19 - The Organization's governing document	nts, Conflict of Interest
Policy, the annual Audited Financial Statements and the Form 990	are made available to
anyone who requests the documents.	
	·



Schedule O (Form 990 or 990-EZ) (2014)	Page 2
Name of the organization	Employer identification number
Mobile Arts Council, Inc.	63-0417538
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