

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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.

Inter	nal Reven	ue Service	► Information about	Form 990 and its in	nstructions is at	www.irs.	gov/form990.		Inspection
Α	For the	2014 cale	endar year, or tax year beginning	01/01	, 2014, a	nd ending	12/31	i	, 20 14
В	Check if	applicable:	C Name of organization VILLAGE	ART CLUB INC	_		D	Employe	er identification number
	Address	change	Doing business as						71-0502726
	Name ch	nange	Number and street (or P O box if m	all is not delivered to st	reet address)	Room/suit	te E	Telephor	ne number
	Initial ret	_	312 Town Center West				1		479-855-2064
	Final retu	rn/terminated	City or town, state or province, cour	ntry, and ZIP or foreign	postal code				
	Amende		Bella Vista, AR, 72714				G	Gross re	ceipts \$ -264,562
		on pending		er Catherine Rew	!		H(a) Is this a group	return for s	subordinates? Yes Vo
	.,		312 Town Center West, Bella Vi	sta, AR 72714					included? Yes No
	Tax-exe	npt status	✓ 501(c)(3)		4947(a)(1) or	527	If "No," attach	a list (se	ee instructions)
j	Website						H(c) Group exe		
ĸ			✓ Corporation ☐ Trust ☐ Associa	tion Other ▶	L Yea	ar of formate	' \ ' ' ' 		of legal domicile AR
_	art I	Summ			1 - 1 - 1	((\$\\ \^ \chi\$		
	1	-	escribe the organization's miss	ion or most signifi	cant activities:	Promo	te and provide	SUDDO	rt for artists and
ø	'	artisans	sociate the organization of this	ion or most signin	ourn donvince.		te una provide	Suppo	······································
Governance		artisaris		••		<u> </u>			
Ĕ	2	Check th	us box ▶ ☐ if the organization	discontinued its o	nerations or di	sposed o	f more than 2	5% of	its net assets
ĕ	3		of voting members of the gove		۱ ال	Spoota o	inore man z	3	8
	4		of independent voting member		7.7	line 1h)		4	8
Sa	5		nber of individuals employed it		7.1			5	0
¥	1			_	14 (Fally) IIIe	: zaj .		6	
Activities &	6		mber of volunteers (estimate if					7a	150
٩	7a		elated business revenue from	-	- / /			-	0
	b	Net unrei	lated business taxable income	10m Form 990-1,	ine 34 .		Pnor Year	7b	Current Year
		^	4	<u> </u>	3)	-	- Filot teal		
e	8		tions and grants (Part VIII, line	. ~~ / /	· · · · ·	· ·			2,963
Revenue	9	-	service revenue (Part VIII, line	-· (()		· ·			197,219
è	10		ent income (Part VIII, column (A			· · -			280
9	11		venue (Part VIII, column (A), line			·			-465,024
)—	12		enue-add lines 8 through 11 (r			ne 12)		0	-264,562
	13		nd similar amounts paid (Part J	1		· · _			11,000
9	14		paid to or for members (Part-I)			_ • ·			0
es e	15		other compensation, employee			5-10) -	·		0
Expenses	16a	Profession	onal fundraising fees (Part IX, c	ólumn (A), line 11	el	· /· -			0
×	b	Total fund	draising expenses (Part IX, col	umn_(D), Imp_25) (EIVED	ميلاي لـ			
ш	17	Other ext	penses (Fart IX, column (A), Im	63 Ma-110, 111-2	. 	1.001			198,507
	18	Total exp	penses. Add lines 13-17 (must	equal Part IX, colu	ımn (A), Jine 25			0	209,507
	19	Revenue	less expenses. Subtract line 1	8 from line 12/1/2Y	. W. 42 . E			0	-474,069
sets or lances				<i>\</i> સ્∖	0.050		leginning of Curre	nt Year	End of Year
sets	20	Total ass	sets (Part X) line 16)	\	DEN.UT	_	1,10	04,322	_604,031
Net Asser	21		ollities (Part X, line 26)					0	2,494
žē	22		ts or fund bålances. Subtract I	ine 21 from line 20) . <i></i> .		1,10	04,322	601,537
Pa	art II	Signat	ture Block	_					
			ry, I declare that I have examined this						ny knowledge and belief, it is
tru	e, correc	t, and compl	lete Declaration of preparer (other than	officer) is based on all	information of which	ch preparer	has any knowledg	je	,
			(atherene) of	Kew		_	<u></u>	4/30	/15
Sig	-	Sign	ature of officer	•			Date	•	
He	re	Cat	therine Rew, Treasurer						
		Туре	e or print name and title						
Pa	id	Print/Ty	pe preparer's name	Preparer's signature		Dat	te	Check [T If PTIN
	nu epare	r L						self-emp	
	e Onl		name ►				Firm's	EIN ►	
US	ie VIII	y ——	address ►				Phone		
Ma	y the IF		s this return with the preparer	shown above? (se	e instructions)				· · Pes No
_			ction Act Notice, see the separa		·	Cat No	11282Y		Form 990 (2014)

Cat No 11282Y

For Paperwork Reduction Act Notice, see the separate instructions.

Form 99	00 (2014)		Page 2
Part		n Service Accomplishments	•
	Check if Schedule O c	ontains a response or note to any line in this Part III	<u> </u>
1	Briefly describe the organizat	ion's mission.	
	Promote and provide educatio	n related to the arts	
	Did the second and all all all and all all all all and all all all all all all all all all al	and a section of the section of the section which were not listed	on the
2	prior Form 990 or 990-EZ? .	ke any significant program services during the year which were not listed	· · Yes Vo
3	If "Yes," describe these new so Did the organization cease services?	services on Schedule O. conducting, or make significant changes in how it conducts, any pr	rogram · · □ Yes ☑ No
	If "Yes," describe these chan	ges on Schedule O	
4		program service accomplishments for each of its three largest program s	ervices, as measured by
•	expenses. Section 501(c)(3) a	and 501(c)(4) organizations are required to report the amount of grants a	nd allocations to others,
	the total expenses, and rever	nue, if any, for each program service reported.	
4a	(Code:) (Expenses	s \$ 0 including grants of \$ 11,000) (Revenue \$	1,010)
	Gave scholarships to students	s to pursue their art degree studies and grants to local art programs in elemen	tary schools
		(O ₂)	
		\sim	
		$\sim (\circ)$	
		······································	•

4b		s \$	120,727)
	Bella Vista Arts & Crafts Festiv	val (\(\sigma\)	
			
		/)	
		4.7	
		<u>, </u>	
		/	
4c	(Code:) (Expense	s\$ 82,750 including grants of \$ 0) (Revenue \$	75,186)
40		o Gallery where artisans can display and sell art work	73,100 /
	Wishing Spring Gallery - Co-of) Gallery Wifere at usalis can display and sen art work	••••
			•
			•••••
4d	Other program services (Desi	cribe in Schedule O.) See Schedule O, Statement 1	
70		including grants of \$ 0) (Revenue \$ 0)	
4e	Total program service expens		

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A. 2 Is the organization engage in direct or indirect political campaing activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I. 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I. 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities on behalf of or in opposition to candidates for public office? "Yes," complete Schedule C, Part I. 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 98-197 If "Yes," complete Schedule C, Part II. 5 Is the organization report an advised funds or any similar funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II. 6 Did the organization report an amount in Part X, line 21, for escrow or custodial is 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 II. 7 Did the organization report an amount for part and the part X: or provide credit counseling, debt-management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V. 10 Did the organization report an amount for investments of the tax is the propriaty restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V. 10 Did the organization report an amount for investments or the tax year in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V. 11 Did the o		T			Checklist of Required Schedules	art,
3 Dut the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Pss," complete Schedule C, Part II. 4 Section 501(c)(3) organizations. Did the organization engage in loobying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part III. 5 Is the organization as entire that year of the section 501(c)(s) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III. 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 yr accounts? If "Yes," complete Schedule D, Part III. 7 Did the organization historic land areas, or historic structures? If "Yes," complete Schedule D, Part III. 8 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 courseling, distribution, years accusted and owners, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V. 9 Did the organization report an amount for provide account or substitution or provide account in the part X, line 10 for the report of the total assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V. 10 Did the organization report an amount for investments of the two parts and the part X, line 10 for the report of the organization report an amount for other assets in Part X, line 10 p	, NO	No	res I			1
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 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 II Is 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 for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Is 10 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Is 10 the organization report an amount in Part X, ine 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 repart, or debt negotiation services? If "Yes," complete Schedule D, Part V If If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V IV IV. IVII, IX, or X as applicable. a Did the organization report an amount for investments of the 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 VI If Did the organization report an amount for other assets in Part X, line 15 that Is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Pa	1				Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	
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 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 . 10 Did the organization revere 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 . 10 Did the organization report an amount in Part X, line 21, for escrow or cultifolial account liability, serve as a custodian for amounts not listed in Part X: or provide credit counseling, delictinangement, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV . 10 Did the organization deport an amount for accounting questions is (Yes," then complete Schedule D, Part V . 11 If the organization report an amount for line following questions is (Yes," then complete Schedule D, Part V . 12 Did the organization report an amount for investments of the 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 X . 13 Did the organization report an amount for investments organization and assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X . 14 Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X . 15 Did the organization organization assets to the state of the tax year include a footnote that addresses the organization is alknown as parafts. Independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X and X II so plonal. 16 Did the organization repor	\ \ \				Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	4
have the right to provide advice on the distribution or investment of amounts in such furdis or accounts? If "Yes," complete Schedule D, Part II 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 III Did the organization report an amount in Part X, line 21, for escrow or culticipal account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, dept.management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV. Did the organization directly or through a related organization; hold assets in temporanily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part VI. If the organization report an amount for line, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. Did the organization report an amount for investments of its storial assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. Did the organization report an amount for investments or 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 VII. Did the organization report an amount for other liabilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XII. Did the organization separate or consolidated managements for the tax year include a footnote that addresses the organization in port an amount for other liabilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XI. Did the organization separate or consolidated management in Part X, line 16? If "Yes," complete Schedule D, Part XI. Did the organization separate or consolidated management in Part X, line 16? If "Yes," complete Schedule D, Parts XI a	▼				s the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, issessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	5
the environment, histonic land areas, or historic structures? If "Yes," complete Schedule D, Part III Did the organization maintain collections of works of art, historical treasures, of other similar assets? If "Yes," complete Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custopial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debterhanagement, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 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 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part V III, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for investments of the securities 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 Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XIII Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X Did the organization obtain separafe, independent audited financial statements for the tax year III "Yes," complete Schedule D, Part X Did the organization obtain separafe, independent audited financial statements for the tax year? II "Yes," complete Schedule D, Part X IIII Did the orga	1	1		6	ave the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	6
so graphete Schedule D, Part III 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 better 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 VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII b Did the organization report an amount for investments of the securities in Part X, line 10? If "Yes," complete Schedule D, Part VII c Did the organization report an amount for investments of the 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 VIII d Did the organization report an amount for other assets 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 d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII d Did the organization amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part X III d Did the organization seport an amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part X III 11d V 11d	1	/		7	he environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7
custodian for amounts not listed in Part X; or provide credit counselling, debt_management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 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 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. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VIII. b Did the organization report an amount for investments or organization and part X, line 10? If "Yes," complete Schedule D, Part VIII. c Did the organization report an amount for investments organized to 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. d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. d Did the organization report an amount or other liabilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X If Did the organization report an amount for other liabilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X If Did the organization asparation or other liabilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X If Did the organization organization asparation	1	1	,	8	omplete Schedule D, Part III	8
endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V I, II, III, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. b Did the organization report an amount for investments—of the societies 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. c Did the organization report an amount for investments—of 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. d Did the organization report an amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part VIII. d Did the organization report an amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part XII. d Did the organization report an amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part X III to did the organization amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part X III to did the organization amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X III to did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X III to did the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization and included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization and included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization and included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization in a school of Schedule D, Parts XI and XII is optional. 13 Is the organization financial and included financial statements for the tax	✓	✓	,	9	sustodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or lebt negotiation services? If "Yes," complete Schedule D, Part IV	9
VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI			/	10 v	indowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10
b Did the organization report an amount for investments—organization report an amount for other assets 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					/II, VIII, IX, or X as applicable.	
of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII c 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 d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX e Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X f Did the organization is separate or consolidated in an	,		/	11a v	omplete Schedule D, Part VI \ldots	
of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	1	1		11b	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	
reported in Part X, line 16? If "Yes," complete Schedule D, Part IX e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X f Did the organization's separate or consolidated jinancial statements for the tax year include a footnote that addresses the organization's liability for uncertaintax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 1116 12 a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X I and XII so optional the organization answered "Not to line 12a, then completing Schedule D, Parts XI and XII so optional the organization as school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 b Is the organization as school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 14 a Did the organization maintain an office, employees, or agents outside of the United States? 14 b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, busifiess), 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 II and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services 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 G, Part II (see instructions) 17 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 Did the organization operate one or more hospital facilities? If "Yes," complete	1	1		11c	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	
f Did the organization's separate or consolidated imancial 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 . 111			4		eported in Part X, line 16? If "Yes," complete Schedule D, Part IX	
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. 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	✓ ✓				old 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	f
the organization answered "No to line 12a, then completing Schedule D, Parts XI and XII is optional	✓	1	,	12a	Schedule D, Parts XI and XII 🖊 🦯	
14a Did the organization maintain an office, employees, or agents outside of the United States?	✓	✓	`	-	he organization answered "No to line 12a, then completing Schedule D, Parts XI and XII is optional	
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	✓	√			Old the organization maintain an office, employees, or agents outside of the United States?	
for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	1	1		14b	undraising, business, investment, and program service activities outside the United States, or aggregate	b
assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	1	1		15	or any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15
Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	✓	✓		16	ssistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16
Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	1	\ \ -		17	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	
If "Yes," complete Schedule G, Part III	1	1	,	18	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? . 20b	1	1	,		f "Yes," complete Schedule G, Part III	19
		✓	- '			-
Form 999	90 (201) (201)	990 %		"Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	<u> </u>

Part l	Checklist of Required Schedules (continued)		•	
	The state of the s		Yes	No
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		✓
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	1	
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		✓_
С	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		
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 1., Part I	24d 25a		1
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		✓
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		√
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		✓
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		√
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		1
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		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		1
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		√
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		<u>·</u>
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		7
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.	35b		
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		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		1
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	38	1	
		Forr	n 990	(2014)

Part,				_
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		.	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		.	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	4-	✓	
20	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1c	-	
2a	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0		.	. 1
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
D	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
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 of other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial		.	
	account)?	4a		✓
b	If "Yes," enter the name of the foreign country. ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
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		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	_	.	
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
L	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
b	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
Ū	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year		\Box	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		L
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8	igwdot	
9	Sponsoring organizations maintaining donor advised funds.			l
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a 9b	\vdash	
- b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter:	30		
10	Initiation fees and-capital contributions included on Part VIII, line 12	[]		
a b	Gross receipts included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			, 1
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)	<u> </u>	ļ!	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		L
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	1		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	45	<u> </u>	$\vdash \vdash \vdash$
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	 	
L	Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which			
b	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	1		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
b	terms in the title to the terms of the terms	14b		r <u> </u>
~			n 990	(2014)

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 Schedule O contains a response or note to any line in this Part VI	See ins	struct	
Secti	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 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
ь 2	Enter the number of voting members included in line 1a, above, who are independent . 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?			
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		/
4 5	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets?	4 5		1
6 7a	Did the organization have members or stockholders? 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?	6 7a	✓ ✓	•
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	1	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following.			
a b	The governing body?	8a 8b	1	
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		1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Rever		ode.)	<u> </u>
00011	ON B. I diletes (Time description B requeste information asset persons her required by the information asset.		Yes	No
10a	Did the organization have local chapters, branches or affiliates?	10a		✓
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	<u> </u>	✓
b	Describe in Schedule O the process, if any used by the organization to review this Form 990.	- <u></u> -	ĺ	
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b		-
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		
13	Did the organization have a written whistleblower policy?	13		✓
14 15	Did the organization have a written document retention and destruction policy?	14	<u> </u>	✓
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	45-	l	
a	The organization's CEO, Executive Director, or top management official	15a 15b	<u> </u>	1
b	Other officers or key employees of the organization	130		\ <u> </u>
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		1
	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its 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	l	
Secti	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed None 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.	າ 501(c)(3)s	only)
19	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int financial statements available to the public during the tax year.	erest	policy	y, and
20	State the name, address, and telephone number of the person who possesses the organization's books and re Catherine Rew, (479)855-2064	cords	:▶	

Form 990 (2014	4)`										Page 7
Part,VII	Compensation of Officers, Dir Independent Contractors	ectors, Tr	ruste	es,	Ke	y E	mple	oye	es, Highest	Compensated	Employees, and
	Check if Schedule O contains a re	sponse or	note	e to a	any	line	e in th	nis I	Part VII	<u>.</u>	<u> </u>
Section A.	Officers, Directors, Trustees, Key	Employee	es, ar	nd H	igh	est	Com	per	sated Employ	/ees	
1a Complet organization	te this table for all persons required as tax year.	to be list	ed. F	Repo	ort c	om	pens	atıo	n for the cale	ndar year ending	g with or within the
	of the organization's current office on. Enter -0- in columns (D), (E), and								viduals or orga	anizations), rega	rdless of amount of
 List all 	of the organization's current key em	ployees, if	any.	See	ins	truc	tions	for	definition of "k	ey employee."	
who receive	e organization's five current highes ed reportable compensation (Box 5 n and any related organizations.										
\$100,000 of	I of the organization's former office freportable compensation from the compensation f	organization	n and	any	rela	atec	orga	ıniz	ations.		
organization	l of the organization's former direc n, more than \$10,000 of reportable co	ompensatio	on fro	m th	ne o	rgaı	nizati	on a	and any related	organizations.	
compensate	ns in the following order: individued and employees; and former such pers	ons.								•	
☐ Check th	nis box if neither the organization noi	any relate	d org	aniz	atıo	n co	ompe	nsa	ttèd ány curren	t officer, directo	r, or trustee.
	(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	of directo	not ch unles er and	s pe	ntion more rson recto	Highest compensated	ı-àŋ	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		illey	stee) [©]	e	ensated				organizations
Bonnie Wag	·····	0.5							0	0	0
Jan Horan	Dei	1	// -	+-+	-			-		•	•
Board Memb	her	~ \(\frac{1}{0} \)	1						0	0	0
Jan Williams		7,7									
Board Memi	·	(C) 0	1						o	0	o
Marsha Jert	son //	▽´ 1									
VP		0	1		✓				o	0	0
Edward Gra	nt // \rangle	1									
President		0			✓				o	o	0
Misty Baker		5									
Treasurer		0		$oxed{oxed}$	✓				3,000	0	0
Bill Croft	<u> </u>	2							<u> </u>		
VP		0	_	\sqcup	✓			L	0	0	0
Mary Sinkus	<u> </u>	0.2									

0

10 0

10 0

Secretary

Denise Williamsen

Festival Director Sandra Pogue

Gallery Director

0

0

0

1,500

3,500

3,000

0

0

Part	VII Section A. Officers, Directors, Trust	tees, Key E	mplo	yees	s, aı	nd t	lighe	st C	ompensated E	mployees (c	ontınu	ied)	•
						C)							
	(A)	(B)	(do n	ot ch		ition more	e than d	one	(D)	(E)		(F))
	Name and title	Average					is both		Reportable	Reportable		Estima	
		hours per week (list any			_	_	or/trust	_	compensation from	compensation related	from	amou	
		hours for	Individual trustee or director	Inst	Officer	ey	em Hig	Form	the	organizatioi		compen	
		related		럁	cer	è	hest	mer	organization (W-2/1099-MISC)	(W-2/1099-M	ISC)	from	
		organizations below dotted	tor	ona		employee	8 8		(44-27 1099-141130)			organiz and re	
		line)	rust	Institutional trustee)ee	Highest compensated employee					organiz	
			8	stee	i		nsat						
							<u> </u>						
		<u> </u>			1								
										(CC)			
					l		ļ	1					
			ļ							[)			
										ľ	1		
			1		<u> </u>								
									(\mathcal{S}_{2})				
		T	1				/	-					
							6	/	Ŷ				
		1	1		l	l _	3	\mathbb{Z}					
							1						
	•••••	1	1	١,	b		$\mathcal{O}_{\mathcal{A}}$						
				T (ڕڒ		7	Ī					
		†	Ì	ĺ	\	\Diamond							
				0/	\\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	1							
		1		C	1		ļ	ļ					
		(2	1	V									
	•	ζ		ł									
		(7)	h	<u> </u>				1					
		† 	<i>!</i> /										
1b	Sub-total			٠.	•			▶	11,000		0		1
c	Total from continuation sheets to Part	VII. Section	n A					•					
ď	Total (add lines 1b and 1c)	\bigcirc						•	11,000	-	0		
2	Total number of individuals (including bu	t not limited	d to th	nose	e list	ted	above	e) w		ore than \$10	0.000) of	
_	reportable compensation from the organ			.000			u D u • •	٠, ٠٠		0.0	,,,,,,,,		
	// ^												es No
3	Did the organization list any former of	fficer, direc	tor. c	or tr	rust	ee.	kev e	emp	olovee, or high	est comper	sated		
_	employee on line 1a? If "Yes," complete											3	-
4	For any individual listed on line 1a, is the										m the		
•	organization and related-organizations	areater th	an \$	150.	.000	7 7	f "Ye	s."	complete Sch	edule J for	such	,	
	individual											4	1
5	Did any person listed on line 1a receive of	or accrue co						un un	related organiz	ation or ind	vidua		 *-
3	for services rendered to the organization	? If "Yes." o	comp	lete	Scl	hedi	ule J 1	for s	such person			5	
Socti	on B. Independent Contractors		,						<u> </u>			<u> </u>	
1	Complete this table for your five highest	compensat	ed in	den	and	lent	contr	act	ors that receive	ed more than	\$100	000 of	
•	compensation from the organization. Rep	nort compe	nsati	oop on f	or ti	he c	alend	lar v	vear ending wit	h or within t	he ord	anization	's tax
	year.	port compo	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		O		.a.oc	,	,		0, 9	, ai ii Latioi	
	<u> </u>							П	(B)			(0)	
	(A) Name and business add	dress							Description of s	ervices		(C) Compensat	ion
			_			_		╁	<u> </u>	+		· · · ·	
				_				⊢					
								\vdash	_				_
								\vdash				_	
							-	-	-				
	Total number of independent contractor	are (include	na bi	ıt n	not	limii	ed to	\	nose listed abo	ave) who			
2	received more than \$100,000 of compen	sation from	the o	ונטסי זו וו	niza	tion		· LI		VIO WITO			
	received more man productor compen-	oduon non	1110	. yai	,,,20		-		0				

Form 9	90 (201	4)						Page 9
Par	:VIII	Statement of Revo	enue					
		Check if Schedule C	ocontains a res	ponse or note t	o any line in this (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts	1a	Federated campaigns	s 1a	0		70101100		
ts, Grants Amounts	ь	Membership dues .		1,953	1			
s, G	С	Fundraising events .	1c	0]			
Gifts,	d	Related organizations	s 1d	0]			
S, E	е	Government grants (cor		0]			
er S	f	All other contributions, g						
년 본		and similar amounts not inc		1,010				
Contributions, Giff and Other Similar	9	Noncash contributions inclu		0				
	<u>h</u>	Total. Add lines 1a-1	<u> </u>	Business Code	2,963			
Program Service Revenue	20	Mi-Lin- Cin- C-lla-		<u> </u>	75.400			
ě	2a b	Wishing Spring Galler		711300	75,186	75,186 120,727	0	0
9	l	Bella Vista Arts & Cra		711300 711300	120,727 1,162	1,162	0	0
Š	d	Studio at Wishing Spr Art Camp for Youth		711300	1,162	1,162	9	0
Š	e	Art Camp for Touti		711300	144	0000	<u>_</u>	
gra	f	All other program ser	vice revenue .		70	(2) o	0	0
Po	g	Total. Add lines 2a-2		•	197,219	<u> </u>		
	3	Investment income						·
		and other similar amo	ounts)	•	280	280	0	0
	4	Income from investmen	it of tax-exempt be	ond proceeds >	ρ ((()) 0	0	0	0
	5	Royalties		🕨) o	0	0	0
			(ı) Real	(ii) Personal				
	6a	Gross rents		. ((
	b	Less. rental expenses		2				
	C	Rental income or (loss) Net rental income or	(1000)					
	d 7a	Gross amount from sales of	(i) Securities	(ii) Other				
	10	assets other than inventory	(,, 0002, 11, 100	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	-			
	ь	Less: cost or other basis			1			
		and sales expenses .	(2/				
	С	Gain or (loss)	240) \(\)	1			
	d	Net gain or (loss) .	/.	· >				
Other Revenue	8a	Gross income from fu events (not including \$ of contributions reporte	o ed on-line 1c).					
ē		See Part IV, line 18 .]			
5		Less: direct expenses						
		Net income or (loss), f		events . >				
	9a	Gross income from ga See Part IV, line 19 .	aming activities.		:			
	b	Less: direct expenses						
	С	Net income or (loss) f		vities ▶				
	10a	Gross sales of in	·					
	_	returns and allowance	· · · · · · · ·	<u> </u>	-			
	b	Less: cost of goods s						
	С	Net income or (loss) f Miscellaneous F		entory Dusiness Code				" - 1
	110				201 500	204 500		
	11a b	ReEvaluation of donat		900099	-381,500 -80,353		0	0
	C	Disposal of Fixtures &	¿ Equip. in previ	900099	-80,353	-80,353		<u> </u>
	d	All other revenue .		_	-3,171	-3,171	0	0
		Total. Add lines 11a-	-11d	•	-465,024			
	12				-264 562		0	

Part	Statement of Functional Expenses	loto all agricono /	VII other ergenization	o must complete col	lumn (A)
Sectio	n 501(c)(3) and 501(c)(4) organizations must con			s must complete col	· · · · · · · · · · · · · · · · · · ·
Do no 8b, 9b	Check if Schedule O contains a respon 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	4,000	4,000	<u> </u>	
2	Grants and other assistance to domestic individuals. See Part IV, line 22	7,000	7,000		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0	0		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	0	0	0	0
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0) 0	0
7 8	Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0	0	0	0
9 10	Other employee benefits	0	0	0	0
11 a	Fees for services (non-employees): Management	950	950	0	0
b c d	Legal	(7/20	0	0	0
e f	Professional fundraising services. See Part IV, line 17 Investment management fees	0	0	0	0
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	20,386	20,386	0	0
12 13	Advertising and promotion	19,394 25,237	25,237	0	0
14 15	Information technology) 0 0		0	0
16 17	Occupancy	7,066	7,066	0	0
18 19	Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings.	0	0	0	<u>0</u>
20	Interest	0	0	0	0
21 22	Payments to affiliates	_17,051	17,051	0	0
23 24	Insurance	7,749	7,749	0	0
a b	Sales amounts paid to Gallery artists Festival site expenses	51,8 <u>15</u> 47,966		0	0
c d	1 GOUVAI SILE EAPERISES	47,000	,500		
e 25	All other expenses Total functional expenses. Add lines 1 through 24e	893 209,507		0	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)				

Ľ	art x				
		Check if Schedule O contains a response or note to any line in this Pai	<u>tX</u>		<u> 🗌</u>
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	59,143	1	33,172
	2	Savings and temporary cash investments	140,417	2	140,397
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	0	4	0
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L	_ 0	5	
ts	6	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	(()) 0	6	0
Assets	7	Notes and loans receivable, net	0	7	0
As	8	Inventories for sale or use	(())	8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 10a 274,029			
	b	Less. accumulated depreciation 10b 17,05f	735,882	10c	256,978
	11	Investments—publicly traded securities	_0	11	
	12	Investments—other securities See Part IV, line 11	0	12	
	13 .	Investments—program-related. See Part IV, line 11	0	13	
	14	Intangible assets	0	14	
	15	Other assets. See Part IV, line 11	168,880		173,484
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,104,322		604,031
	17	Accounts payable and accrued expenses	0	17	
	18	Grants payable	0	18	
	19	Deferred revenue		19	2,494
	20	Tax-exempt bond liabilities	0	20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.	0	21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and			
Ξ		disqualified persons. Complete Part II-of Schedule L		22	
_ial	23	Secured mortgages and notes payable to unrelated third parties	0	23	
_	24	Unsecured notes and loans payable to unrelated third parties	0	24	
	25	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		25	
	26	Total liabilities. Add lines 17, through 25	0	26	2,494
Se		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.			
Š	27	Unrestricted net-assets	935,443	27	428,053
ala	28	Temporarily restricted net assets	53,223		54,674
8	29	Permanently restricted net assets	115,656		118,810
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 30 through 34.			
Š	30	Capital stock or trust principal, or current funds		30	
Se	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds .		32	
ét	33	Total net assets or fund balances	1,104,322	33	601,537
_	34	Total liabilities and net assets/fund balances	1,104,322	34	604,031
					Form 990 (2014)

Form 99	0 (2014)			•	Pag	ge 12
Part	XI Reconciliation of Net Assets		_		•	
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>		<u> </u>	
1	Total revenue (must equal Part VIII, column (A), line 12)	_1_			-264	,562
2	Total expenses (must equal Part IX, column (A), line 25)	2				,507_
3	Revenue less expenses. Subtract line 2 from line 1	3				,069
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	_4_		1,104,322		
5	Net unrealized gains (losses) on investments	5				0
6	Donated services and use of facilities	6				0
7	Investment expenses	7				0
8	Prior period adjustments	8			28	3,716
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line)					
	33, column (B))	10			601	,537
Part	XII Financial Statements and Reporting					_
_	Check if Schedule O contains a response or note to any line in this Part XII . (())		<u> </u>	<u>. </u>	• •	
			_	'	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," exp	olain	ın			
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2	3		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were comp	iled	or		ļ	
	reviewed on a separate basis, consolidated basis, or both:					
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			_ _		
b	Were the organization's financial statements audited by an independent accountant?		. 21)		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	d on	a			
	separate basis, consolidated basis, or both:					
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			_		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over	ersig	ht		ŀ	
	of the audit, review, or compilation of its financial statements and selection of an independent accou			<u>- </u>		 ;
	If the organization changed either its oversight process or selection process during the tax year, ex	olain	ın			
	Schedule O.		.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	iorth	I			
	the Single Audit Act and OMB Circular A-133?	• •	· 3	a		✓_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not unde	rgo ti	he			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	Jaits.		_		
			F	orm	990	(2014)
	(\langle \rangle \cdot \rangle					
	V					

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

► 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

141110	or are organization					Employer identification	n number
VILL	AGE ART CLUB INC						02726
	Reason for Public Cha						ons.
The o	organization is not a private founda	ation because it i	s: (For lines 1 through	11, che	ck only or	ne box.)	
1	A church, convention of church	hes, or associati	on of churches descr	ibed in se	ection 17	'0(b)(1)(A)(i).	
2	☐ A school described in section	170(b)(1)(A)(ii).	(Attach Schedule E.)			^	
3	A hospital or a cooperative ho	spital service org	ganızation described i	n sectio i	170(b)(1)(A)(iii):	
4	A medical research organization	on operated in co	onjunction with a hosp	pital desc	ribed in s	section 170(b)(1)(A)	(iii). Enter the
	hospital's name, city, and stat	e:					
5	An organization operated for section 170(b)(1)(A)(iv). (Com		college or university	owned c	or operate	d by a government	tal unit described in
6	A federal, state, or local gover	nment or govern	mental unit described	l in sectio	on 170(b)	(τ)(Α)(ν).	
7	☐ An organization that normally						n the general public
	described in section 170(b)(1)			· ~	\bigcirc 5)		- 3 ,
8	☐ A community trust described i	n section 170(b)	(1)(A)(vi). (Complete	Part (D)			
9	An organization that normally			•)) from con	tributions members	thin fees and ares
	receipts from activities related						
	support from gross investme						
	acquired by the organization a						,,
10	☐ An organization organized and			<>>	-	•	
11	☐ An organization organized and		11015/				out the surpesse o
••	one or more publicly supported						
	the box in lines 11a through 11						
-	☐ Type i . A supporting organiz		· × (∨ / () · · · · ·	-		•	-
а	the supported organization(s						
	organization You must con			ot a majo	ority Of the	e directors or trastet	ss of the supporting
b	☐ Type II. A supporting organi		\sim \sim	nootion u	uth ito ou	nnorted organization	a(a) by baying
J	control or management of th						
	organization(s). You must co			ie same p	Jersons II	iai control or manaç	je trie supported
С	☐ Type III functionally integra			ted in cor	nection	with and functional	v integrated with
C	its supported organization(s)						y integrated with,
d	☐ Type III non-functionally in						and arganization(a)
u	that is not functionally integr	ated. The organi	zation generally must	perateu i	dictributi	on requirement and	an attentiveness
	requirement (see instructions						an attentiveness
_	☐ Check this box if the organiz	~ /					I. Type III
е	functionally integrated, or Ty						i, type iii
f	Enter the number of supported of	7	many magnator capp	orung or	94240		
g	Provide the following information	about the supp	orted organization(s)				· · [
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization	1	organization	(v) Amount of monetary	(vi) Amount of
	()	(, c	(described on lines 1–9	listed in you	ur governing	support (see	other support (see
			above or IRC section	docu	ment?	instructions)	instructions)
	\checkmark		(see instructions))	Yes	No		
	-		-				<u> </u>
A)							
D\			_		-		
B)							
<u>~\</u>							
C)				<u> </u>			
D)							
-, 							
E)							
-							

	(Complete only if you checked the				_	•	ality under
Coot:	Part III. If the organization fails to	quality unde	er the tests lis	stea below, p	lease comple	ete Part III.)	
	on A. Public Support 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.")	(a) 2010	(0) 2011	(0) 2012	(d) 2010	(6) 2014	(i) Total
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		Ò			· · · · · · · · · · · · · · · · · · ·	
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		$\mathcal{C}(\mathbb{Q})$				
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					· · · -	
12	Gross receipts from related activities, etc	(see instruction	ons)		· · · ·	12	
13	First five years. If the Form 990 is for the organization, check this box and stop-he	re	<u> </u>			ear as a sectio	
<u>Secti</u>	on C. Computation of Public Suppor						
14	Public support percentage for 2014 (line	6, column (f) d	ivided by line 1	1, column (f))		14	%
15	Public support percentage from 2013 Scr	nedule A, Part	II, IINE 14 .			15	<u>%</u>
16a	331/3% support test 2014 if the organization						
ı.	box and stop here. The organization qua						
	331/3% support test 2013. If the organ check this box and stop here. The organ	ization qualifie	s as a publicly	supported org	janization .		. ▶ 🗆
17a	10%-facts-and-circumstances test—2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization						
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizate Explain in Part VI how the organization m	tion meets the leets the "facts	e "facts-and-ci s-and-circums	rcumstances" tances" test. T	test, check th	is box and st	op here.
18	supported organization	d not check a		, 16a, 16b, 17a			

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

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.)

Secti	on A. Public Support						
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.")	7,189	9,795	4,541	3,381	2,963	27,869
2	Gross receipts from admissions, merchandise	,	,				
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose	175,140	157,941	206,968	171,016	197,219	908,284
3	Gross receipts from activities that are not an	170,140	107,541		171,010	137,213	300,204
	unrelated trade or business under section 513						
4	Tax revenues levied for the					5)	
•	organization's benefit and either paid				< <u> </u>		
	to or expended on its behalf						
5	The value of services or facilities						
•	furnished by a governmental unit to the			a	$\wedge \diamond$		
	organization without charge				2)		
•	_	400 000	467.706		474.007	200 100	000 450
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3	182,329	167,736	211,509	174,397	200,182	936,153
<i>1</i> a	received from disqualified persons .						
	, ,			-			
b	Amounts included on lines 2 and 3		4	(C).	-		
	received from other than disqualified persons that exceed the greater of \$5,000		ح(ز	\searrow			
	or 1% of the amount on line 13 for the year			>			
	•		(-)			-	
-	Add lines 7a and 7b		5,00			· · · · · · · · · · · · · · · ·	
8	Public support (Subtract line 7c from line 6.)					İ	
Caat:	line 6.)						936,153
	on B. Total Support	(a) 2010,	(h) 2011	(a) 2012	(4) 2012	(=) 0014	(6 Total
Galen 9	dar year (or fiscal year beginning in) Amounts from line 6		(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
		182,329	167,736	211,509	174,397	200,182	936,153
10a	Gross income from interest, dividends, payments received on securities loans, rents,				1		
	royalties and income from similar sources .	\ \					
_	· ·	628	-424	283	21,339	280	22,106
b	Unrelated business taxable income (less section 511 taxes) from businesses	PO(N)					
	acquired after June 30, 1975						
_	Add lines 10a and 10b	·					
C		628	-424	283	21,339	280	22,106
11	Net income from unrelated business activities not included in line 10b, whether						
	or not the business is regularly carned on						
40							
12	Other income. Do not include gain or		į	1		1	
	loss from the sale of capital assets (Explain in Part VI.)]]	ĺ	
12	Total support (Add, lines 9, 10c, 11,						
13	and 12.)	400.05	407.04	24.70	405 705	200 400	050 055
14	First five years. If the Form 990 is for the	182,957	167,312	211,792	195,736	200,462	958,259
	organization, check this box and stop he				•		
organization, check this box and stop here Section C. Computation of Public Support Percentage							
15	Public support percentage for 2014 (line 8	<u>~</u>		3 column (f))		15	97.69 %
16	Public support percentage from 2013 Sch		•			16	97.54 %
	on D. Computation of Investment In			<u> </u>	· · · · ·	1 .0 1	31.34 /0
17	Investment income percentage for 2014 (_	/ line 13 colum	n (fl)	17	2.31 %
18	Investment income percentage from 2013					18	2.46 %
19a	331/3% support tests—2014. If the organ						
130	17 is not more than 331/3%, check this box						
b	331/3% support tests—2013. If the organiz					_	
U	line 18 is not more than 331/3%, check this I						
20	Private foundation If the organization di			•	•		

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 and D, and Complete Part V.)

	Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete P	ait v	<u>·/</u>	
Secti	on A. All Supporting Organizations		V	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	Yes	No
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		
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		
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		
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		
С	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		
b	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? Substitutions only. Was the substitution the result of an event beyond the organization's control?	5b 5c		
6 6	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.	6		
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		
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		
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		
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		
C	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		
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			
b	organizations)? If "Yes," answer (b) below. Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	10a		
	determine whether the organization had excess business holdings.)	10b		<u></u>

Part	Supporting Organizations (continued)			г
11	Has the organization accepted a gift or contribution from any of the following persons?		Yes	No
а	Has the organization accepted a gift or contribution from any of the following persons? 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?	11a		İ
b	A family member of a person described in (a) above?	11b		
	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		
Section	on B. Type I Supporting Organizations		r	
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		Yes	No
•	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 lax year.			
2		1	\vdash	,
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(s) that operated, supervised, or controlled the supporting organization(s) that operated or			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Section	on C. Type II Supporting Organizations		,	
			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		
Section	on D. All Type III Supporting Organizations			
		لــــا	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		
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)		<u> </u>	<u> </u>
3	By reason of the relationship described in:(2), did the organization's supported organizations have a	2	 	
3	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		
Section	on 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 it	nstru	ctions	s):
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.		4	1
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (s	ee ins	tructio	ons).
2	Activities Test. Answer (a) and (b) below.	لـــــا	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.	05		لــــا
3	Parent of Supported Organizations. Answer (a) and (b) below.	2b		
a	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? Provide details in Part VI.	3a		Ε,
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b	1 1	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jani	zations	<u> </u>			
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete 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)	З					
4 Add lines 1 through 3	4	<u></u>				
5 Depreciation and depletion	5					
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	(())	<u> </u>			
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	⁄1à)				
b Average monthly cash balances	1b		<u> </u>			
c Fair market value of other non-exempt-use assets	1c	· -				
d Total (add lines 1a, 1b, and 1c)	1d					
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					
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4					
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5					
6 Multiply line 5 by .035	6					
7 Recoveries of prior-year distributions	7					
8 Minimum Asset Amount (add line 7 to line 6)	8					
Section C - Distributable Amount			Current Year			
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1					
2 Enter 85% of line 1	2					
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3					
4 Enter greater of line 2 or line 3 // \rightarrow	4					
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					
7 Check here if the current year is the organization's first as a non-functionall	y-in	tegrated Type III supportii	ng organization (see			

Part	Y Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organ	izations (continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish			
2	Amounts paid to perform activity that directly furthers exe			
	organizations, in excess of income from activity			_
3	Administrative expenses paid to accomplish exempt purp	ooses of supported orga	ınızatıons	
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.			
8	Distributions to attentive supported organizations to which	th the organization is res	sponsive	
	(provide details in Part VI). See instructions.	· ·		
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	<u> </u>	(1)	(((ii)	(iii)
Se	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2014	Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6	_	(//////////////////////////////////////	
2	Underdistributions, if any, for years prior to 2014		(2)	
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:	·		*****
b				
	1			
d				
<u>_</u>	From 2013			
<u>_</u>	Total of lines 3a through e	$\overline{}$		
.	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
i	Carryover from 2009 not applied (see instructions)		-	
<u>-</u> -	Remainder Subtract lines 3g, 3h, and 3ı from 3f.			
4	Distributions for 2014 from Section			
-	D, line 7'			
а	Applied to underdistributions of prior years			
<u>-</u> _	Applied to 2014 distributable amount		*	,
	Remainder. Subtract lines 4a and 4b from 4.)			
	Remaining underdistributions for years prior to 2014, if			
5	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
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			
	and 4c.			
8	Breakdown of line 7:			
а				
b				
С				
d	Excess from 2013			
e	Excess from 2014		-	***

Part VI	Page: 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 III, line 12. Also complete this part for any additional information. (See instructions.)
- -	
	(())
	<u> </u>
	Λ ((\))
	~ (V)
	$(\widehat{\mathcal{O}}/\widehat{\mathfrak{I}})$
	Δ
	······································
•	

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No 1545-0047

Inspection

2014 Open to Public

Name of the organization **VILLAGE ART CLUB INC** 71-0502726 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds 1 Total number at end of year 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part No line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area ☐ Protection of natural habitat Preservation of a certified historic structure ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a Total acreage restricted by conservation easements . · (0/13 2b Number of conservation easements on a certified historic structure included in (a) . . . Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax vear ▶ Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b 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 assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990. Part X . If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Revenue included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Part	III Organizations Maintaining	Collections of	Art, Hist	orical T	reasures	, or Ot	her Similar A	sse	ts (con	inu	ed)
3	collection items (check all that apply):										
а	☐ Public exhibition		d [] Loan	or exchang	je progr	rams				
b	b Scholarly research e Other										
С	☐ Preservation for future generations	5									
4	Provide a description of the organizat XIII.	tion's collections a	and expla	in how th	hey further	the org	anization's exe	empt	purpos	e in	Part
5	During the year, did the organization	solicit or receive	donations	s of art,	historical tr	reasures	s, or other sim	ilar			
	assets to be sold to raise funds rather		uned as p	art of the	e organizati	on's co	llection? .	•	☐ Yes		No
Part	IV Escrow and Custodial Arra		_			_	<u> </u>				
	Complete if the organization 990, Part X, line 21.					کہ	2		int on F	orm	l
1a	Is the organization an agent, trustee,				or contribut	ions or	other assets	not	_		
	included on Form 990, Part X?					$\cdot (\bigcirc)$)	•	∐ Yes	Ш	No
b	If "Yes," explain the arrangement in P.	art XIII and comple	ete the fol	lowing ta	able:	\ \(\)	- r	^ ~	nt		
						2) 	 	Amo	- Junit		
C	Beginning balance				· ·(OV)	<u> 1c</u>					
d	Additions during the year				(0)	1e					
e f	Distributions during the year Ending balance					1f	-				
2a	Did the organization include an amount		art X. lıne	21. for e	scrow or c		account liabili	tv?	☐ Yes		No
	If "Yes," explain the arrangement in P	art XIII. Check her	e if the ex	planation	n has been	provide	ed in Part XIII				
	V Endowment Funds.				•						
	Complete if the organization	answered "Yes"									
		(a) Current year	(b) Pric	r-yeár	(c) Two year	rs back	(d) Three years ba	ıck	(e) Four ye	ars b	ack
1a	Beginning of year balance	168,879		<u>177,941</u>		155,421	165,0	69		151	<u>,786</u>
b	Contributions	. 0	(2/2	0		0		0			0
С	Net investment earnings, gains, and	6,337]						
	losses	(6,337)	\sim	8,006	1	24,420	-1,5	$\overline{}$,885
d	Grants or scholarships			0		0	6,7	50		8	,300
е	Other expenditures for facilities and					اء					
	programs	0 0		15,418		1 000	4.5	38			<u>0</u> ,301
f	Administrative expenses	1,732		1,650 168,879		1,900 177,941	155,4	_			,301 ,070
g 2	End of year balance		nd halance					121		103	,010
a	Board designated or quasi-endowme			· (,, •••••••••	.,,					
b		√68 %	=								
c	Temporarily restricted endowment ▶	0 %									
_	The percentages in lines 2a, 2b, and 2	2c should equal 10	00%.								
3a	Are there endowment funds not in th	e possession of th	ne organiz	ation tha	at are held	and ad	ministered for	the	_		
	organization by:									es	No
	(i) unrelated organizations .								3a(i)	4	
	(ii) related organizations							•	3a(ii)	_	<u> </u>
b	If "Yes" to 3a(ii), are the related organ						· · · ·	•	3b		
4	Describe in Part XIII-the intended uses		on's endo	wment ti	unas.						
Part			" to Earn	- 000 E	art IV line	112 6	Soo Form 000	D.	ot V lin	~ 1 <i>C</i>	1
	Complete if the organization		1		or other basis		Accumulated		(d) Book v		,.
	Description of property	(a) Cost or of			other)		epreciation		(a) Book v	alue	
1a	Land		0		218,500					218	,500
b	Buildings		0		12,500		0			_12	,500
c	Leasehold improvements	·	0		21,751		0				<u>,751</u>
d	Equipment	•	0		21,278		17,051			4	,227
e	Other	.	0 0	(!	0 (D) (inc. 1)	<u></u>	0				0
Total.	Add lines 1a through 1e. (Column (d) r	nust equal Form 9	90, Part X	, columr	ו (ש), ווחפ _ַ 10	<i>JC.) .</i> .	▶			256	<u>,978</u>

	Complete if the organization	answered "Yes" to Fo	orm 990, Part IV, line	11b. See Form 990, I	art X. line 12.
	(a) Description of security or ca (including name of security	tegory	(b) Book value	(c) Method of vi Cost or end-of-year	aluation
(1) Financial	derivatives				·
(2) Closely-l	neld equity interests				
(3) Other					
(A)				, <u> </u>	
(B)	•••••••••••			, "	
(C)					
(D)					
·`(E)		•••••••			
· \- (F)				\sim	
(G)					_
(G) (H)					
	(A)	1 &			
	b) must equal Form 990, Part X, col (B) line 12			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ 	
Part VIII	Investments—Program Rel Complete if the organization		orm 990, Part IV, line	11c. See Form 990, F	Part X, line 13.
	(a) Description of investme	nt	(b) Book-value	(c) Method of v. Cost or end-of-year	
(1)					
(2)					
(3)					
(4)			1 (3		
(5)					
(6)		ζ,	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		
(7)		(6)	\'		
(8)		~ (V)	 		
(9)	hi must equal Form 000. Dort V and /Di line 13			 	
	b) must equal Form 990, Part X, col (B) line 13		<u> </u>		
Part IX	Other Assets.		000 5 1 11 / 11	44 0 5 000 5	
	Complete if the organization		orm 990, Part IV, line		
		(a) Description			(b) Book value
	Restricted Endeavor Fund	<u> </u>			54,674
	ently Restricted Endeavor Fund				118,810
(3)		(O) v			
(4)			· .		
(5)					
(6)					
(7)					··
(8)					
(9)					
Total. (Colu	mn (b) must equal Form, 990, Part	X, col. (B) line 15.)		•	173,484
Part X	Other Liabilities,		,		
	Complete if the organization	answered "Yes" to Fo	orm 990. Part IV. line	11e or 11f See Form	990 Part X
	line 25.	unowordu 100 1010	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	110 01 111. 000 1 01111	000,1 41174,
1.	(a) Description of liability	(b) Book value			<u>-</u>
(1) Federal ır		(-/			
(2)	ioomo taxoo				
(3)					
(4)					
(5)					
(6)					
(7)					
(7) (8)					
(7)					
(7) (8) (9) Fotal. (Column (l	b) must equal Form 990, Part X, col (B) line 25				
(7) (8) (9) Total. (<i>Column</i> (<i>l</i> 2. Liability for	b) must equal Form 990, Part X, col (B) line 25 r uncertain tax positions. In Part XIII, s liability for uncertain tax positions u	provide the text of the foot	tnote to the organization	's financial statements tha	t reports the

Part		e per Return.	•
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	\sim	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	(A)	
b	Other (Describe in Part XIII.)		
_c	Add lines 4a and 4b	3 · 4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) (())) 5	
Part		ises per N eturn.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities		
a			
b	Prior year adjustments		
C	Z		
d	()		
e	Add lines 2a through 2d	3	
3	Subtract line 2e from line 1	3	
4	Investment expenses not included on Form 990, Part VIII, line 70 4a		1
a			
b		4c	
С 5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	
	XIII Supplemental Information.		
Provid	le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b	and 2b: Part V. line 4:	Part X. line
	t XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional transfer of the complete the part to provide any additional transfer of the complete the part to provide any additional transfer of the complete the part to provide any additional transfer of the complete the part to provide any additional transfer of the complete the part to provide any additional transfer of the complete the part to provide any additional transfer of the complete the part to provide any additional transfer of the complete the complete the part to provide any additional transfer of the complete		
Sched	lule D, Part V, Line 4 - Permanent Funds are to fund Scholarships if operating funds do not cover. T	emporary Funds are for	
	pencies for management or buildings.		
.5111713			
	Λ		
	<u>//</u>		

SCHEDULEI (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

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

OMB No. 1545-0047

▶ Attach to Form 990.

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

2014	Open to Public Inspection
------	---------------------------

Employer identification number

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, **ջ** □ (h) Purpose of grant or assistance √ Yes 71-0502726 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance . Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation (book, FMV, appraisal, () other 9) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (e) Amount of non-cash assistance Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (d) Amount of cash grant 6 Enter total number of other organizations listed in the line 1 table (c) IRC section if applicable the selection criteria used to award the grants or assistance? For Paperwork Reduction Act Notice, see the Instructions for Form 990. General Information on Grants and Assistance (P) EIN 1 (a) Name and address of organization VILLAGE ART CLUB INC or government Part Part II Q € 9 12 Ξ 2 ල 0 9 8 9 5 (11)

Schedule I (Form 990) (2014)

Cat No. 50055P

Schedule I (Form 990) (2014)

(f) Description of non-cash assistance Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. (e) Method of valuation (book, FMV, appraisal, other) 0 (d) Amount of non-cash assistance Schedule I, Part I, Line 2 • Treasurer, Scholarship Committee and Board of Directors monitor grades 7,000 (c) Amount of cash grant Part III can be duplicated if additional space is needed. (b) Number of recipients (a) Type of grant or assistance 1 Scholarships Part IV Part III N က 4 Ŋ 9

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury

Form 990 or 990-EZ or to provide any additional information.

► 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. Internal Revenue Service Name of the organization **Employer identification number**

VILLAGE ART CLUB INC 71-0502726 Form 990, Part VI, Section A, Line 6 - The Village Art Club has approximately 120 members that pay annual dues. Form 990, Part VI, Section A, Line 7a - All members vote annually for all Directors and Officers Form 990, Part VI, Section A, Line 7b - Membership votes on all bylaw changes and elected positions Form 990, Part VI, Section B, Line 11b - Financial statements are received monthly with the tax return presented after filing. Form 990, Part VI, Section C, Line 19 - Each month a complete financial report is presented to both the Board and the general membership Form 990, Part IX, Line 11g - Non employee compensation to volunteers

Schedule O, Statement 1

Form 990

Page 2

Line Number: Part III Line 4d

VILLAGE ART ÇLUB INC 71-0502726

Other Program Services Accomplishments

Activity Code	Description	Expense	Grants	Revenue
	Promote the Arts and Artists	51,136	0	0
Total:		51,136	0	0

