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DLN: 93493077000056

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

▶ Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

Open to Public Inspection

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	ck if app		endar year, or tax year beginni C Name of organization	ng 07-01-2014 , and ending 06-30	2015		D Employ	yer ide	entification number
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	ırn/termı		308 E PRINCE STREET				(651)	292-	4381
_ Am	ended re	eturn	City or town, state or province, co SAINT PAUL, MN 55101	untry, and ZIP or foreign postal code			6 Cross ro	acounte	\$ 2,938,778
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			Melanie i dii Shannon Petti			subo	dinates?		Γ Yes Γ No
					н	l(b) Area		nates	┌ Yes 🗸 No
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3	2 (neck th	is box 🖣 — If the organization of	discontinued its operations or dispo	sea or m	ore than 2	5% OF ICS	песа	ssets
	3 N	umber	of voting members of the gover	rning body (Part VI, line 1a)				3	1
	4 N	umber	of independent voting members	s of the governing body (Part VI, lin	e 1b) .			4	14
7	5 To	otal nur	nber of individuals employed in	n calendar year 2014 (Part V, line 2	a) .			5	1.
ť				necessary)				6	2
				Part VIII, column (C), line 12 .				7a	(
	ЬN	et unrel	ated business taxable income	from Form 990-T, line 34			•	7b	
	0	Control	outlone and grants (Part VIII	line 1h)	H	Prio	r Year	6.5	Current Year
al				line 1h)		Prio	3,442,1	-	2,689,780
yenue	9	Progra	m service revenue (Part VIII,	line 2g)	[Prio	3,442,1 289,3	-	2,689,780 231,938
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Bloomington, MN 55435

Use Only

✓ Yes ☐ No

Part TV	Check	dist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Νo
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		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV^{\square}	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII"	11b	Yes	
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	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X^{\bullet}	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
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	Yes	
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		No
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? <i>If "Yes," complete Schedule J</i>	23		No
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		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
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		No
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? <i>If "Yes," complete Schedule L, Part II</i>	26		No
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? <i>If "Yes," complete Schedule L, Part III</i>	27		No
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		No
Ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
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? <i>If "Yes," complete Schedule R, Part I</i>	33		No
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		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
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		No
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	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			厂_
	Enterette number una stad in Bou 2 of Forms 1000 Faton 0 of not applicable 1 do 1		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 211 Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
٠	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	•	v	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Νo
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		Νo
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
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		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	טפ		
_	2. 105, to the business, and the organization menorm occorring in the first in the	5с		
	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		No
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).			
	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		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		Νo
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		Νo
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a			
	Form 1098-C?	7h		No
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		Νo
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		Νo
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		Νo
.0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club 10b			
ט	facilities			
1	Section 501(c)(12) organizations. Enter			
а	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)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		Νo
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		Νo
b	Enter the amount of reserves the organization is required to maintain by the states			
	in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	 		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
h	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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

Check if Schedule O contains a response or note to any line in this Part VI														. \to
---	--	--	--	--	--	--	--	--	--	--	--	--	--	-------

Se	ection 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			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		Νo
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		 No
6	Did the organization have members or stockholders?	6		No.
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
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		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
Ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ie Cod	e.)
	· · · · · · · · · · · · · · · · · · ·		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
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	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by			
 a	Independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	15a	Yes	
		15a	Yes	
Ь	• • •	130	1 65	
1	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
	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		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
			l	
	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		

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed►MN
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
 - Own website Another's website Upon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records ►Laura Zabel

308 E PRINCE STREET

SAINT PAUL, MN 55101 (651) 292-4381

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0 in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more pers	than on is	one bot	not box h ar or/tr	checker Highest compensated	ess er	(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
(1) Erık Takeshıta	2 00	х		х				0	0	0
Past President	0 00									
(2) Sally Sand Secretary	2 00	х		х				0	0	0
(3) Chris Kemp	1 00									
Director	0 00	Х						0	0	0
(4) Lisa Middag	1 00									
Director	0 00	Х						0	0	0
(5) Noel Nix	1 00					-				
Director	0 00	Х						0	0	0
(6) Fres Thao	1 00	x						0	0	0
Director	0 00	^						Ŭ	U	U
(7) Melanıe Full	1 00	.,		,,						
Co-President	0 00	X		X				0	0	0
(8) Laura Zımmermann	1 00							_	_	_
Treasurer	0 00	X		Х				0	0	0
(9) Susan T Schuster	1 00									_
Dırector	0 00	X						0	0	0
(10) Shannon Pettitt	1 00									
Co-President	0 00	Х		Х				0	0	0
(11) Anne Jin Soo Preston	1 00									
Director	0 00	Х						0	0	0
(12) Sheila Terryll	1 00									
Director	0 00	Х						0	0	0
(13) Mike Hoyt	1 00									
Director	0 00	X						0	0	0
(14) Laura Zabel	40 00									
Executive Director	0 00				Х			93,493	0	4,569

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

(A) Name and Title	(B) A verage hours per week (list any hours	more t perso	han d n is	ne l both	box, an d	heck unless officer stee)	į	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations

1b	Sub-Total	-		
C	Total from continuation sheets to Part VII, Section A	۲		
d	Total (add lines 1b and 1c)	۲	93,493	4,569

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►0

			Yes	No	
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee				
	on line 1a? If "Yes," complete Schedule I for such individual	3		Νo	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule I for such				
	ındıvıdual	4		Νo	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for				
	services rendered to the organization? If "Yes," complete Schedule I for such person	5		Νo	

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
	\\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.	

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►0

Part V	/##	Statement o	of Revenue ule O contains a respo	nce or note to any lim	o in this Bort VIII			
		Check it Sched	ule O Contains a respo	ise of flote to any in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
s	1a	Federated cam	paigns 1a					312 311
ants	ь	Membership du	ies 1b					
	c	Fundraising eve	ents 1c					
iffs, ar A	d	Related organiz	zations 1d					
Contributions, Gifts, Grants and Other Similar Amounts	e	Government grant	s (contributions) 1e	233,064				
io S. is	f		ons, gifts, grants, and 1f	2,456,716				
but the	_	Similar amounts no	ot included above ons included in lines					
n đ đ	g	1a-1f \$	ons included in lines					
Coni	h	Total. Add lines	s 1 a - 1 f		2,689,780			
e	_			Business Code				
Program Serwce Revenue	2a	Artist Consultations		711300	7,876	7,876		
22 <u>.</u>	b c	Contract Workshop Fiscal Sponsorship		711300	61,012	61,012		
7. 2.	d	Project Manageme		711300 711300	95,459 30,814	95,459 30,814		
ž	e	RAC Summit	····	711300	28,920	28,920		
gran	f	All other progra	am service revenue		7,857	7,857		
Š	g	Total. Add lines	s 2a-2f		231,938			
	3	Investment inc	ome (including dividen	ds, interest,				1.030
	4		ar amounts)	<u> </u>	1,839			1,83
	5	Royalties		▶	0			1
		,	(ı) Real	(II) Personal				
	6a	Gross rents						
	Ь	Less rental expenses						
	C	Rental income or (loss)						
	d	Net rental inco	me or (loss)		0			
	7a	Gross amount from sales of assets other	(ı) Securities	(II) Other				
	ь	than inventory Less cost or other basis and						
	c	sales expenses Gaın or (loss)						
	d	Net gain or (los	ss)		0			
in e	8a	events (not inc						
Rever		\$of contributions See Part IV , lir						
Other Revenue	Ь	less directev	penses b					
	c		(loss) from fundraising		0			
	9a		rom gaming activities ne 19					
	ь	less directev	penses b					
			(loss) from gaming acti		0			
	10a	Gross sales of returns and allo	owances .					
	Ь	Less costofa	a oods sold b					
			(loss) from sales of inv	entory 🛌	0			
		Miscellaneou	s Revenue	Business Code				
	11a	OtherIncome		711300	15,221	13,310		1,91
	b							
	C	A II - +1-						
	d e	All other reven Total. Add lines	ue s 11a-11d	▶				
	12				15,221			
		iotai revenue.	See Instructions .	•	2,938,778	245,248		3,75

orm	990 (2014)				Page 10
	Statement of Functional Expenses on 501(c)(3) and 501(c)(4) organizations must complete all columns All	other organizati	ons must comp	lete column (A)	
	Check if Schedule O contains a response or note to any line in this				<u></u>
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising
1	Grants and other assistance to domestic organizations and		expenses	general expenses	expenses
•	domestic governments See Part IV, line 21	1,488,957	1,488,957		
2	Grants and other assistance to domestic individuals See Part IV, line 22	2,040	2,040		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and				
	key employees	98,062	90,780	3,763	3,519
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			
7	Other salaries and wages	539,135	499,099	20,691	19,345
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0			
9	Other employee benefits	78,120	60,993	11,441	5,686
10	Payroll taxes	50,666	46,913	2,028	1,725
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	0			
c	Accounting	39,972	37,238	2,734	
d	Lobbying	0			
е	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	540,765	503,778	36,987	
12	Advertising and promotion	23,205	23,117	88	
L3	Office expenses	28,603	26,381	2,222	
L4	Information technology	0			
15	Royalties	0			
16	Occupancy	30,609	29,103	1,506	
۱7	Travel	57,848	50,490	7,358	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
L9	Conferences, conventions, and meetings	0			
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	21,333	17,408	3,925	_
23	Insurance	4,045	3,721	324	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	MISCELLANEOUS	52,340	52,011	329	
b	Printing and Publications	19,871	16,139	3,732	
c	TELECOMMUNICATION	16,401	15,712	689	
d	PROFESSIONAL DEVELOPMENT	5,509	5,509		
e	All other expenses	9,797	7,311	2,486	
25	Total functional expenses. Add lines 1 through 24e	3,107,278	2,976,700	100,303	30,275
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Cash-non-interest-beaming	Par	't X	Balance Sheet Check if Schedule O contains a response or note to any line in this Part X			
2 Savings and temporary cash investments 310,149 2 360,379						
3 Pledges and grants receivable, net 1.170,336 3 1.088,871 4 27,838 5 Losans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L S O O O O O O O O O		1	Cash-non-interest-bearing	1,321,096	1	670,220
4		2	Savings and temporary cash investments	310,149	2	360,379
Solution Solution		3	Pledges and grants receivable, net	1,170,939	3	1,068,871
September Sep		4	Accounts receivable, net	35,720	4	27,883
Capital and other receivables from other dissussified persons (as defined under section 4358 (6)(1)), persons described in section 4358 (c)(3)(8), and contributing employers and appoinsoring organizations of section 5018 (c)(9) voluntary employees' beneficiary organizations (see instructions) C emplete Part II of Schedule L		5	employees, and highest compensated employees Complete Part II of		_	
9 Prepaid expenses and deferred charges 24.759 9 12.024	s	6	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		5	
9 Prepaid expenses and deferred charges 24.759 9 12.024	क्				6	0
9 Prepaid expenses and deferred charges 24.759 9 12.024	8	7			7	0
10a		8	Inventories for sale or use		8	0
Part VI of Schedule D 10a 310,064 10b 228,573 73,744 10c 81,491 11 11 11 11 11 11 11		9	Prepaid expenses and deferred charges	24,759	9	12,024
11 Investments—publicly traded securities 11 0 0 12 Investments—other securities See Part IV, line 11 12 601,283 13 Investments—other securities See Part IV, line 11 13 0 0 14 10 13 0 0 14 10 15 14 10 15 15 1,963 15 1,963 15 1,963 15 1,963 15 1,963 15 1,963 16 2,624,114 16 16 16 16 16 16 16		10a				
12 Investments—other securities See Part IV, line 11 13 601.283 13 Investments—program-related See Part IV, line 11 13 601.283 14 Intangible assets 14 0 0 15 Other assets See Part IV, line 11 1.983 15 1.983 16 Total assets. Add lines 1 through 15 (must equal line 34) 2.998.370 16 2.824.114 17 Accounts payable and accrued expenses 38.269 17 92.513 18 Grants payable 18 19 19 Deferred revenue 19 20 Tax—exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 24 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities included on lines 17-24) Complete Part X of Schedule 29 26 Total liabilities. Add lines 17 through 25 967.408 26 849.256 27 Schad 1.444.566 28 1.428.433 28 Temporarily restricted net assets 29 29 Permanently restricted net assets 29 20 Capital stock or trust principal, or current funds 30 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 31 Total interastes or fund balances 1.970.962 33 1.974.858 32 Total interastes or fund balances 1.970.962 33 1.974.858 33 Total interastes or fund balances 1.970.962 33 1.974.858 34		Ь	Less accumulated depreciation	73,744	10c	81,491
13		11	Investments—publicly traded securities		11	0
14		12	Investments—other securities See Part IV, line 11		12	601,283
15		13	Investments—program-related See Part IV, line 11		13	0
16		14	Intangible assets		14	0
17		15	Other assets See Part IV, line 11	1,963	15	1,963
18 Grants payable		16	Total assets. Add lines 1 through 15 (must equal line 34)	2,938,370	16	2,824,114
19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 20 21 21 22 22 23 22 24 24 24 24		17	Accounts payable and accrued expenses	38,269	17	92,513
20 Tax-exempt bond liabilities		18	Grants payable		18	
21 Escrow or custodial account liability Complete Part IV of Schedule D		19	Deferred revenue		19	
22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		20	Tax-exempt bond liabilities		20	
24 Unsecured notes and loans payable to unrelated third parties	S.	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
24 Unsecured notes and loans payable to unrelated third parties	iiiie	22				
24 Unsecured notes and loans payable to unrelated third parties	qе		persons Complete Part II of Schedule L		22	
25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		23	Secured mortgages and notes payable to unrelated third parties		23	_
and other liabilities not included on lines 17-24) Complete Part X of Schedule D		24	Unsecured notes and loans payable to unrelated third parties		24	
26 Total liabilities. Add lines 17 through 25		25	and other liabilities not included on lines 17-24) Complete Part X of Schedule			
Organizations that follow SFAS 117 (ASC 958), check here and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets				<u> </u>		
lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets		26		967,408	26	849,256
33 Total net assets or fund balances	ي. طا		- · · · · · · · · · · · · · · · · · · ·			
33 Total net assets or fund balances	ĕ	27	- 1	526 396	27	546 425
33 Total net assets or fund balances	<u>8</u>			· · · · · · · · · · · · · · · · · · ·		
33 Total net assets or fund balances	<u> </u>			1,444,500		1,420,433
33 Total net assets or fund balances	Ĭ	29	,		29	
33 Total net assets or fund balances	Ē.		- · · · · · · · · · · · · · · · · · · ·			
33 Total net assets or fund balances	0	30			30	
33 Total net assets or fund balances	ě					
33 Total net assets or fund balances	455					
34 Total liabilities and net assets/fund balances	ਚ ਚ		- ,	1,970,962	33	1,974,858
	Ż	34		2.938.370	34	

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				F	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2.0	938,778	
2	Total expenses (must equal Part IX, column (A), line 25)					
		2		3,1	107,278	
3	Revenue less expenses Subtract line 2 from line 1	3		- 1	168,500	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	_				
_	4				970,962	
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities					
7	Investment average	6				
7	Investment expenses	7				
8	Prior period adjustments					
9	Other changes in net assets or fund balances (explain in Schedule O)	8				
9	Ctiler changes in het assets of fund balances (explain in Schedule O)	9		1	172,396	
10	10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))				1,974,858	
Par	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
				Yes	No	
1	Accounting method used to prepare the Form 990					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	ved or	1			
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes		
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separ basis, consolidated basis, or both	ate				
	▼ Separate basis					
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	t of th	e 2c	Yes		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	!	3a		No	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b			

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As Filed Data -

DLN: 93493077000056

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Total

Name of the organization

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.

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

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SPRIN	GBOAR	D FOR THE ARTS				41 1600402	
Do	rt I	Doncon for Dubli	a Charity C	Sature / All organisa	itions must complete this i	41-1690483	
							DIIS.
1	rigaiii	zation is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).					
	<u>'</u>	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)					
2	<u> </u>		· = '		<u>.</u>	\	
3				-	described in section 170(b)(1		· - · · · ·
4	Г	A medical research or hospital's name, city,		erated in conjunction v	with a hospital described in se	ction 170(b)(1)(A)(ii	i). Enter the
5	\sqcap			nefit of a college or uni	versity owned or operated by	a governmental unit d	escribed in
		section 170(b)(1)(A)					
6	Г	A federal, state, or loc	al governmen	t or governmental unit	described in section 170(b)(1)(A)(v).	
7	~				of its support from a governme		general public
	•	described in section 1	70(b)(1)(A)(v	vi). (Complete Part II)	•	,
8	Г	A community trust de					
9	\sqcap	An organization that n	ormally receiv	es (1) more than 331	1/3% of its support from contr	butions, membership	fees, and gross
		receipts from activitie	s related to it	s exempt functions—s	ubject to certain exceptions,	and (2) no more than :	331/3% of
		ıts support from gross	ınvestment ır	ncome and unrelated b	usiness taxable income (less	section 511 tax) fron	n businesses
		acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)					
10	Γ	An organization organ	ized and opera	ated exclusively to tes	t for public safety See sectio	n 509(a)(4).	
11		An organization organ	ized and opera	ated exclusively for the	e benefit of, to perform the fun	ctions of, or to carry o	out the purposes of
		. ,			section 509(a)(1) or section	` ,` ,	
_	\vdash				of supporting organization and r controlled by its supported o		
а	'				r elect a majority of the direct		
		organization You mus		- ,	- ·		o apporting
b	\sqcap	Type II. A supporting	organization s	upervised or controlle	d in connection with its suppo	orted organization(s),	by having control or
					same persons that control or i	manage the supported	organization(s) You
_	Г	must complete Part IV			on operated in connection with	and functionally into	aratod with its
С	,		_		mplete Part IV, Sections A, D		grated with, its
d	Γ		. , .	•	zation operated in connection		janization(s) that is
					st satisfy a distribution requir	ement and an attentiv	eness requirement
	_	(see instructions) You must complete Part IV, Sections A and D, and Part V.				TTT 6 t	
е	1	Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization					
f		Enter the number of supported organizations					
g		Provide the following i					
9				- m - m - m - m - m - m - m - m - m - m			
	(i)N	ame of supported	(ii) EIN	(iii) Type of	(iv) Is the organization	(v) A mount of	(vi) Amount of
		organization		organization	listed in your governing	monetary support	other support (see
				(described on lines	document?	(see instructions)	ınstructions)
				1-9 above or IRC			
				section (see			

Yes

No

Schedule A (Form 990 or 990-EZ) 2014 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do not 967,809 1,448,231 2,384,007 3,427,165 2,678,123 10,905,335 include any "unusual grants ") Tax revenues levied for the organization's benefit and either 0 paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 967,809 1,448,231 2,384,007 3,427,165 2,678,123 10,905,335 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 2,118,391 supported organization) included

amount shown on line 11, column
(f)

6 Public support. Subtract line 5 from line 4

Section B. Total Support Calendar year (or fiscal year (f) Total (a) 2010 **(b)** 2011 **(c)** 2012 (d) 2013 (e) 2014 beginning in) 🟲 967,809 1,448,231 2,384,007 3,427,165 2,678,123 10,905,335 Amounts from line 4 Gross income from interest, dividends, payments received on 5,009 2,538 2,538 298 1,839 securities loans, rents, royalties 12,222 and income from similar sources Net income from unrelated business activities, whether or 0 not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of 5,722 5,278 19,613 20,930 15,221 66,764 capital assets (Explain in Part VI) 11 Total support Add lines 7 10,984,321

12 Gross receipts from related activities, etc (see instructions)

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

Section C. Computation of Public Support Percentage

on line 1 that exceeds 2% of the

through 10

14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))

15 Public support percentage for 2013 Schedule A, Part II, line 14

 14
 80 000 %

 15
 75 390 %

12

16a 33 1/3% support test−2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

▶ ✓

b 33 1/3% support test—2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—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—2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

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

 $\vdash \Gamma$

...

Schedule A (Form 990 or 990-EZ) 2014 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11. and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 15

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))

16 Public support percentage from 2013 Schedule A, Part III, line 15

Section D. Computation of Investment Income Percentage

17 Investment income percentage from 2013 Schedule A, Part III, line 17

18 Investment income percentage from 2013 Schedule A, Part III, line 17

18

19a 33 1/3% support tests—2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

Se	ection A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
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		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	За		
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		
c	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.	3с		
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		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or $(2)^7$ 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?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
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 II 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? <i>If</i> "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		
L0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b		
l1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below,			
	the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		

c 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

Pa	rt IV Supporting Organizations (continued)			
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		
S	ection 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		
S	ection D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
S	ection 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 The organization satisfied the Activities Test Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government entity instructions.			
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3				
	a 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		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each		1 1	

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b

Part V - Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1	_	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All other
ype	[]	II 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)	3		
4	Add lines 1 through 3	4		
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		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
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

- **1** Adjusted net income for prior year (from Section A, line 8, Column A)
- 2 Enter 85% of line 1
- 3 Minimum asset amount for prior year (from Section B, line 8, Column A)
- 4 Enter greater of line 2 or line 3
- 5 Income tax imposed in prior year
- **6 Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)
- 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

	Current Year
1	
2	
3	
4	
5	
6	

Section D - Distributions	Current Year		
1 Amounts paid to supported organizations to accom			
2 Amounts paid to perform activity that directly furthexcess of income from activity	ported organizations, in		
3 Administrative expenses paid to accomplish exemp	ot purposes of supported org	anızatıons	
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	nured)		
6 Other distributions (describe in Part VI) See instru	JCTIONS		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide	
9 Distributable amount for 2014 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
		(::)	(:::)
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2014			
a From 2009			
b From 2010			
c From 2011			
d From 2012			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
A pplied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
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 3j and 4c			
8 Breakdown of line 7			
a From 2010			
b From 2011			
c From 2012			
d From 2013			

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation

Schedule A (Form 990 or 990-EZ) 2014

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DLN: 93493077000056

OMB No 1545-0047

Open to Public Inspection

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.

f the organization DARD FOR THE ARTS	Employer identification number						
JARD FOR THE ARTS		41-1690483					
Organizations Maintaining Donor Advious organization answered "Yes" to Form 990,		inds or Accou	nts. Complete if the				
_	(a) Donor advised funds	(b) Funds a	ind other accounts				
al number at end of year							
regate value of contributions to (during year)							
regate value of grants from (during year)							
regate value at end of year							
the organization inform all donors and donor advisor ds are the organization's property, subject to the org		or advised	┌ Yes ┌ No				
the organization inform all grantees, donors, and do d only for charitable purposes and not for the benefit ferring impermissible private benefit?			┌ Yes ┌ No				
Conservation Easements. Complete if t	e organization answered "Yes" to	Form 990. Par	t IV. line 7.				
pose(s) of conservation easements held by the orga Preservation of land for public use (e g , recreation of Protection of natural habitat Preservation of open space mplete lines 2a through 2d if the organization held a e	education) Preservation of an Preservation of a c	ertified historic s	tructure				
,		Held at	the End of the Year				
al number of conservation easements		2a					
al acreage restricted by conservation easements		2b					
mber of conservation easements on a certified histor	: structure included in (a)	2c					
nber of conservation easements included in (c) acqu coric structure listed in the National Register	ed after 8/17/06, and not on a	2d					
mber of conservation easements modified, transferre tax year 🛌	, released, extinguished, or terminated	d by the organizat	ion during				
nber of states where property subject to conservatio	easement is located 🕨						
es the organization have a written policy regarding th orcement of the conservation easements it holds?	periodic monitoring, inspection, hand	lling of violations,	and Yes No				
ff and volunteer hours devoted to monitoring, inspec	ng, and enforcing conservation easem	nents during the y	ear				
ount of expenses incurred in monitoring, inspecting,	nd enforcing conservation easements	during the year					
ount of expenses meaned in momeoring, inspecting,	g conservation easements						
es each conservation easement reported on line 2(d) section 170(h)(4)(B)(ii)?	above satisfy the requirements of sect	tion 170(h)(4)(B)	(ı) Yes No				
Part XIII, describe how the organization reports cons	ootnote to the organization's financial :						
organization's accounting for conservation easemen Organizations Maintaining Collections Complete if the organization answered "Ye	of Art, Historical Treasures, o	or Other Simil	ar Assets.				
the organization elected, as permitted under SFAS 11 ks of art, historical treasures, or other similar assets vice, provide, in Part XIII, the text of the footnote to	(ASC 958), not to report in its reven held for public exhibition, education, o	or research in furt					
he organization elected, as permitted under SFAS 11 ks of art, historical treasures, or other similar assets vice, provide the following amounts relating to these	6 (ASC 958), to report in its revenue s held for public exhibition, education, o	statement and bal					
Revenue included in Form 990. Part VIII. line 1		► \$					
·		F +					
·		► \$ <u> </u>					
ks of art, historical treasures, or other similar assets	held for public exhibition, education, o tems il treasures, or other similar assets foi	or research in furt ►\$ ►\$	heranc				

Revenue included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Part	TIT Organizations Maintaining Co	llections of Art,	, His	tori	cal T	<u>reasui</u>	res, or C	the	<u>r Similar A</u>	ssets	5 (con	tinued)
3	Using the organization's acquisition, accessi collection items (check all that apply)	on, and other record	ds, ch	ieck	any of	the follo	wing that	are a	significant us	e of it	S	
а	Public exhibition		d	Γ	Loan	or exch	ange prog	rams				
b	Scholarly research		e	Γ	Othe	r						
С	Preservation for future generations											
4	Provide a description of the organization's co Part XIII	llections and explai	ın hov	v the	y furth	er the o	rganızatıor	ı's ex	empt purpose	ı ın		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t	o be maintained as	part o	f the	organ	ızatıon's	s collection	۱?		Γ Y€	es	□ No
Par	Escrow and Custodial Arrange Part IV, line 9, or reported an am						answere	d "Y	es" to Form	990,		
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interme	dıary	forc	ontribi	utions o	rotherass	ets r	not	┌ Y	es	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follow	ving t	able		_					
									Α	moun	t	
С	Beginning balance							1c				
d	Additions during the year							1d				
е	Distributions during the year							1e				
f	Ending balance							1f				
2a b	Did the organization include an amount on Fo									⊢ Υ		∏ No
	If "Yes," explain the arrangement in Part XII rt V Endowment Funds. Complete i										. '	
Pa	Endowment Funds. Complete	(a)Current year		Prior					Three years back		our yea	ars back
1a	Beginning of year balance						•		•			
ь	Contributions											
С	Net investment earnings, gains, and losses											
d	Grants or scholarships							+				
e	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the curr	ent year end balanc	e (lın	e 1g	, colun	nn (a)) h	ield as					
а	Board designated or quasi-endowment ►											
b	Permanent endowment ►											
C	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c shou	ıld equal 100%										
За	Are there endowment funds not in the posses	sion of the organiza	ation t	that	are hel	d and a	dmınıstere	d for	the	_		
	organization by	_							_	-	Yes	No
	(i) unrelated organizations			•				•		1(i)		
b	(ii) related organizations								<u> </u>	(ii) 3b		
4	Describe in Part XIII the intended uses of th	•						•	· · ·	ן טכ		
	t VI Land, Buildings, and Equipme					n answ	rered 'Yes	' to	Form 990, F	art I\	√, lın	<u>——</u>
	11a. See Form 990, Part X, line 1								•		•	
	Description of property					or other estment)	(b)Cost or basis (otl		(c) Accumula depreciatio		(d) Bo	ok value
1a	Land											
b	Buildings		•									
	Leasehold improvements		•				19	8,678	150	,518		48,160
	Equipment		•									
е	O + h - m								1	1		22 221
	Other		•					1,386	1	3,055		33,331 81,491

Part VII Investments—Other Securities. Co	mplete if the organization	answered 'Yes' to Form 990, Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	▶ 601,283	3
Part VIII Investments—Program Related. C		
See Form 990, Part X, line 13.		_
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
		Cost of end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization	an answered 'Ves' to Form 00	
(a) Desc		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line	15.)	
Part X Other Liabilities. Complete if the org		
Form 990, Part X, line 25.		,
1 (a) Description of liability	(b) Book value	
Federal income taxes		
FISCAL SPONSORSHIP	756,743	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	▶ 756,743	
2 Labelle for an arrangement to Doub VIII many	de the toyt of the feeture to	l

Par	rt XI Reconciliation of Revenue per Audited Financial the organization answered 'Yes' to Form 990, Part IV,		ents With Revenue	per Re	turn Complete ıf		
1	Total revenue, gains, and other support per audited financial statem			1	1,610,560		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12						
а	Net unrealized gains (losses) on investments	2a					
b	Donated services and use of facilities	. 2b		1			
c	Recoveries of prior year grants	. 2c		1			
d	Other (Describe in Part XIII)	——		1			
e	Add lines 2a through 2d			2e			
3	Subtract line 2e from line 1			3	1,610,560		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1						
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a					
ь	Other (Describe in Part XIII)	. 4b	1,328,218	1			
c	Add lines 4a and 4b			4c	1,328,218		
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part	I, line 12)		5	2,938,778		
Part	rt XII Reconciliation of Expenses per Audited Financia			s per F	Return. Complete		
	ıf the organization answered 'Yes' to Form 990, Part IV						
1	Total expenses and losses per audited financial statements			1	3,107,278		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25						
а	Donated services and use of facilities	2	a	1 1			
b	Prior year adjustments	2	b				
С	Otherlosses	. 2	с	4			
d	Other (Describe in Part XIII)	2	d	1 1			
e	Add lines 2a through 2d			2e			
3	Subtract line 2e from line 1			3	3,107,278		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		•				
а	Investment expenses not included on Form 990, Part VIII, line 7b		a	4			
b	Other (Describe in Part XIII)	4	b	1 1			
C	Add lines 4a and 4b			4c			
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Par	t I, line 18)	5	3,107,278		
Par	rt XIII Supplemental Information						
Part	ovide the descriptions required for Part II, lines 3, 5, and 9, Part III, line rt V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2 ormation				e any additional		
	Return Reference Explanat	Explanation					
an ag	Springboards Fiscal Sponsorship Proorgant, trustee, custodian or other rmediary for contrib single project or event Small, unincomajority of program participants, the nonprofit with the state of Minnesota project in Minnesota Fiscally sponsostatus Copyright and ownership of indemnify Springboard from all relate	artists Mar on, though orporated g ugh many l Organizat ored projec ntellectual	y of our clients eventual many others just want a w roups founded by individuate taken the further stellons must either be base ts must be in compliance	goals in way to so ial artist ip of inco d in Mini with oui	clude becoming their blicit funds for a is make up the brporating as a nesota or producing a r federal tax-exempt		
amou	XI, Line 4b Other revenue Fiscal Sponsorship Activity \$13165 units included on 990 but not uded in F/S		Expense \$11657				

Jenedale 2 (1 31111 33 3) 23 13		i age S
Part XIII Supplemental Information	on (continued)	
Return Reference	Explanation	
l		
-		

Schedule D (Form 990) 2014

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -Schedule I

General Information on Grants and Assistance

Grants and Other Assistance to Organizations, Governments and Individuals in the United States OMB No 1545-0047

DLN: 93493077000056

Department of the Treasury Internal Revenue Service

(Form 990)

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Attach to Form 990. ► Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public **Inspection**

Name of the organization SPRINGBOARD FOR THE ARTS Employer identification number

41-1690483

the selection criteria used to aw Describe in Part IV the organiza	ard the grants or ass	istance?			_	•	✓ Yes
Part II Grants and Other As Form 990, Part IV, line	ssistance to Don	nestic Organizatio	ons and Domestic	Governments. Com			s" to
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

Enter total number of other organizations listed in the line 1 table

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

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Part III	Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
	Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference Explanation

Additional Data

Software ID: 14000265

Software Version: 2014v6.0

EIN: 41-1690483

Name: SPRINGBOARD FOR THE ARTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	` '	(f) Method of valuation (book, FMV, appraisal, other)	 (h) Purpose of grant or assistance
7th House Theater1006 W Lake Street 319 Minneapolis, MN 55408			16,436	0		
ACME708 1st St N G31 Minneapolis, MN 55401			14,133	0		
Alternative Motion5740 36th Ave S Minneapolis, MN 55417			10,150	0		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	` '	(f) Method of valuation (book, FMV, appraisal, other)	, , ,	(h) Purpose of grant or assistance		
Alzheimer Chorus Project501 S 2nd St Minneapolis, MN 55401			6,119	0					
Alzheimers Poetry Project 290 20th Street 1L Brooklyn,NY 11215			14,884	0					
Ancia Saxophone Quartet - C 308 Prince St Ste 270 St Paul, MN 55101			22,507	0					

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Ars Bellum Foundation1043 Grand Ave 313 St Paul, MN 55105			20,000	0					
Art ASAP Inc600 Sixth Avenue Des Moines, IA 50309			10,000	0					
Art Shanty Projects2932 Bryant Ave S Minneapolis, MN 55408	27-1457642		11,072	0					

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Artarıa Strıng Quartet980 Bellows Street St Paul, MN 55118			20,633	0					
Blue Ox Mını Golf1750 Hennepin Ave Mınneapolis, MN 55403			120,956	0					
Body Cartography3304 East 24th St Minneapolis, MN 55406			8,808	0					

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Bucket Brigade858 Juno Ave St Paul,MN 55102			8,776	0					
CATALYSTPO Box 18262 Minneapolis,MN 55418	57-4584428		65,884	0					
Celn Yollotl in Tlapizalli308 Prince St Ste 270 St Paul, MN 55101			71,333	0					

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Classical Actors Ensemble 3021 James Ave S 202 Minneapolis, MN 55408	27-2280819		12,693	0					
Como Pops3428 St Paul Ave Minneapolis, MN 55416			12,497	0					
Cracked Walnut308 Prince St Ste 270 St Paul, MN 55101			5,400	0					

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Creating Language Through the 318 N Moore St St Paul, MN 55104			12,762	0					
Danza Espanola Deborah Elias117 Mackubin St 5 St Paul, MN 55102	47-5846161		6,921	0					
Dial Group1930 Glenwood Avenue Minneapolis, MN 55405			9,050	0					

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Drawing Connections308 E Prince St St Paul, MN 55101	47-5088530		5,386	0					
Dream Songs Project30 West 22nd Street 105 Minneapolis, MN 55404			9,949	0					
Film in the City308 E Prince St St Paul,MN 55101			42,800	0					

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Flying Forms15 Elizabeth Street St Paul, MN 55107	38-2022532		25,054	0					
Four Humors Theatre3412 Harding Street NE Minneapolis, MN 55418	39-8989930		7,293	0					
Freshwater Theater308 E Prince St St Paul, MN 55101			7,627	0					

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	1	(f) Method of valuation (book, FMV, appraisal, other)		(h) Purpose of grant or assistance		
Holy Cow PressPO Box 3170 Mount Royal Statı Duluth, MN 55803			8,610	0					
Honeywell Concert Band308 Prince St Ste 270 St Paul, MN 55101			5,600	0					
Karen Sherman3112 10th Ave S Minneapolis,MN 55407			17,970	0					

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Kathy McTavish1748 Wildwood Rd Duluth, MN 55804			12,500	0					
Lazy Hmong Woman Prod275 4th St East Ste 482 St Paul, MN 55101			39,800	0					
Mad King Thomas308 E Prince St St Paul, MN 55101			11,876	0					

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Maggie Bergeron and Co127 Lexington Pkwy S 6 St Paul, MN 55105	47-4117579		5,984	0						
Magpies & Ravens308 Prince Street Ste 270 St Paul, MN 55101			9,018	0						
Making it Home Esther Malabel15 Westwood Drive South Golden Valley, MN 55416	54-8525675		5,379	0						

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	` '	(f) Method of valuation (book, FMV, appraisal, other)	1 107	(h) Purpose of grant or assistance		
Mama Mosaic4749 5th St NE Minneapolis,MN 55421			10,000	0					
Mixed Precipitation1422 Grand St NE Minneapolis, MN 55413	_		16,538	0					
MN Prison Writing Workshop 308 E Prince St St Paul, MN 55101			82,132	0					

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	1	(f) Method of valuation (book, FMV, appraisal, other)		(h) Purpose of grant or assistance		
Morgan Thorson & Co3112 10th Ave S Minneapolis, MN 55407			16,414	0					
Motion Poems38 North Oaks Road North Oaks,MN 55127	_		25,771	0					
New Arab Amer Theatre Works1501 S 4th St Minneapolis, MN 55454			10,044	0					

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Penelope Freeh308 E Prince St St Paul,MN 55101			20,196	0					
Poetry for People308 E Prince St St Paul, MN 55101			10,000	0					
Rachel Perlmeter Productions308 Prince St St Paul, MN 55101	,		6,299	0					

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Relics of the Plastic Age308 Prince St Ste 270 St Paul, MN 55101			15,408	0					
Rhythmically Speaking1395 Jessamine Ave W 106 St Paul, MN 55108			12,565	0					
Rosy Simas Danse2721 E 42nd St Minneapolis,MN 55406			52,726	0					

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Sally Rousse Unlimited308 Prince St Ste 270 St Paul, MN 55101			9,471	0						
Savage Umbrella3134 Lincoln Street NE Minneapolis, MN 55418	51-1024667		33,269	0						
Second Fiddle Productions 308 Prince Street Ste 270 St Paul, MN 55101			5,022	0						

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	1 , ,	(f) Method of valuation (book, FMV, appraisal, other)	''''	(h) Purpose of grant or assistance	
Sewtropolis4755 Chicago Ave S Minneapolis,MN 55407	_		8,000	0				
Show Biz Music Residency 308 Prince St Ste 270 St Paul, MN 55101	_		8,000	0				
Six Elements308 Prince St 270 St Paul, MN 55101	-		0	13,473				

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
Somalı A&C Museum1516 East Lake St Mınneapolis, MN 55407			19,229	0						
Speaking of Home111 Marquette Ave 2410 Minneapolis, MN 55401	15-8647775		35,647	0						
Spitting Image Collective 308 Prince St Ste 270 St Paul, MN 55101			7,442	0						

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
SunsetGun Productions2220 Grand Ave S Minneapolis, MN 55405			12,666	0					
Supergroup3435 10th Ave S Minneapolis, MN 55407	47-2151699		21,138	0					
T2P2810 W Lake St Minneapolis, MN 55408			10,000	0					

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	1	(f) Method of valuation (book, FMV, appraisal, other)		(h) Purpose of grant or assistance
The Baroque Room275 E 4th St 280 St Paul,MN 55101			22,004	0			
The Buoyant Group3247 Lyndale Ave S 105 Minneapolis, MN 55408			12,590	0			
The Ledge Gallery1916 3rd Ave S Minneapolis, MN 55404			9,840	0			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The Peoples Cook275 E 4th St Ste 457 St Paul, MN 55101			29,385	0			
The Third RailPO Box 96063 Portland, OR 97296			41,425	0			
Theatre Forever308 E Prince St St Paul,MN 55101			21,547	0			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Theatre Novi Most580 Rarig Center Minneapolis, MN 55454	47-4151764		6,665	0			
Tlainepantia Arts308 Prince St Ste 270 St Paul, MN 55101			5,439	o			
Wisdom Dances308 E Prince St St Paul,MN 55101			10,441	0			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	` '	(f) Method of valuation (book, FMV, appraisal, other)	'5'	(h) Purpose of grant or assistance
Wonderlust Productions 3419 Blaisdell Ave Minneapolis, MN 55408			12,825	0			

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As Filed Data -

DLN: 93493077000056

OMB No 1545-0047

2014

Open to Public Inspection

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

Name of the organization SPRINGBOARD FOR THE ARTS

Employer identification number

41-1690483

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 11b Form 990 Review Process	Full board of directors reviews both the 990 and audit and votes to approve before filing
Form 990, Part VI, Line 12c Explanation of Monitoring and Enforcement of Conflicts	Board & staff sign annual conflict of interest disclosure agreement. Full board of directo rs approves or denies board members & staff to act when there is a conflict of interest.
Form 990, Part VI, Line 15a Compensation Review & Approval Process - CEO, Top Management	The Executive Committee uses the MN Council of Nonprofits' salary & benefit survey to dete rmine comparable data and makes an annual recommendation
Form 990, Part VI, Line 15b Compensation Review and Approval Process for Officers and Key Employees	The Executive Committee uses the MN Council of Nonprofits' salary & benefit survey to dete rmine comparable data and makes an annual recommendation
Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	By request
Other Changes In Net Assets Or Fund Balances - Other Increases	Fiscal Sponsorship Activity = \$172396