Form **990-PF** 

## Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

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

Go to www.irs.gov/Form990PF for instructions and the latest information.

2017

| men   | al no        | Veriue Service  | 0.90                                  |                                       | dodono dna     | die idiest iiii | ATTITUDE OF ITS                                      | T Open to Public Inspection                  |
|---|--------------|---|---------------------------------------|---------------------------------------|----------------|-----------------|--|--|
| For   | a <u>len</u> | dar year 2017 or tax year beginning   |                                       |                                       | , and e        | nding           |  |  |
| Nar   | ne of        | foundation  | A Employer identification number      |                                       |                |                 |  |  |
|   |              |   |                                       |                                       |                |                 |  |  |
| ĮΡ  | RA           | IRIE CENTER OF THE ARTS   |                                       | 33-1078799                            |                |                 |  |  |
| Nun   | nber a       | nd street (or P O box number if mail is not delivered to street   | Room/suite                            | B Telephone number                    |                |                 |  |  |
| 1   | 41           | 2 S.W. WASHINGTON ST.   |                                       |                                       |                |                 | 309-673-55   | 89   |
| City  | or to        | own, state or province, country, and ZIP or foreign p   | ostal code                            |                                       |                |                 | C If exemption application is p                      | ending, check here                           |
| P   | EO:          | RIA, IL 61602   |                                       |                                       |                |                 |  | <b>J</b>                                     |
| G   | heck         | all that apply: Initial return  |                                       | nitial return of a fo                 | ormer public o | harity          | D 1. Foreign organizations                           | , check here                                 |
|   |              | Final return  |                                       | mended return                         | •              | _               | _ •  | ,  |
|   |              | Address change  |                                       | lame change                           |                |                 | Foreign organizations me<br>check here and attach co | eting the 85% test,                          |
| нС  | heck         | type of organization: X Section 501(c)(3) ex  |                                       |                                       |                | ~ · ·           | E If private foundation sta                          |  |
|   | _            |   |                                       | ble private founda                    | ation          | $\theta \Psi$   | under section 507(b)(1)                              |  |
| L Fa  |              | arket value of all assets at end of year   J   Accounts   |                                       |                                       | Accr           | rual            | F If the foundation is in a                          | • •  |
|   |              | · I   | her (speci                            |                                       |                |                 | under section 507(b)(1)                              | . [  |
| •   | \$           | 301, 452. (Part I, colum  |                                       |                                       | s.)            |                 |  | (D), check here                              |
| _   | irt I        | Analysis of Revenue and Expenses  |                                       | Revenue and                           |                | vestment        | (c) Adjusted net                                     | (d) Disbursements                            |
|   | <u></u>      | (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) |                                       | ises per books                        |                | owe             | income   | for charitable purposes<br>(cash basis only) |
|   | 1            | Contributions, gifts, grants, etc., received  |                                       | 19,065.                               |                |                 |  | (445.1 245.5 41.11)                          |
|   | 2            | Check If the foundation is not required to attach Sch B   |                                       | 13,003.                               |                |                 |  |  |
|   | 3            | Interest on savings and temporary   |                                       | 1,121.                                |                | 1,121.          | 1 121  | STATEMENT 1                                  |
|   | 4            | cash investments  Dividends and interest from securities  |                                       |                                       |                | <del></del>     | 1,121.   | DIATEMENT I                                  |
|   |              | Gross rents   |                                       |                                       |                |                 |  | <del></del>                                  |
|   |              |   |                                       |                                       |                |                 | <del> </del>   |  |
|   |              | Net rental income or (loss)   |                                       | <del></del>                           |                |                 |  |  |
| e   | ba           | Net gain or (loss) from sale of assets not on line 10<br>Gross sales price for all                      |                                       |                                       |                |                 |  |  |
| ē   | _ D          | assets on line 6a   |                                       |                                       |                |                 |  |  |
| Revenue                                     | 7            | Capital gain net income (from Part IV, line 2)  |                                       | · · · · · · · · · · · · · · · · · · · |                | 0.              |  |  |
| _   | 8            | Net short-term capital gain   | <b>-</b>                              |                                       |                | ,,,,,           | 0.   |  |
|   | 9            | Income modifications Gross sales less returns   | ļ                                     |                                       |                |                 |  |  |
|   | 10a          | and allowances  |                                       | 7                                     |                | <del></del>     |  |  |
|   |              | Less Cost of goods sold   | U                                     | <u> </u>                              |                |                 |  |  |
|   | C            | Gross profit or (loss)  Other process  MAY 2 4 201  | 3 181                                 |                                       |                |                 |  |  |
|   | 11           | Other income in a z zo it   |                                       | 1,132.                                |                | 0.              |  | STATEMENT 2                                  |
| <u> </u>                                    | 12           | Total Add lines 1 through 1-1   | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | 21,318.                               |                | <u>1,121.</u>   | 2,253.   |  |
| ì   | 13           | Compensation of officers, directors, trustees, etc.   |                                       | 0.                                    |                | 0.              | 0.   | 0.   |
| •   | 14           | Other employee salaries and wages   |                                       | 799.                                  |                | 0.              | 0.   | 799.   |
| . "   | 15           | Pension plans, employee benefits  |                                       | 57.                                   | <del></del>    | 0.              | 0.   | 57.  |
| še  |              | Legal fees  |                                       |                                       |                |                 |  |  |
| e e   | Ь            | Accounting fees STMT 3  |                                       | <u>1,830.</u>                         |                | 0.              | 0.   | 1,830.                                       |
| Expense                                     | C            | Other professional fees STMT 4  |                                       | 350.                                  |                | 0.              | 0.   | 350.   |
| and Administrative                          | 17           | Interest  |                                       |                                       |                |                 |  |  |
| rat   | 18           | Taxes STMT 5  |                                       | 57.                                   |                | 0.              | 0.   | 57.  |
| isi   | 19           | Depreciation and depletion  |                                       | 7,113.                                |                | 0.              | 0.   |  |
| <u> </u>                                    | 20           | Occupancy   |                                       |                                       |                |                 |  |  |
| , A   | 21           | Travel, conferences, and meetings   |                                       |                                       |                |                 |  |  |
| 멑   | 22           | Printing and publications   |                                       | _3,586.                               |                | 0.              | 0.   | 3,586.                                       |
| ğ   | 23           | Other expenses STMT 6   |                                       | 5,166.                                |                | 0.              | 0.   | 5,166.                                       |
| atir  | 24           | Total operating and administrative  |                                       |                                       |                |                 |  |  |
| Operating                                   |              | expenses. Add lines 13 through 23   |                                       | 18,958.                               |                | 0.              | 0.   | 11,845.                                      |
| 25 Contributions, gifts, grants paid 1,350. |              |   |                                       |                                       |                |                 |  | 1,350.                                       |
|   |              | Total expenses and disbursements.   |                                       |                                       | -              |                 |  | =,550  |
|   |              | Add lines 24 and 25   |                                       | 20,308.                               |                | 0.              | 0.   | 13,195.                                      |
|   | 27           | Subtract line 26 from line 12:  |                                       |                                       |                |                 |  |  |
|   | ŀ            | Excess of revenue over expenses and disbursements   |                                       | 1,010.                                |                |                 |  |  |
|   | i            | Net investment income (if negative, enter -0-)  | <u> </u>                              |                                       |                | 1,121.          |  |  |
|   |              | Adjusted net income (if negative, enter -0-)  | <u> </u>                              | -                                     |                | <u>+1+4+</u>    | 2,253.   | _  |
|   | <u> </u>     | Aujusteu net moonie (ii negative, enter -0-)  | L                                     |                                       |                |                 | 4,423.   |  |

| 0                                     |                                      | <u> </u>  |   |
|---------------------------------------|--------------------------------------|---|---|
| e                                     |                                      |   |   |
| Complete only for assets showing      | gain in column (h) and owned by      | the foundation on 12/31/69.                     | (I) Gains (Col. (h) gain minus                                |
| (i) FMV as of 12/31/69                | (j) Adjusted basis<br>as of 12/31/69 | (k) Excess of col. (i)<br>over col. (j), if any | còl. (k), but not less than -0-) or<br>Losses (from col. (h)) |
| a                                     |                                      |   |   |
| b                                     |                                      |   |   |
| C                                     |                                      |   |   |
| d                                     |                                      |   |   |
| e                                     |                                      |   |   |
| 2 Capital gain net income or (net cap | ortal loss) If gain, also ente       |   | 2   |

If (loss), enter -0- in Part I, line 8

Part V | Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

If gain, also enter in Part I, line 8, column (c).

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part.

Yes X No

| (a) Base period years Calendar year (or tax year beginning in) | (b)<br>Adjusted qualifying distributions | (c)<br>Net value of noncharitable-use assets | (d) Distribution ratio (col. (b) divided by col. (c)) |
|--|--|--|---|
| 2016   | 52,894.                                  | 274,722.                                     | .192536   |
| 2015   | 81,731.                                  | 274,350.                                     | .297908   |
| 2014   | 110,685.                                 | 64,168.                                      | 1.724925  |
| 2013   | 59,093.                                  | 13,892.                                      | 4.253743  |
| 2012   | 100,515.                                 | 13,415.                                      | 7.492732  |

Total of line 1, column (d)
 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years

4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5

5 Multiply line 4 by line 3

6 Enter 1% of net investment income (1% of Part I, line 27b)

7 Add lines 5 and 6

8 Enter qualifying distributions from Part XII, line 4
If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.
See the Part VI instructions.

 2
 13.961844

 3
 2.792369

 4
 271,304.

 5
 757,581.

 6
 11.

 7
 757,592.

8 20,933.

|    | 1990-PF (2017) PRAIRIE CENTER OF THE ARTS 33  rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948        |          | 078799<br>ee instri |             | Page 4   |   |
|----|--|----------|---------------------|-------------|----------|---|
|    | Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1.   | <u> </u> |                     |             |          |   |
|    | Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)  |          |                     |             |          |   |
| b  | Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%   | 1        |                     |             | 22.      |   |
|    | of Part I, line 27b  |          |                     |             | <u> </u> |   |
| C  | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).                    |          |                     |             |          |   |
|    | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)                                   | ,        |                     |             | 0.       |   |
|    | Add lines 1 and 2  |          |                     |             | 22.      |   |
| 4  | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)                                 | _        |                     |             | 0.       |   |
|    | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-  |          |                     |             | 22.      |   |
|    | Credits/Payments:  |          | _                   |             |          |   |
| а  | 2017 estimated tax payments and 2016 overpayment credited to 2017 6a 0.  |          |                     |             |          |   |
|    | Exempt foreign organizations - tax withheld at source 6b 0.  | ĺ        |                     |             |          |   |
|    | Tax paid with application for extension of time to file (Form 8868)  6c  0.  |          |                     |             |          |   |
|    | Backup withholding erroneously withheld 6d 0.  |          |                     |             |          |   |
|    | Total credits and payments. Add lines 6a through 6d  | 7        |                     |             | 0.       |   |
|    | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8   | 8        |                     |             | 0.       |   |
|    | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed  | 9        |                     |             | 22.      |   |
|    | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  | 0        |                     |             |          |   |
|    | Enter the amount of line 10 to be: Credited to 2018 estimated tax  |          |                     |             |          |   |
|    | rt VII-A Statements Regarding Activities   |          |                     |             | •        |   |
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in |          |                     | Yes         | No       |   |
|    | any political campaign?  |          | 1a                  |             | Х        |   |
| b  | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition | a        | 1b                  |             | Х        |   |
|    | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or                 |          |                     |             |          |   |
|    | distributed by the foundation in connection with the activities.   |          |                     |             |          |   |
| C  | Did the foundation file Form 1120-POL for this year?   |          | 1c                  |             | Х        |   |
|    | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:   |          |                     |             |          |   |
|    | (1) On the foundation. $\blacktriangleright$ \$ 0. (2) On foundation managers. $\blacktriangleright$ \$                                      |          |                     |             |          |   |
| е  | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation                  |          |                     |             |          |   |
|    | managers. ► \$ 0.  |          |                     |             |          |   |
| 2  | Has the foundation engaged in any activities that have not previously been reported to the IRS?  |          | 2                   |             | Х        |   |
|    | If "Yes," attach a detailed description of the activities.   |          |                     |             | _==_     |   |
| 3  | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or          |          |                     |             |          |   |
|    | bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes   |          | 3                   |             | X        |   |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year?  |          | 4a                  |             | X        |   |
|    |  | N/A      |                     |             |          |   |
|    | Was there a liquidation, termination, dissolution, or substantial contraction during the year?   | , -      | 5                   |             | X        |   |
|    | If "Yes," attach the statement required by General Instruction T.  |          |                     |             |          |   |
| 6  | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:  |          |                     |             |          |   |
|    | By language in the governing instrument, or  |          |                     |             |          |   |
|    | • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law     | i        | 1                   |             |          |   |
|    | remain in the governing instrument?  |          | 6                   | х           |          |   |
| 7  | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV            |          | 7                   | Х           |          |   |
|    |  |          |                     |             |          |   |
| 8a | Enter the states to which the foundation reports or with which it is registered. See instructions.   |          |                     |             |          |   |
|    | IL   |          |                     |             | 1        |   |
| b  | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)                  |          |                     |             |          |   |
| _  | of each state as required by General Instruction G? If "No," attach explanation  |          | 8ь                  | Х           |          |   |
| 9  | is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar      | ır       |                     | <del></del> |          | 1 |
| •  | year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV                                  | -        | 9                   | Х           |          | V |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses           |          | 10                  |             | X        | • |
|    |  |          | Form <b>99</b>      | )-PF        |          |   |

| Pa | rt VII-A Statements Regarding Activities (continued)   |     |            |        |
|----|--|-----|------------|--------|
|    |  | '   | Yes        | No     |
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of   |     |            |        |
|    | section 512(b)(13)? If "Yes," attach schedule. See instructions  | 11  |            | X      |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?                                       |     |            |        |
|    | If "Yes," attach statement. See instructions   | 12  |            | _X_    |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  | 13  | X          |        |
|    | Website address ► PRAIRIECENTEROFTHEARTS.BLOGSPOT.COM  |     |            |        |
| 14 | The books are in care of ► MICHELE J. RICHEY Telephone no. ► 309 – 67  |     | <u> 89</u> |        |
|    | Located at ► 1412 S.W. WASHINGTON ST., PEORIA, IL ZIP+4 ► 61   | 602 |            |        |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here  |     | ►          |        |
|    | and enter the amount of tax-exempt interest received or accrued during the year  | N   |            | •      |
| 16 | At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,   |     | Yes        | No     |
|    | securities, or other financial account in a foreign country?   | 16  |            | X      |
|    | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the   |     | -          |        |
| P  | foreign country  Art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required   | Щ.  |            |        |
|    | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.  |     | Yes        | No     |
| 1: | During the year, did the foundation (either directly or indirectly):   |     |            |        |
| ., | (1) Engage in the sale or exchange, or leasing of property with a disqualified person?   |     |            |        |
|    | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)  |     |            |        |
|    | a disqualified person?   |     |            |        |
|    | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?   |     |            |        |
|    | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?   | 1   | 1          |        |
|    | (5) Transfer any income or assets to a disqualified person (or make any of either available  |     |            |        |
|    | for the benefit or use of a disqualified person)?  |     |            |        |
|    | (6) Agree to pay money or property to a government official? (Exception. Check "No"  | ] ] | Ì          |        |
|    | If the foundation agreed to make a grant to or to employ the official for a period after   |     |            |        |
|    | termination of government service, if terminating within 90 days.)   |     |            |        |
|    | olf any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations  | 4.  |            | х      |
|    | section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions  Organizations relying on a current notice regarding disaster assistance, check here | 1b  |            |        |
|    | E Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected  |     |            |        |
| •  | before the first day of the tax year beginning in 2017?  | 1c  |            | X      |
| 2  | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation   |     |            |        |
|    | defined in section 4942(j)(3) or 4942(j)(5)):  |     |            |        |
| a  | At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning   |     |            |        |
|    | before 2017?   | 1   |            |        |
|    | If "Yes," list the years   |     |            |        |
| t  | Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect                                     |     |            |        |
|    | valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach   |     |            |        |
|    | statement - see instructions.)  N/A  | 2b  |            |        |
| •  | If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.  |     | ļ          |        |
| 0. | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time  |     |            |        |
| Ji | during the year?  Wes X No   |     |            |        |
|    | b If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after   |     |            |        |
| ٠  | May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose   |     |            |        |
|    | of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,   |     |            |        |
|    | Form 4720, to determine if the foundation had excess business holdings in 2017.)  N/A  | 3ь  |            |        |
| 48 | a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?  | 4a  |            | X      |
|    | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that   |     |            |        |
|    | had not been removed from jeopardy before the first day of the tax year beginning in 2017?   | 4b  |            | X      |
|    | r-   | QQN | DE         | 100471 |

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|--|------------------------------|---------------------------|
| Part VIII Information About Officers, Directors, Trustees, Foundar Paid Employees, and Contractors (continued)   |                              |                           |
| 3 Five highest-paid independent contractors for professional services. If none, enter  | "NONE."                      |                           |
| (a) Name and address of each person paid more than \$50,000  | (b) Type of service          | (c) Compensation          |
| NONE   | _                            |                           |
|  |                              |                           |
|  | _                            |                           |
|  |                              |                           |
|  | $\dashv$                     |                           |
|  |                              |                           |
|  | 7                            |                           |
|  |                              |                           |
|  |                              |                           |
| Total number of others receiving over \$50,000 for professional services   |                              | <u>▶</u> 0                |
| Part IX-A Summary of Direct Charitable Activities  |                              | <del></del>               |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statist number of organizations and other beneficiaries served, conferences convened, research papers prod | ical information such as the | Expenses                  |
| 1  |                              | <del></del>               |
| ·  |                              |                           |
| SEE STATEMENT 8  |                              | 20,307.                   |
| 2  |                              |                           |
|  |                              |                           |
|  |                              |                           |
| 3  |                              |                           |
|  |                              |                           |
| 4  |                              |                           |
|  |                              |                           |
|  |                              |                           |
| Part IX-B   Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on I   | lines 1 and 0                | A                         |
| 1 N/A  | ines i and 2.                | Amount                    |
| ·  |                              |                           |
|  |                              |                           |
| 2  |                              |                           |
|  |                              |                           |
|  |                              |                           |
| All other program-related investments. See instructions.   |                              |                           |
| 3  |                              |                           |
|  |                              |                           |
|  |                              |                           |
|  |                              |                           |
|  |                              |                           |
| Total. Add lines 1 through 3   | <b>&gt;</b>                  | 0.                        |
|  |                              | Form <b>990-PF</b> (2017) |

723561 01-03-18

| Part X Minimum Investment Return (All domestic foundations must complete this pair                            | rt. Foreign foundations, sec    | e instructions.)                       |
|---|---------------------------------|--|
| 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: |                                 | <u></u>                                |
| a Average monthly fair market value of securities   | 1a                              | 0.                                     |
| b Average of monthly cash balances  | 1b                              | 275,436.                               |
| c Fair market value of all other assets   | 1c                              |  |
| d Total (add lines 1a, b, and c)  | 1d                              | 275,436.                               |
| e Reduction claimed for blockage or other factors reported on lines 1a and                                    |                                 |  |
| 1c (attach detailed explanation)  | 0.                              |  |
| 2 Acquisition indebtedness applicable to line 1 assets  | 2                               | 0.                                     |
| 3 Subtract line 2 from line 1d  | 3                               | 275,436.                               |
| 4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)   | 4                               | 4,132.                                 |
| 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4        | 5                               | 271,304.                               |
| 6 Minimum investment return. Enter 5% of line 5   | 6                               | 13,565.                                |
| Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating              | g foundations and certain       |  |
| foreign organizations, check here   X and do not complete this part.)   | •                               |  |
| 1 Minimum investment return from Part X, line 6   | 1                               | <del></del>                            |
| 2a Tax on investment income for 2017 from Part VI, line 5   |                                 |  |
| b Income tax for 2017. (This does not include the tax from Part VI.)  |                                 |  |
| c Add lines 2a and 2b   | 2c                              |  |
| 3 Distributable amount before adjustments. Subtract line 2c from line 1                                       | 3                               |  |
| 4 Recoveries of amounts treated as qualifying distributions   | 4                               |  |
| 5 Add lines 3 and 4   | 5                               |  |
| 6 Deduction from distributable amount (see instructions)  | 6                               | <del></del>                            |
| 7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1          | 7                               |  |
| Part XII Qualifying Distributions (see instructions)  |                                 |  |
| 1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:                  |                                 |  |
| a Expenses, contributions, gifts, etc total from Part I, column (d), line 26                                  | 1a                              | 13,195                                 |
| b Program-related investments - total from Part IX-B  | 1b                              | 0.                                     |
| 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes   | 2                               | 7,738                                  |
| 3 Amounts set aside for specific charitable projects that satisfy the:  |                                 |  |
| a Suitability test (prior IRS approval required)  | 3a                              |  |
| <b>b</b> Cash distribution test (attach the required schedule)  | 3b                              |  |
| 4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4  | 4                               | 20,933                                 |
| 5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment                |                                 | ······································ |
| income. Enter 1% of Part I, line 27b  | 5                               | 0.                                     |
| 6 Adjusted qualifying distributions. Subtract line 5 from line 4  | 6                               | 20,933                                 |
| Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether   | the foundation qualifies for th |  |
| 4940(e) reduction of tax in those years.  | ,                               |  |

| Part XIII Undistributed Income (se  | ee instructions) | N/A                 |             |  |
|---|------------------|---------------------|-------------|--|
| · · · · · · · · · · · · · · · · · · ·   | (a)              | (b)                 | (c)         | (d)  |
|   | Corpus           | Years prior to 2016 | 2016        | 2017   |
| 1 Distributable amount for 2017 from Part XI,   |                  |                     |             |  |
| line 7  |                  |                     |             |  |
| 2 Undistributed income, if any, as of the end of 2017   |                  |                     |             |  |
| a Enter amount for 2016 only  |                  | <u> </u>            |             |  |
| b Total for prior years:  |                  |                     |             |  |
| ,,  |                  |                     |             |  |
| 3 Excess distributions carryover, if any, to 2017:  |                  |                     |             |  |
| a From 2012   |                  |                     |             |  |
| <b>b</b> From 2013  |                  |                     |             |  |
| <b>c</b> From 2014  |                  |                     |             |  |
| <b>d</b> From 2015  |                  |                     |             |  |
| e From 2016   |                  |                     |             |  |
| f Total of lines 3a through e   |                  |                     |             |  |
| 4 Qualifying distributions for 2017 from  |                  | 1                   |             |  |
| Part XII, line 4: ► \$  |                  |                     |             |  |
| a Applied to 2016, but not more than line 2a  |                  |                     |             | <u> </u>   |
| <b>b</b> Applied to undistributed income of prior   |                  |                     |             |  |
| years (Election required - see instructions)  | <del></del>      |                     |             | <u> </u>   |
| c Treated as distributions out of corpus  |                  |                     |             |  |
| (Election required - see instructions)  |                  |                     |             |  |
| d Applied to 2017 distributable amount  |                  |                     |             | ļ  |
| e Remaining amount distributed out of corpus  |                  |                     |             | <b> </b>   |
| 5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount |                  |                     | <del></del> | <u> </u>   |
| must be shown in column (a) )   |                  |                     |             |  |
| 6 Enter the net total of each column as   |                  |                     |             |  |
| indicated below:  |                  |                     |             |  |
| 2 Corpus Add lines 3f, 4c, and 4e Subtract line 5   |                  | -                   |             | <del> </del>                                     |
| b Prior years' undistributed income. Subtract   |                  |                     |             |  |
| line 4b from line 2b  |                  |                     |             |  |
| c Enter the amount of prior years' undistributed income for which a notice of                         |                  |                     |             |  |
| deficiency has been issued, or on which   |                  |                     |             |  |
| the section 4942(a) tax has been previously   |                  |                     |             |  |
| assessed  |                  | +                   |             | <del>                                     </del> |
| d Subtract line 6c from line 6b. Taxable  |                  |                     |             |  |
| amount - see instructions   |                  |                     |             | <del> </del>                                     |
| e Undistributed income for 2016. Subtract line  |                  |                     |             |  |
| 4a from line 2a. Taxable amount - see instr.  f Undistributed income for 2017. Subtract               |                  | <del></del>         |             | <del> </del>                                     |
| lines 4d and 5 from line 1. This amount must  |                  |                     |             |  |
| be distributed in 2018  |                  |                     |             |  |
| 7 Amounts treated as distributions out of   |                  | <del></del>         | -           | <del> </del>                                     |
| corpus to satisfy requirements imposed by   |                  |                     |             |  |
| section 170(b)(1)(F) or 4942(g)(3) (Election  |                  |                     |             |  |
| may be required - see instructions)   |                  |                     |             |  |
| 8 Excess distributions carryover from 2012  | <del></del>      |                     |             | <del> </del>                                     |
| not applied on line 5 or line 7   |                  |                     |             |  |
| 9 Excess distributions carryover to 2018.   |                  | <del></del>         |             |  |
| Subtract lines 7 and 8 from line 6a   |                  |                     |             |  |
| 10 Analysis of line 9:  | <del></del>      |                     |             | <del>                                     </del> |
| a Excess from 2013  |                  |                     |             |  |
| b Excess from 2014  |                  |                     |             |  |
| c Excess from 2015  |                  |                     |             |  |
| d Excess from 2016  |                  |                     |             |  |
| e Excess from 2017  |                  |                     |             |  |

3b | 0\_ Form **990-PF** (2017)

Total

723611 01-03-18

# Part XVI-A .Analysis of Income-Producing Activities

| Enter gross amounts unless otherwise indicated.              | Unrelate        | d business income |               | ded by section 512, 513, or 514 | (e)               |
|--|-----------------|-------------------|---------------|---------------------------------|-------------------|
| •  | (a)<br>Business | (b)               | (c)<br>Exclu- | (d)                             | Related or exempt |
| 1 Program service revenue:                                   | code            | Amount            | sion          | Amount                          | function income   |
| a APPLICATION FEES   | 900099          |                   |               |                                 | 150.              |
| b CLASS FEES   | 900099          |                   |               |                                 | 310.              |
| c ART SUPPLY SALES   | 900099          |                   |               |                                 | 172.              |
| d INDIVIDUAL DUES  | 900099          |                   |               |                                 | 500.              |
| e  | _               |                   |               |                                 | ·                 |
| f  | _               |                   |               |                                 |                   |
| g Fees and contracts from government agencies                |                 |                   |               |                                 |                   |
| 2 Membership dues and assessments                            |                 |                   |               |                                 |                   |
| 3 Interest on savings and temporary cash investments         |                 |                   | 14            | 1,121.                          |                   |
| 4 Dividends and interest from securities                     |                 |                   | +             |                                 |                   |
| 5 Net rental income or (loss) from real estate:              |                 |                   |               |                                 |                   |
| a Debt-financed property                                     |                 |                   |               |                                 | ,                 |
| b Not debt-financed property                                 |                 |                   |               |                                 |                   |
| 6 Net rental income or (loss) from personal                  |                 |                   |               |                                 |                   |
| property   |                 |                   |               | }                               |                   |
| 7 Other investment income                                    |                 |                   |               |                                 |                   |
| 8 Gain or (loss) from sales of assets other than inventory   |                 |                   |               |                                 |                   |
| 9 Net income or (loss) from special events                   |                 |                   |               |                                 |                   |
| 10 Gross profit or (loss) from sales of inventory            |                 |                   |               |                                 |                   |
| 11 Other revenue:  |                 |                   | 1 1           |                                 |                   |
| a  |                 | <u></u>           |               |                                 |                   |
| b  | _               |                   |               |                                 |                   |
| C  |                 |                   |               |                                 |                   |
| d  |                 | ·                 |               |                                 |                   |
| e  |                 |                   |               |                                 |                   |
| 12 Subtotal. Add columns (b), (d), and (e)                   |                 |                   | <u> </u>      | 1,121.                          | 1,132.            |
| 3 Total. Add line 12, columns (b), (d), and (e)              |                 |                   |               | 13                              | <u>2,253.</u>     |
| See worksheet in line 13 instructions to verify calculations | 5.)             |                   |               |                                 |                   |
|  |                 |                   |               |                                 |                   |

| Part XVI-B | Relationship of Activities to the Accomplishment of Exempt Purpose | 25 |
|------------|--|----|
|            |  |    |

| Line No.     | the foundation's exempt purposes (other than by providing funds for such purposes). |          |        |           |             |         | iii oi   |                |          |               |             |             |              |              |                         |
|--------------|---|----------|--------|-----------|-------------|---------|----------|----------------|----------|---------------|-------------|-------------|--------------|--------------|-------------------------|
|              | the fo  | undation | 's exe | mpt purpo | ses (oth    | er than | by provi | ding funds for | such pur | ooses).       |             |             |              |              |                         |
| <u>1A-</u> D | CASH  | IS I     | REC    | EIVE      | OT C        | SEI     | RVE      | VISITII        | NG AI    | RTISTS        | , WHICH     | IS          | A            | DIRECT       | <u> </u>                |
|              | CHAR  | TAB      | LE .   | ACTIV     | <b>/ITY</b> | OF      | THE      | FOUNDA         | OITA     | 1.            |             |             |              |              |                         |
|              |   |          |        |           |             |         |          |                |          |               |             |             |              |              |                         |
|              |   | _        |        |           |             |         |          |                |          |               |             |             |              | -            |                         |
|              |   |          |        |           |             |         |          |                | _        |               |             |             |              | ·            | <del></del>             |
|              | <del>                                     </del>                                    |          |        |           |             |         |          |                |          |               |             |             |              | <del> </del> | <del></del>             |
|              | <del>                                     </del>                                    |          |        |           |             |         |          |                |          | <del></del>   |             |             |              |              |                         |
|              | <del>                                     </del>                                    |          |        |           |             |         |          |                |          | <del></del> - | <del></del> |             |              |              |                         |
|              | <del> </del>  |          |        |           | _           |         |          |                |          |               |             |             |              |              | <del></del> -           |
|              | <del> </del>  | -        |        |           |             |         |          | ·              |          |               |             |             |              |              | <del></del>             |
|              | ļ. <del>.</del>   |          |        |           |             |         |          |                |          |               |             |             | <del>-</del> | <del></del>  |                         |
|              | <del>                                     </del>                                    |          |        |           |             |         |          |                |          |               |             |             |              |              |                         |
|              | ļ   |          |        |           |             |         |          |                |          |               | <del></del> |             |              |              |                         |
|              | ļ   |          |        |           |             | _       |          |                |          |               |             | <del></del> |              |              | <del></del>             |
|              | ļ   |          |        |           |             |         |          |                |          |               |             |             |              |              |                         |
|              | L   |          |        |           |             |         |          |                |          |               |             |             |              |              |                         |
|              | ļ   |          |        |           |             |         |          |                |          |               |             |             |              |              |                         |
|              | <u> </u>  |          |        |           |             | _       |          |                | _        |               |             |             |              |              |                         |
|              |   |          |        |           |             |         |          |                |          |               |             |             |              |              |                         |
|              |   |          |        |           |             |         |          |                |          |               |             |             |              |              |                         |
| 723621 01-0  | 3-18  |          |        |           |             |         |          |                |          |               |             | _           |              | Fo           | rm <b>990-PF</b> (2017) |

Form 990-PF (2017) PRAIRIE CENTER OF THE ARTS 33-1078799 Page 13 Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash 1a(1) X (2) Other assets 1a(2) **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) X (4) Reimbursement arrangements 1b(4) X (5) Loans or loan guarantees 1b(5) X (6) Performance of services or membership or fundraising solicitations 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described Yes X No in section 501(c) (other than section 501(c)(3)) or in section 527? If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/Aof perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge May the IRS discuss this return with the preparer shown below? See instr r (other than taxpayer) is based on all information of which preparer has any knowledge Sign Here PRESIDENT X Yes Signature of officer or trustee Date Title Check Print/Type preparer's name Date self- employed Paid SCOTT T. CARR 05/11/18 P00072158 SCOTT T. CARR Preparer Firm's name ► HEINOLD BANWART, LTD. Firm's EIN  $\triangleright$  37-1196235 Use Only

723622 01-03-18

Firm's address ► 201 CLOCK TOWER DRIVE, THIRD FLOOR EAST PEORIA, IL 61611-2449

(309)694-4251

## Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

**Schedule of Contributors** 

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

Name of the organization

Employer identification number

| P  | RAIRIE CENTER OF THE ARTS   | 33-1078799                     |  |  |  |  |  |  |
|--|---|--------------------------------|--|--|--|--|--|--|
| Organization type (check   | one):   |                                |  |  |  |  |  |  |
| Filers of:   | Section:  |                                |  |  |  |  |  |  |
| Form 990 or 990-EZ   | 501(c)( ) (enter number) organization   |                                |  |  |  |  |  |  |
|  | 4947(a)(1) nonexempt charitable trust not treated as a private foundation   | on                             |  |  |  |  |  |  |
|  | 527 political organization  |                                |  |  |  |  |  |  |
| Form 990-PF  | X 501(c)(3) exempt private foundation   |                                |  |  |  |  |  |  |
|  | 4947(a)(1) nonexempt charitable trust treated as a private foundation   |                                |  |  |  |  |  |  |
|  | 501(c)(3) taxable private foundation  |                                |  |  |  |  |  |  |
|  | is covered by the <b>General Rule</b> or a <b>Special Rule.</b><br>c)(7), (8), or (10) organization can check boxes for both the General Rule and a Sp  | pecial Rule. See instructions. |  |  |  |  |  |  |
| X For an organization  | on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions<br>by one contributor. Complete Parts I and II. See instructions for determining a coi  |                                |  |  |  |  |  |  |
| Special Rules  |   |                                |  |  |  |  |  |  |
| sections 509(a)(1<br>any one contribut   | For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II. |                                |  |  |  |  |  |  |
| year, total contrib  | For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III.   |                                |  |  |  |  |  |  |
| For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year |   |                                |  |  |  |  |  |  |
| but it must answer "No" o  | that isn't covered by the General Rule and/or the Special Rules doesn't file Sche<br>on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or<br>t the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).  |                                |  |  |  |  |  |  |

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization

Employer identification number

# PRAIRIE CENTER OF THE ARTS

33-1078799

| Part I     | Contributors (see instructions). Use duplicate copies of Part I if ac | dditional space is needed  |   |  |
|------------|---|----------------------------|---|--|
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                     | (c) Total contributions    | (d)<br>Type of contribution   |  |
| 1          | JOSEPH AND MICHELE RICHEY  1412 SW WASHINGTON ST  PEORIA, IL 61602    | \$15,000.                  | Person X Payroll  |  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                     | (c) Total contributions    | (d) Type of contribution  |  |
|            |   |                            | Person Payroll Noncash (Complete Part II for noncash contributions) |  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                     | (c)<br>Total contributions | (d) Type of contribution  |  |
|            |   |                            | Person Payroll Noncash (Complete Part II for noncash contributions) |  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                     | (c) Total contributions    | (d) Type of contribution  |  |
|            |   | <b>\$</b>                  | Person Payroll Oncash Complete Part II for noncash contributions )  |  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                     | (c) Total contributions    | (d) Type of contribution  |  |
|            |   | <b> \$</b>                 | Person Payroll Noncash (Complete Part II for noncash contributions) |  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                     | (c) Total contributions    | (d) Type of contribution  |  |
|            |   | <b>\$</b>                  | Person Payroll Oncash Complete Part II for noncash contributions )  |  |

176804\_1

Name of organization

Employer identification number

### PRAIRIE CENTER OF THE ARTS

33-1078799

| Part II                      | Noncash Property (see instructions). Use duplicate copies of P | art II if additional space is needed.           |                               |
|------------------------------|--|---|-------------------------------|
| (a)<br>No.<br>from<br>Part I | (b) Description of noncash property given                      | (c) FMV (or estimate) (See instructions.)       | (d)<br>Date received          |
|                              |  |   |                               |
|                              |  | \$  |                               |
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                     | (c) FMV (or estimate) (See instructions.)       | (d)<br>Date received          |
|                              |  | <u> </u>  |                               |
|                              |  | \$  |                               |
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                     | (c)<br>FMV (or estimate)<br>(See instructions.) | (d)<br>Date received          |
|                              |  |   |                               |
|                              |  | <b></b>   |                               |
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                     | (c)<br>FMV (or estimate)<br>(See instructions.) | (d)<br>Date received          |
|                              |  |   |                               |
| ·                            |  |   |                               |
|                              |  |   |                               |
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                     | (c) FMV (or estimate) (See instructions.)       | (d)<br>Date received          |
|                              |  |   |                               |
|                              |  | <u> </u>  |                               |
|                              |  | \$  |                               |
| (a)<br>No.<br>from           | (b)  Description of noncash property given                     | (c) FMV (or estimate) (See instructions.)       | (d)<br>Date received          |
| Part I                       |  | (See Instructions.)                             |                               |
|                              |  |   |                               |
|                              |  | •   |                               |
| 3453 11-01                   |  | Schedule B /Form                                | <br>990, 990-EZ, or 990-PF) ( |

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

(e) Transfer of gift

0. 1,830.

| FORM 990-PF INTEREST ON SAV                                  | INGS AND TE                  | MPORARY                     | CASH                         | INVESTMENTS                       | STATEMENT                     | 1                 |
|--|------------------------------|-----------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------|
| SOURCE   | REV                          | (A)<br>REVENUE<br>PER BOOKS |                              | (B)<br>INVESTMENT<br>INCOME       | (C)<br>ADJUSTED<br>NET INCOME |                   |
| CEFCU  |                              | 1,121.                      | -                            | 1,121.                            | 1,12                          | 21.               |
| TOTAL TO PART I, LINE 3                                      |                              | 1,121.                      |                              | 1,121.                            | 1,12                          | 21.               |
| FORM 990-PF  | OTHER                        | INCOME                      |                              |                                   | STATEMENT                     | 2                 |
| DESCRIPTION  |                              | (A)<br>REVENU<br>PER BOO    |                              | (B)<br>NET INVEST-<br>MENT INCOME |                               |                   |
| APPLICATION FEES CLASS FEES ART SUPPLY SALES INDIVIDUAL DUES | _                            |                             | 150.<br>310.<br>172.<br>500. | 0                                 | 3:<br>1:                      | 50.<br>10.<br>72. |
| TOTAL TO FORM 990-PF, PART I                                 | , LINE 11 =                  | 1                           | .132.                        | 0                                 | 1,13                          | 32.               |
| FORM 990-PF  | ACCOUNT                      | ING FEES                    | 3                            |                                   | STATEMENT                     | 3                 |
| DESCRIPTION  | (A)<br>EXPENSES<br>PER BOOKS | NET IN                      |                              |                                   |                               |                   |
| ACCOUNTING   | 1,830                        | •                           | 0                            | <u> </u>                          | 0. 1,83                       | 30.               |
|  |                              |                             |                              |                                   |                               | -                 |

0.

TO FORM 990-PF, PG 1, LN 16B 1,830.

5,166.

0.

| FORM 990-PF O   | THER PROFES   | SIONAL FEES                       | STATEMENT 4                      |   |  |
|---|---|-----------------------------------|----------------------------------|---|--|
| DESCRIPTION   | (A)<br>EXPENSES<br>PER BOOKS                                  | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME    | (D)<br>CHARITABLE<br>PURPOSES                                 |  |
| PT HELP   | 350.  | 0.                                | 0.                               | 350.  |  |
| TO FORM 990-PF, PG 1, LN 16C =  | 350.  | 0.                                | 0.                               | 350.  |  |
| FORM 990-PF   | TAXES   |                                   | STATEMENT                        |   |  |
| DESCRIPTION   | (A)<br>EXPENSES<br>PER BOOKS                                  | (B)<br>NET INVEST-<br>MENT INCOME |                                  | (D)<br>CHARITABLE<br>PURPOSES                                 |  |
| OTHER TAXES PAYROLL TAXES   | 32.<br>25.  | 0.                                | 0.                               | 32.<br>25.  |  |
| TO FORM 990-PF, PG 1, LN 18 =   | 57.   | 0.                                | 0.                               | 57.   |  |
| FORM 990-PF   | OTHER EXPENSES  |                                   | STATEMENT 6                      |   |  |
| DESCRIPTION   | (A)<br>EXPENSES<br>PER BOOKS                                  | (B)<br>NET INVEST-<br>MENT INCOME |                                  | (D)<br>CHARITABLE<br>PURPOSES                                 |  |
| MEMBERSHIP DUES INSURANCE POSTAGE, SHIPPING & DELIVERY MISCELLANEOUS TELEPHONE SUPPLIES RECEPTION EXPENSE COMPUTER EQUIPMENT RENTAL AND MAINTENANCE | 900.<br>1,463.<br>32.<br>15.<br>37.<br>1,600.<br>628.<br>188. | 0.<br>0.<br>0.<br>0.<br>0.<br>0.  | 0.<br>0.<br>0.<br>0.<br>0.<br>0. | 900.<br>1,463.<br>32.<br>15.<br>37.<br>1,600.<br>628.<br>188. |  |

5,166.

0.

TO FORM 990-PF, PG 1, LN 23

| FORM 990-PF OTHER LIABILITIES                          |                  | STATEMENT 7        |
|--|------------------|--------------------|
| DESCRIPTION  | BOY AMOUNT       | EOY AMOUNT         |
| ARTISTS DEPOSITS SALES TAX PAYABLE CREDIT CARD PAYABLE | 400.<br>1.<br>0. | 400.<br>0.<br>302. |
| TOTAL TO FORM 990-PF, PART II, LINE 22                 | 401.             | 702.               |
| FORM 990-PF SUMMARY OF DIRECT CHARITABLE A             | CTIVITIES        | STATEMENT 8        |

#### ACTIVITY ONE

VISITING ARTISTS AND GALLERY EXHIBITIONS PROGRAM: HOST RECEPTION FOR VISITING ARTIST; PROVIDE PUBLICITY FOR GALLERY EXHIBITIONS AND STIPEND FOR EXHIBITING ARTISTS; PROVIDE COMMUNITY PRINT SHOP TO TEACH CLASSES; 12 VISITING ARTISTS WERE RECEIVED IN 2017.

|                                   | EXPENSES  |     |  |
|-----------------------------------|-----------|-----|--|
| TO FORM 990-PF, PART IX-A, LINE 1 | 20,30     | 07. |  |
| FORM 990-PF PART XV - LINE 1A     | STATEMENT | 9   |  |

#### NAME OF MANAGER

MICHELE J. RICHEY JOSEPH RICHEY, JR.

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT 10

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

MICHELE J. RICHEY 1412 S.W. WASHINGTON ST. PEORIA, IL 61602

TELEPHONE NUMBER

309-673-5589

#### FORM AND CONTENT OF APPLICATIONS

INFORMATION SHOULD INCLUDE A DESCRIPTION OF THE AREA OF ART.

#### ANY SUBMISSION DEADLINES

NO APPLICATION DEADLINES FOR 2017.

### RESTRICTIONS AND LIMITATIONS ON AWARDS

AREAS OF ART ARE DRAWING, PAINTING, MIXED MEDIA, SCULPTURE, WRITERS, POETS, ARCHITECTS, PRINT SHOP, AND OTHERS ENGAGED IN THE USE OF THEIR CREATIVE INTELLECT.