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Form 990

Department of the TreasuryInternal 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 foundations)

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

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 07-01-2018 , and ending 06-30-2019

B Check if applicable

☒ Address change

☐ Name change

☐ Initial return

☐ Final return/terminated

☐ Amended return

☐ Application pending

C Name of organization

SPRINGBOARD FOR THE ARTS

Doing business as

Number and street (or P O box if mail is not delivered to street address)Room/suite

262 UNIVERSITY AVENUE WEST

City or town, state or province, country, and ZIP or foreign postal code

SAINT PAUL, MN 55103

D Employer identification number

41-1690483

E Telephone number

(651) 292-4381

G Gross receipts \$ 4,813,439

F Name and address of principal officer

NOEL NIX

308 PRINCE ST 270

ST PAUL, MN 55101

H(a) Is this a group return for subordinates?

☐ Yes☒ No

H(b) Are all subordinates included?

☐ Yes☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status

☒ 501(c)(3)☐ 501(c) () ◀(insert no)☐ 4947(a)(1) or☐ 527

J Website: ▶ WWW.SPRINGBOARDFORTHEARTS.ORG

K Form of organization☒ Corporation☐ Trust☐ Association☐ Other ▶

L Year of formation 1991

M State of legal domicile MN

Part I

Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities

TO CULTIVATE VIBRANT COMMUNITIES BY CONNECTING ARTISTS WITH THE SKILLS, INFORMATION, AND SERVICES THEY NEED TO MAKE A LIVING AND A LIFE

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a)

11

4 Number of independent voting members of the governing body (Part VI, line 1b)

11

5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)

18

6 Total number of volunteers (estimate if necessary)

66

7a Total unrelated business revenue from Part VIII, column (C), line 12

0

7b Net unrelated business taxable income from Form 990-T, line 34

0

Revenue

8 Contributions and grants (Part VIII, line 1h)

2,509,265

9 Program service revenue (Part VIII, line 2g)

316,979

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

2,475

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

765

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)

2,829,484

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)

1,084,406

14 Benefits paid to or for members (Part IX, column (A), line 4)

0

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)

978,080

16a Professional fundraising fees (Part IX, column (A), line 11e)

0

b Total fundraising expenses (Part IX, column (D), line 25) ▶214,348

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)

751,601

18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)

2,814,087

19 Revenue less expenses Subtract line 18 from line 12

15,397

Net Assets or Fund Balances

20 Total assets (Part X, line 16)

5,586,209

21 Total liabilities (Part X, line 26)

2,071,395

22 Net assets or fund balances Subtract line 21 from line 20

3,514,814

Prior Year

Current Year

Beginning of Current Year

End of Year

Part II

Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

Signature of officer

NOEL NIX, PRESIDENT

Date

2020-02-25

Print/Type preparer's name

Preparer's signature

Date 2020-02-25

Check ☐ if self-employed

PTIN P00046853

Firm's name ▶ CARPENTER EVERT & ASSOCIATES LTD

Firm's EIN ▶ 41-1534805

Firm's address ▶ 7760 FRANCE AVE S SUITE 940

Phone no (952) 831-0085

BLOOMINGTON, MN 55435

Paid Preparer Use Only

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2018)

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☒**1** Briefly describe the organization's mission

TO CULTIVATE VIBRANT COMMUNITIES BY CONNECTING ARTISTS WITH THE SKILLS, INFORMATION, AND SERVICES THEY NEED TO MAKE A LIVING AND A LIFE

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a	(Code)	(Expenses \$ 2,925,138	including grants of \$ 1,306,676)	(Revenue \$ 395,696)
See Additional Data				

4b	(Code)	(Expenses \$	including grants of \$	(Revenue \$)
See Additional Data				

4c	(Code)	(Expenses \$	including grants of \$	(Revenue \$)
See Additional Data				

(Code)	(Expenses \$	including grants of \$	(Revenue \$)
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OUR COMMUNITY DEVELOPMENT PROGRAM ORGANIZES AND EMPOWERS ARTISTS TO BUILD RECIPROCAL RELATIONSHIPS WITH THEIR COMMUNITIES, RESULTING IN VIBRANT, CREATIVE, EQUITABLE PLACES. WE PROVIDE CATALYTIC WORKSHOPS, TRAININGS AND PROJECT MANAGEMENT IN PARTNERSHIP WITH CITY GOVERNMENTS, NEIGHBORHOOD ORGANIZATIONS, PRIVATE INSTITUTIONS AND OTHER GROUPS THAT WISH TO ENGAGE ARTISTS IN COMMUNITY BUILDING, ECONOMIC DEVELOPMENT, CREATIVE PLACEMAKING AND INNOVATIVE PROBLEM-SOLVING BY ADDRESSING OPPORTUNITIES AND CHALLENGES ASSOCIATED WITH CHANGE LOCALLY IN MINNESOTA. WE ALSO CREATE CUSTOMIZABLE MODES FOR COMMUNITY COMMUNITIES NATIONALLY. IN FY19, WE DIRECTLY SUPPORTED OVER 60 ARTISTS TO IMPLEMENT PROJECTS OR ACTIVITIES, AND TRAINED (HALF DAY TO 2 DAY LONG WORKSHOPS) 150 ARTISTS IN COLLABORATION AND COMMUNITY DEVELOPMENT. THEIR PROJECTS THEMSELVES INVOLVED MORE ARTISTS AND VOLUNTEERS, AND TOUCHED THOUSANDS OF VIEWERS AND PARTICIPANTS. WE PRESENTED OUR STRATEGIES AND LEARNINGS TO OVER 700 COMMUNITY DEVELOPMENT PROFESSIONALS (APPROXIMATELY 25% ARTISTS) THROUGH CONFERENCE AND OTHER PRESENTATIONS. SPRINGBOARD FOR THE ARTS' NATIONAL PROGRAM INCLUDES CREATIVE EXCHANGE, AN ONLINE NETWORK OF SUPPORT FOR ARTISTS AND ARTS ORGANIZATIONS THROUGH REPLICATION TOOLKITS AND ARTIST PROJECT PROFILES. REPLICATION TOOLKITS INCLUDE SPRINGBOARD PROGRAMS SUCH AS WORK OF ART, GUIDES TO CREATIVE PLACEMAKING, COMMUNITY SUPPORTED ART, ARTISTS' HEALTH FAIR AND ARTIST-LED COMMUNITY DEVELOPMENT, AS WELL AS PARTNER TOOLKITS AROUND CREATIVE USE OF VACANT RETAIL SPACE, ARTIST-ENGAGED COMMUNITY PLANNING, RUNNING GALLERIES, PUBLIC ART, AND ARTIST-LED COMMUNITY PROJECTS. WE FACILITATE COMMISSIONING AND SUPPORT FOR NEW TOOLKITS THROUGH CREATIVE EXCHANGE. CREATIVE EXCHANGE ALSO FACILITATES BUILDING NETWORKS THROUGH ORGANIZING CONVENINGS AND SUPPORTING THE COMMISSION OF NEW TOOLKITS. SINCE ITS LAUNCH IN MARCH 2014, CREATIVE EXCHANGE HAS PUBLISHED OVER 390 ARTIST PROFILES & SPECIAL FEATURES, AND SHARED OVER 8,000 TOOLKITS. SPRINGBOARD OFFERS WORKSHOP INTENSIVES IN LEADING THE WORK OF ART. BUSINESS SKILLS FOR ARTISTS CURRICULUM AND IN ARTIST-LED COMMUNITY DEVELOPMENT PRACTICES AS PART OF THE NATIONAL PROGRAM, AND OFFERS SPEAKING, CONSULTING, AND WORKSHOPS NATIONALLY.

4d	Other program services (Describe in Schedule O)	(Expenses \$	including grants of \$	(Revenue \$)
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4e	Total program service expenses ▶	2,925,138
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Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1 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	No
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? If "Yes," complete Schedule D, Part 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	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	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	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		
a 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	No
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	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 Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a Yes	
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? If "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 Yes	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	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	
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

Part IV Checklist of Required Schedules (continued)

	Yes	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	No
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part I</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)		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a	No
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	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? <i>If "Yes," complete Schedule L, Part IV</i>	28c	No
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	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? <i>If "Yes," complete Schedule N, Part I</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? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	
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? <i>If "Yes," complete Schedule R, Part VI</i>	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 ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

	Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	188
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable 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		2a	18			
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				2b	Yes	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?				3a		No
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O				3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?				4a		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
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?				5b		No
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?				5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?				6a		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).						
a 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
b If "Yes," did the organization notify the donor of the value of the goods or services provided?				7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?				7c		No
d If "Yes," indicate the number of Forms 8282 filed during the year				7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?				7e		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?				7f		
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?				7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?				7h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?						
				8		
9a Did the sponsoring organization make any taxable distributions under section 4966?				9a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?				9b		
10 Section 501(c)(7) organizations. Enter						
a Initiation fees and capital contributions included on Part VIII, line 12				10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities				10b		
11 Section 501(c)(12) organizations. Enter						
a Gross income from members or shareholders				11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)				11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?						
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year				12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.						
a 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		
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				13b		
c Enter the amount of reserves on hand				13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?				14a		No
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O				14b		
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N				15		No
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O				16		No

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 ☒

Section A. Governing Body and Management

		Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	1a 11		
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	1b 11		
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		No
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			
a The governing body?	8a	Yes	
b 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

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	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	
b 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 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	15a Yes	
b Other officers or key employees of the organization	15b Yes	
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	No
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed **MN**

18 Section 6104 requires an organization to make its Form 1023 (or 1024-A 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**Check if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, 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) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JEROME RAWLS CO-PRESIDENT	2 00	X		X				0	0	0
(2) GRETA BAUER REYES DIRECTOR	1 00	X						0	0	0
(3) KELLY ASCHE TREASURER	2 00	X		X				0	0	0
(4) BEN BONESTROO DIRECTOR	1 00	X						0	0	0
(5) NOEL NIX CO-PRESIDENT	2 00	X		X				0	0	0
(6) AMELIA BROWN DIRECTOR	1 00	X						0	0	0
(7) REBEKAH CRISTANA DE YBARRA DIRECTOR	1 00	X						0	0	0
(8) LAURA ZIMMERMANN PAST PRESIDENT	2 00	X		X				0	0	0
(9) JEREMY B COHEN SECRETARY	2 00	X		X				0	0	0
(10) BO THAO-URABE DIRECTOR	1 00	X						0	0	0
(11) VA-MEGN THOJ DIRECTOR	1 00	X						0	0	0
(12) SARINA OTAIBI DIRECTOR	1 00	X						0	0	0
(13) LAURA ZABEL EX DIRECTOR	40 00			X				133,153	0	9,741

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

[illegible]

1b Sub-Total			
c Total from continuation sheets to Part VII, Section A			
d Total (add lines 1b and 1c)	133,153	0	9,741

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 1

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	No
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? <i>If "Yes," complete Schedule J for such individual</i>	4	No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

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 VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII ☐

Contributions, Gifts, Grants
and Other Similar Amounts

	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
1a Federated campaigns	1a			
b Membership dues	1b			
c Fundraising events	1c			
d Related organizations	1d			
e Government grants (contributions)	1e	120,631		
f All other contributions, gifts, grants, and similar amounts not included above	1f	4,288,404		
g Noncash contributions included in lines 1a - 1f \$				
h Total. Add lines 1a-1f		4,409,035		

Program Service Revenue

	Business Code				
2a PROJECT MANAGEMENT	711300	169,839	169,839		
b FISCAL SPONSORSHIP	711300	93,690	93,690		
c CONTRACT WORKSHOPS	711300	70,986	70,986		
d RESOURCE CTR	711300	21,528	21,528		
e CONSULTATION AND SPEAK	711300	15,739	15,739		
f All other program service revenue		23,914	23,914		
g Total. Add lines 2a-2f		395,696			

Other Revenue

3 Investment income (including dividends, interest, and other similar amounts)		2,398			2,398
4 Income from investment of tax-exempt bond proceeds					
5 Royalties					
6a Gross rents	(i) Real	(ii) Personal			
b Less rental expenses					
c Rental income or (loss)					
d Net rental income or (loss)					
7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
b Less cost or other basis and sales expenses					
c Gain or (loss)					
d Net gain or (loss)					
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18	a				
b Less direct expenses	b				
c Net income or (loss) from fundraising events					
9a Gross income from gaming activities See Part IV, line 19	a				
b Less direct expenses	b				
c Net income or (loss) from gaming activities					
10a Gross sales of inventory, less returns and allowances	a				
b Less cost of goods sold	b				
c Net income or (loss) from sales of inventory					
Miscellaneous Revenue	Business Code				
11a OTHER INCOME	711300	6,310			6,310
b					
c					
d All other revenue					
e Total. Add lines 11a-11d		6,310			
12 Total revenue. See Instructions		4,813,439	395,696	0	8,708

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX ☒**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	1,306,676	1,306,676		
2 Grants and other assistance to domestic individuals. See Part IV, line 22.				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.				
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.	142,894	118,408	12,017	12,469
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7 Other salaries and wages.	840,866	699,001	69,917	71,948
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).				
9 Other employee benefits.	119,424	95,942	11,821	11,661
10 Payroll taxes.	69,516	58,394	4,866	6,256
11 Fees for services (non-employees):				
a Management.				
b Legal.	1,703	1,648	55	
c Accounting.	17,420	16,853	567	
d Lobbying.				
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees.				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	377,417	365,127	12,290	
12 Advertising and promotion.	9,637	9,637		
13 Office expenses.	24,620	24,068	552	
14 Information technology.				
15 Royalties.				
16 Occupancy.	54,462	52,610	1,852	
17 Travel.	46,486	42,955	3,531	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.				
20 Interest.	1,630	1,238	392	
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	10,740	8,950	1,790	
23 Insurance.	10,433	1,713	8,720	
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):				
a CAPITAL CAMPAIGN EXPENSES	112,014			112,014
b MISCELLANEOUS	53,516	24,092	29,424	
c TELEPHONE AND COMMUNICATIONS	27,742	24,200	3,542	
d PRINTING AND COPYING	27,095	26,783	312	
e All other expenses	48,808	46,843	1,965	
25 Total functional expenses. Add lines 1 through 24e.	3,303,099	2,925,138	163,613	214,348
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part IX ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	1,135,623	1	2,627,515
	2 Savings and temporary cash investments	10,833	2	0
	3 Pledges and grants receivable, net	2,290,516	3	2,098,278
	4 Accounts receivable, net	58,789	4	98,999
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	28,731	9	51,047
	10a Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D	2,067,673		
	b Less: accumulated depreciation	305,056		
		1,552,697	10c	1,762,617
	11 Investments—publicly traded securities	507,057	11	509,417
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	1,963	15	1,963
	16 Total assets. Add lines 1 through 15 (must equal line 34)	5,586,209	16	7,149,836
Liabilities	17 Accounts payable and accrued expenses	63,097	17	97,752
	18 Grants payable		18	
	19 Deferred revenue	7,501	19	28,377
	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	1,505,827	23	1,503,583
	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 not included on lines 17 - 24). Complete Part X of Schedule D	494,970	25	497,071
	26 Total liabilities. Add lines 17 through 25	2,071,395	26	2,126,783
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	657,738	27	1,396,223
	28 Temporarily restricted net assets	2,857,076	28	3,626,830
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	3,514,814	33	5,023,053
	34 Total liabilities and net assets/fund balances	5,586,209	34	7,149,836

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,813,439
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,303,099
3	Revenue less expenses Subtract line 2 from line 1	3	1,510,340
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,514,814
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-2,101
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	5,023,053

Part XII Financial Statements and ReportingCheck 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 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
b Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
3a 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?		No
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Additional Data

Software ID:
Software Version:
EIN: 41-1690483
Name: SPRINGBOARD FOR THE ARTS

Form 990 (2018)

Form 990, Part III, Line 4a:

ARTIST RESOURCES -SPRINGBOARD FOR THE ARTS' ARTIST RESOURCES PROGRAMMING ENCOMPASSES PROFESSIONAL DEVELOPMENT RESOURCES FOR ARTISTS, ECONOMIC OPPORTUNITY PROGRAMS, ACCESS TO HEALTH AND LEGAL RESOURCES, AND PHYSICAL RESOURCE CENTERS IN FY19 WE CONTINUED TO BUILD THE CAPACITY OF OUR RESOURCE CENTER FOR ARTISTS, OFFERING COMPUTER WORKSTATIONS OUTFITTED WITH GRAPHIC AND SLIDE SCANNERS, ADOBE CREATIVE CLOUD, MICROSOFT OFFICE, A PUBLICATIONS LIBRARY, AND OTHER GRANT-MAKING AND OPPORTUNITIES DATABASES IN OUR ST PAUL RESOURCE CENTER, WE EXPANDED THE A/V CLOSET, A CONTINUED OFFERING FOR ARTISTS TO CHECK OUT ARTS TECHNOLOGY SUCH AS CAMERAS AND LIGHTS WE'VE CONTINUED OUR LEGAL REFERRAL SERVICE, CONNECTING 156 ARTISTS WITH ONE-ON-ONE ATTORNEY REFERRALS IN FY19 SPRINGBOARD FOR THE ARTS SUPPORTS ARTISTS' HEALTHCARE THROUGH SEVERAL PROGRAMS ARTISTS' ACCESS TO HEALTHCARE (AAH) REMOVES FINANCIAL AND SYSTEM NAVIGATION BARRIERS FOR ARTISTS AND THEIR FAMILIES AAH PROVIDES ARTISTS WITH VOUCHERS TO COVER THE COST OF MEDICAL, DENTAL AND MENTAL HEALTH SERVICES THROUGH VOUCHERS, MNSURE NAVIGATION, AND RESOURCE DISTRIBUTION, SPRINGBOARD OFFERED 2,038 HEALTHCARE REFERRALS IN FY19 THE EMERGENCY RELIEF FUND (ERF) PROVIDED SMALL MONETARY SUPPORT FOR 16 ARTISTS WHO HAVE CAREER-THREATENING EMERGENCIES OR TO USE THEIR ART TO RESPOND TO COMMUNITY EMERGENCIES IN FY19 SPRINGBOARD FOR THE ARTS' PROFESSIONAL DEVELOPMENT PROGRAMS SERVED 2,461 INDIVIDUAL ARTISTS AND COMMUNITY MEMBERS THROUGH WORKSHOPS, ONE-ON-ONE CONSULTING AND PARTICIPATION AT LEADING CONFERENCES BOTH LOCALLY AND NATIONALLY SPRINGBOARD FOR THE ARTS PRESENTED 97 WORKSHOPS ON BUSINESS SKILLS FOR ARTISTS AND PROFESSIONAL DEVELOPMENT, 190 INDIVIDUAL CONSULTATIONS, AND PRESENTED AT CONFERENCES LOCALLY AND NATIONALLY HIGHLIGHTING OUR CONTENT, ARTIST SERVICES, AND MISSION THROUGH A NEW PARTNERSHIP WITH AN INDEPENDENT MICROLENDING PLATFORM, SPRINGBOARD SUCCESSFULLY SUPPORTED SIX NEW ARTIST ENTREPRENEUR PROJECTS TO SECURE SMALL BUSINESS LOANS IN FY19, SPRINGBOARD FOR THE ARTS ALSO EXPANDED OUR POOL OF ARTIST CAREER CONSULTANTS AND WORK OF ART WORKSHOP FACILITATORS TO REACH BROADER COMMUNITIES, AUDIENCES AND PARTNERS

Form 990, Part III, Line 4b:

SPRINGBOARD FOR THE ARTS' INCUBATOR A FISCAL SPONSORSHIP PROGRAM PROVIDES FISCAL SPONSORSHIP FOR ARTS GROUPS AND INDIVIDUAL ARTIST PROJECTS THAT DO NOT WANT (OR ARE NOT READY) TO BECOME TAX-EXEMPT NONPROFIT ORGANIZATIONS IN FY19 WE MANAGED OVER \$1.3 MILLION IN REVENUES FOR THE 240 ARTIST-LED PROJECTS IN THE PROGRAM DURING THAT PERIOD

Form 990, Part III, Line 4c:

IN FY19 OUR FERGUS FALLS OFFICE PROVIDED PROFESSIONAL TRAINING AND CONSULTATIONS, A RESOURCE CENTER, LEGAL AND HEALTHCARE RESOURCES TO APPROXIMATELY 350 ARTISTS, AND COMMUNITY DEVELOPMENT TRAINING FOR 158 ARTISTS THROUGH ARTISTS ON MAIN STREET IN ADDITION, 18 ARTISTS IN OUR HINGE ARTS RESIDENCY PROGRAM REACHED APPROXIMATELY 740 COMMUNITY MEMBERS THROUGH PRESENTATIONS, EVENTS AND OUTREACH ACTIVITIES, AND THE YEAR OF PLAY PROJECT REACHED 472 COMMUNITY MEMBERS WE ALSO PROVIDED COMMUNITY DEVELOPMENT PRESENTATIONS AND WORKSHOPS TO APPROXIMATELY 950 COMMUNITY, STATE AND NATIONAL LEADERS

SCHEDULE A (Form 990 or 990-EZ)	Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ▶ Attach to Form 990 or Form 990-EZ. ▶ Go to www.irs.gov/Form990 for the latest information.	OMB No 1545-0047
		2018 Open to Public Inspection
Department of the Treasury Internal Revenue Service	Name of the organization SPRINGBOARD FOR THE ARTS	Employer identification number 41-1690483

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 12, check only one box)

- 1** ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2** ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ))
- 3** ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4** ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state _____
- 5** ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6** ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7** ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)
- 8** ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9** ☐ An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture See instructions Enter the name, city, and state of the college or university _____
- 10** ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 11** ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 12** ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g
- a** ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**
- b** ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
- c** ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
- d** ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
- e** ☐ 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 information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II

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

(Complete only if you checked the box on line 5, 7, 8, or 9 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 in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant ")	2,678,123	1,612,401	1,743,609	2,509,265	1,069,158	9,612,556
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	2,678,123	1,612,401	1,743,609	2,509,265	1,069,158	9,612,556
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						69,166
6	Public support. Subtract line 5 from line 4						9,543,390

Section B. Total Support							
Calendar year (or fiscal year beginning in) ►		(a)2014	(b)2015	(c)2016	(d)2017	(e)2018	(f)Total
7	Amounts from line 4	2,678,123	1,612,401	1,743,609	2,509,265	1,069,158	9,612,556
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,839	2,566	3,220	2,475	2,398	12,498
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	15,221	15,987	3,090	765	6,311	41,374
11	Total support. Add lines 7 through 10						9,666,428
12	Gross receipts from related activities, etc (see instructions)					12	1,364,249
13	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage		
14	Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14 98.730 %
15	Public support percentage for 2017 Schedule A, Part II, line 14	15 92.130 %
16a	33 1/3% support test—2018. 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 ▶ <input checked="" type="checkbox"/>	
b	33 1/3% support test—2017. 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 ▶ <input type="checkbox"/>	
17a	10%-facts-and-circumstances test—2018. 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 ▶ <input type="checkbox"/>	
b	10%-facts-and-circumstances test—2017. 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 ▶ <input type="checkbox"/>	
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>	

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 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 in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 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

15 Public support percentage for 2018 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2018 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2017 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2018. 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% support tests—2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

20 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 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>	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)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>	2	
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>	3a	
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>	3b	
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>	3c	
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>	4a	
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>	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)? <i>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.</i>	4c	
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>	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 (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>	6	
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>	7	
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>	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))? <i>If "Yes," provide detail in Part VI.</i>	9a	
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>	9b	
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>	9c	
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>	10a	
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>	10b	

Part IV

Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI</i>		

Section 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? <i>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.</i>		
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? <i>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.</i>		

Section 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)? <i>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).</i>		

Section 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, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section 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 instructions)		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
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? <i>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.</i>		
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? <i>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.</i>		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
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? <i>Provide details in Part VI.</i>		
b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations			
1 <input type="checkbox"/> Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.			
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	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	
a	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			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Part V

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2018 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-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2018			
a From 2013.			
b From 2014.			
c From 2015.			
d From 2016.			
e From 2017.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2018 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
6 Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
7 Excess distributions carryover to 2019. Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2014.			
b Excess from 2015.			
c Excess from 2016.			
d Excess from 2017.			
e Excess from 2018.			

Additional Data

Software ID:
Software Version:
EIN: 41-1690483
Name: SPRINGBOARD FOR THE ARTS

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

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.
► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization
SPRINGBOARD FOR THE ARTS

Employer identification number
41-1690483

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?

☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education)

☐ Preservation of an historically important land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►

4 Number of states where property subject to conservation easement is located ►

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included on Form 990, Part VIII, line 1

► \$

(ii) Assets included in Form 990, Part X

► \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1

► \$

b Assets included in Form 990, Part X

► \$

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . .

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

☐

Part V

Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a)Current year	(b)Prior year	(c)Two years back	(d)Three years back	(e)Four years back
1a	Beginning of year balance				
b	Contributions				
c	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 current year end balance (line 1g, column (a)) held as

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶

c

Temporarily restricted endowment ▶

The percentages on lines 2a, 2b, and 2c should equal 100%

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i)

unrelated organizations

(ii)

related organizations

b

If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		
3a(ii)		
3b		

4

Describe in Part XIII the intended uses of the organization's endowment funds

Part VI

Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land			
b	Buildings	1,730,778		1,730,778
c	Leasehold improvements	198,678	185,128	13,550
d	Equipment	138,217	119,928	18,289
e	Other			
Total.	Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶			1,762,617

Schedule D (Form 990) 2018

Part VII

Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b.
See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) ▶		

Part VIII

Investments—Program Related.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. 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
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) ▶		

Part IX

Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) ▶	

Part X

Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f.
See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
FISCAL SPONSORSHIP	497,071	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	497,071	

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

☒

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	3,515,762
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	11,100
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	11,100
3	Subtract line 2e from line 1	3	3,504,662
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	1,308,777
c	Add lines 4a and 4b	4c	1,308,777
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	4,813,439

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	2,007,523
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	11,100
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	11,100
3	Subtract line 2e from line 1	3	1,996,423
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	1,306,676
c	Add lines 4a and 4b	4c	1,306,676
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	3,303,099

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 41-1690483
Name: SPRINGBOARD FOR THE ARTS

Supplemental Information

Return Reference	Explanation
PART IV, LINE 1B	SPRINGBOARDS FISCAL SPONSORSHIP PROGRAM IS DESIGNED TO BE AN INCUBATOR FOR SMALL ARTS AND CULTURAL ORGANIZATIONS FOUNDED BY INDIVIDUAL ARTISTS. MANY OF OUR CLIENTS' EVENTUAL GOALS INCLUDE BECOMING THEIR OWN SEPARATE TAX-EXEMPT ORGANIZATION, THOUGH MANY OTHERS JUST WANT A WAY TO SOLICIT FUNDS FOR A SINGLE PROJECT OR EVENT. SMALL, UNINCORPORATED GROUPS FOUNDED BY INDIVIDUAL ARTISTS MAKE UP THE MAJORITY OF PROGRAM PARTICIPANTS, THOUGH MANY HAVE TAKEN THE FURTHER STEP OF INCORPORATING AS A NONPROFIT WITH THE STATE OF MINNESOTA. ORGANIZATIONS MUST EITHER BE BASED IN MINNESOTA OR PRODUCING A PROJECT IN MINNESOTA. FISCALLY SPONSORED PROJECTS MUST BE IN COMPLIANCE WITH OUR FEDERAL TAX-EXEMPT STATUS. COPYRIGHT AND OWNERSHIP OF INTELLECTUAL PROPERTY REMAIN WITH THE ARTISTS, AND THEY MUST INDEMNIFY SPRINGBOARD FROM ALL RELATED LIABILITY.

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	<p>SPRINGBOARD HAS A TAX-EXEMPT STATUS UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND HAS ADOPTED ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, ASC 740-10 SPRINGBOARDS POLICY IS TO EVALUATE UNCERTAIN TAX POSITIONS, AT LEAST ANNUALLY, FOR THE POTENTIAL FOR INCOME TAX EXPOSURE FROM UNRELATED BUSINESS INCOME OR FROM LOSS OF NONPROFIT STATUS SPRINGBOARD C</p> <p>ONTINUES TO OPERATE CONSISTENT WITH ITS ORIGINAL EXEMPTION APPLICATION AND EACH YEAR TAKES THE NECESSARY ACTIONS TO MAINTAIN ITS EXEMPT STATUS IT HAS BEEN CLASSIFIED AS AN ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION UNDER THE INTERNAL REVENUE CODE AND CHARITABLE CONTRIBUTIONS BY DONORS ARE TAX DEDUCTIBLE</p>

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS	FISCAL AGENCY SPONSORSHIP ACTIVITY

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS	FISCAL AGENCY SPONSORSHIP ACTIVITY

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d)
		(event type)	(event type)	(total number)	Total events (add col (a) through col (c))
Revenue	1 Gross receipts				
	2 Less Contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				
	11 Net income summary Subtract line 10 from line 3, column (d) ▶				

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization conducts gaming activities _____

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain _____

11 Does the organization conduct gaming activities with nonmembers?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
13 Indicate the percentage of gaming activity conducted in					
a The organization's facility	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 100px; text-align: center;">13a</td><td style="width: 100px; text-align: center;">%</td></tr><tr><td style="text-align: center;">13b</td><td style="text-align: center;">%</td></tr></table>	13a	%	13b	%
13a	%				
13b	%				
b An outside facility					

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ►

Address ►

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____

c If "Yes," enter name and address of the third party

Name ►

Address ►

16 Gaming manager information

Name ►

Gaming manager compensation ► \$

Description of services provided ►

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Return Reference

Explanation

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I
(Form 990)

Department of the
Treasury
Internal Revenue Service

Name of the organization
SPRINGBOARD FOR THE ARTS

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

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Open to Public
Inspection

Employer identification number
41-1690483

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶

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

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on 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) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

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
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Additional Data

Software ID:
Software Version:
EIN: 41-1690483
Name: SPRINGBOARD FOR THE ARTS

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

[illegible]

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MINNEAPOLIS SOUTHSIDE SINGERS 5212 41ST AVE S MINNEAPOLIS, MN 55417							FISCAL AGENT ACTIVITY
POETRY FOR PEOPLE 308 E PRINCE ST ST PAUL, MN 55101			12,500				FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DEEPASHIKA 120 DIAMOND LAKE ROAD MINNEAPOLIS, MN 55419							FISCAL AGENT ACTIVITY
DEMO 619 SOUTH 10TH STREET MINNEAPOLIS, MN 55404	27-0615400						FISCAL AGENT ACTIVITY

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

[illegible]

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FLYING FORMS 15 ELIZABETH STREET ST PAUL, MN 55107			10,000				FISCAL AGENT ACTIVITY
FOOLS PRODUCTIONS 4244 GARFIELD AVE S MINNEAPOLIS, MN 55409	26-4646556						FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HARBOR VIDEO 709 26TH AVE S MINNEAPOLIS, MN 55454							FISCAL AGENT ACTIVITY
IARP 1346 WESTWOOD HILLS ROAD ST LOUIS PARK, MN 55426	26-0545027						FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LOWERTOWN LOFTS 255 EAST KELLOGG BLVD ST PAUL, MN 55101	41-1670244						FISCAL AGENT ACTIVITY
MARIMBA FESTIVAL 3310 PARK AVE S MINNEAPOLIS, MN 55407							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MN FASHION 3024 E 25TH STREET MINNEAPOLIS, MN 55406	32-2356641						FISCAL AGENT ACTIVITY
NATIONAL POETRY SLAM 308 PRINCE STREET 311 ST PAUL, MN 55101							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RARE PRODUCTIONS 2751 HENNEPIN AVE 237 MINNEAPOLIS, MN 55408			27,950				FISCAL AGENT ACTIVITY
ROCK STAR SUPPLY COMPANY 1159 RAYMOND AVE ST PAUL, MN 55108							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SPEAKING OF HOME 111 MARQUETTE AVE 2410 MINNEAPOLIS, MN 55401							FISCAL AGENT ACTIVITY
SUPERGROUP 3435 10TH AVE S MINNEAPOLIS, MN 55407							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE STRANGE CAPERS 1465 WEST 33RD STREET MINNEAPOLIS, MN 55408							FISCAL AGENT ACTIVITY
THEATRE NOVI MOST 580 RARIG CENTER MINNEAPOLIS, MN 55454							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WISHES FOR THE SKY 209 8TH ST E 410 ST PAUL, MN 55101							FISCAL AGENT ACTIVITY
WORKS PROGRESS 2409 29TH AVE S 4 MINNEAPOLIS, MN 55406							FISCAL AGENT ACTIVITY

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

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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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ARP (TROY PIEPER) 3320 18TH AVE S 2 MINNEAPOLIS, MN 55407							FISCAL AGENT ACTIVITY
ART OF THIS 3506 NICOLLET AVE S MINNEAPOLIS, MN 55408	83-0473317						FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ARTSVISION LOWERTOWN (CHAMATH PE 300 BROADWAY STREET ST PAUL, MN 55101							FISCAL AGENT ACTIVITY
BETHANY FORD 20113RD AVE S MINNEAPOLIS, MN 55404							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BRIGHT EYE PRODUCTIONS (EMMA NAD 3611 BRYANT AVE S 201 MINNEAPOLIS, MN 55409							FISCAL AGENT ACTIVITY
CAROLYN HOLBROOK 1920 1ST ST 503 MINNEAPOLIS, MN 55454							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CLASSICAL ACTORS ENSEMBLE 3021 JAMES AVE S 202 MINNEAPOLIS, MN 55408	27-2280819						FISCAL AGENT ACTIVITY
COMMEDIA BEAUREGARD 1043 GRAND AVE 358 SAINT PAUL, MN 55105	20-8224437						FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CROMULENT SHAKESPEARE COMPANY (B 1808 STEVENS AVE S 8 MINNEAPOLIS, MN 55403	33-1098767						FISCAL AGENT ACTIVITY
DANZA ESPANOLA (DEBORAH ELIAS) 117 MACKUBIN ST 5 ST PAUL, MN 55102							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EMIGRANT THEATRE 614 S 9TH STREET 202 MINNEAPOLIS, MN 55404	20-2718249						FISCAL AGENT ACTIVITY
ESCHATON (NANCY RANDALL) 3 EAST ST ALBANS ROAD HOPKINS, MN 55305							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FTF WORKS (ERIK HOOVER) 982 JESSAMINE AVE E ST PAUL, MN 55106							FISCAL AGENT ACTIVITY
GENEVIEVE BENNETT 3844 13TH AVE S MINNEAPOLIS, MN 55407							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GREEN RIVER DANCE 10700 LINDO TRAIL LINDSTROM, MN 55045							FISCAL AGENT ACTIVITY
HALAU HULA 2214 RUSSELL AVE N MINNEAPOLIS, MN 55411							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HONEYWELL CONCERT BAND (HCB INC 1508 23RD AVE NW NEW BRIGHTON, MN 55112	27-1508954						FISCAL AGENT ACTIVITY
IN THE MOMENT 308 PRINCE STREET 418 ST PAUL, MN 55101			10,718				FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JILA NIKPAY 1814 FRANKLIN AVE SE MINNEAPOLIS, MN 55414							FISCAL AGENT ACTIVITY
LIDIA 1441 PRIMROSE CURVE ROSEVILLE, MN 55113							FISCAL AGENT ACTIVITY

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

[illegible]

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

[illegible]

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MIX (ANDY KRUEGER) 685 MARSHALL AVE ST PAUL, MN 55104							FISCAL AGENT ACTIVITY
MN CENTER FOR GLASS ARTS 2010 E HENNEPIN AVE BOX 54 BD 10 MINNEAPOLIS, MN 55413							FISCAL AGENT ACTIVITY

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

[illegible]

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW NATIVE THEATER (RHIANA YAZZI 580 HOLLY AVE 1 ST PAUL, MN 55102							FISCAL AGENT ACTIVITY
OPERA BOB 1419 HEWITT AVE N ST PAUL, MN 55104							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PARTIZAN THEATER 4101 PLEASANT AVE S MINNEAPOLIS, MN 55409							FISCAL AGENT ACTIVITY
PEACE AND WAR IN THE HEARTLAND (225 SOUTH EAST AVE VIROQUA, WI 54665							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PENDULUM THEATRE 1023 GERANIUM AVE ST PAUL, MN 55106	20-8446563						FISCAL AGENT ACTIVITY
POWDERHORN EMPTY BOWLS (MICHAEL 3518 BLOOMINGTON AVE 3 MINNEAPOLIS, MN 55407							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PROVENTION 3609 NEWTON AVE N MINNEAPOLIS, MN 55412							FISCAL AGENT ACTIVITY
RED LETTER THEATER (DAVID HANZAL 5155 ALAMEDA ST SHOREVIEW, MN 55126							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ROSY SIMAS DANSE 913 19TH AVE SE MINNEAPOLIS, MN 55414							FISCAL AGENT ACTIVITY
RUSSIAN SOUL (DIFFERENT ADDRESS) 2635 MARSHALL ST NE MINNEAPOLIS, MN 55418							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAVAGE AURAL HOTBED 2725 8TH STREET S MINNEAPOLIS, MN 55454							FISCAL AGENT ACTIVITY
SAVAGE UMBRELLA 3134 LINCOLN STREET NE MINNEAPOLIS, MN 55418							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOUNDS OF HARMONY 3032 ST CROIX TRAIL SO AFTON, MN 55001							FISCAL AGENT ACTIVITY
SPONTANEOUS COMBUSTION THEATRE 1631 MELISSA LANE WHITE BEAR LAKE, MN 55110							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
STORYAPOLIS 3641 45TH AVE MINNEAPOLIS, MN 55406							FISCAL AGENT ACTIVITY
TANGO BRIDGES 1512 MINNEHAHA AVE W ST PAUL, MN 55104							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
11 703 - 10TH AVENUE N ST CLOUD, MN 56303							FISCAL AGENT ACTIVITY
WOMEN STAND UP 4412 W LAKE HARRIET PARKWAY 201 MINNEAPOLIS, MN 55410							FISCAL AGENT ACTIVITY

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

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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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANCIA SAXOPHONE QUARTET 4811-35TH AVE SOUTH MINNEAPOLIS, MN 55417							FISCAL AGENT ACTIVITY
BUCKET BRIGADE 3627 FREMONT AVE N MINNEAPOLIS, MN 55412							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BUTCH THOMPSON 923 OSCEOLA AVE ST PAUL, MN 55105							FISCAL AGENT ACTIVITY
CARLYLE BROWN & CO 3636 COLUMBUS AVE S MINNEAPOLIS, MN 55407							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHAIN REACTION THEATER PROJ 9565 BENNETT PLACE EDEN PRAIRIE, MN 55347							FISCAL AGENT ACTIVITY
CONTEMPO PHYSICAL DANCE 3162 PARK OVERLOOK DRIVE SHOREVIEW, MN 55126							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DA DANCE 839 SHERBURNE ST PAUL, MN 55104							FISCAL AGENT ACTIVITY
GRACE MINNESOTA 209 8TH STREET E 410 ST PAUL, MN 55101			29,719				FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HEBREW LESSON THE 3351 COLUMBUS AVE S MINNEAPOLIS, MN 55407							FISCAL AGENT ACTIVITY
HOLY COW PRESS PO BOX 3170 MOUNT ROYAL STATI DULUTH, MN 55803			10,993				FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IZUNMIZAN 1710 VICKI LANE MENDOTA HEIGHTS, MN 55118							FISCAL AGENT ACTIVITY
KAREN SHERMAN 3112 10TH AVE S MINNEAPOLIS, MN 55407			6,288				FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KATHY MCTAVISH 1748 WILDWOOD RD DULUTH, MN 55804							FISCAL AGENT ACTIVITY
MAMA MOSAIC 4749 5TH ST NE MINNEAPOLIS, MN 55421							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MORGAN THORSON & CO 3112 10TH AVE S MINNEAPOLIS, MN 55407			21,613				FISCAL AGENT ACTIVITY
MOTION POEMS 38 NORTH OAKS ROAD NORTH OAKS, MN 55127							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
POINTS OF LIGHT 1783 FIELD AVE ST PAUL, MN 55116							FISCAL AGENT ACTIVITY
REGION ZERO 308 PRINCE STREET 522 ST PAUL, MN 55101							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SISTERS BOIL THE 4252 29TH AVE S MINNEAPOLIS, MN 55406							FISCAL AGENT ACTIVITY
SUNSETGUN PRODUCTIONS 2220 GRAND AVE S MINNEAPOLIS, MN 55405							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VANESSA VOSKUIL 709 8TH AVE SE 8 MINNEAPOLIS, MN 55414							FISCAL AGENT ACTIVITY
VETERANS BOOK PROJECT 3821 14TH AVE S MINNEAPOLIS, MN 55407							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VETERANS IN THE ARTS- C PO BOX 16576 ST PAUL, MN 55116							FISCAL AGENT ACTIVITY
WILHELM BROS & CO 4534 PILLSBURY AVE S MINNEAPOLIS, MN 55419							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
T2P2 810 W LAKE ST MINNEAPOLIS, MN 55408			20,100				FISCAL AGENT ACTIVITY
ARTARIA STRING QUARTET 980 BELLOWS STREET ST PAUL, MN 55118							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE LEDGE GALLERY 1916 3RD AVE S MINNEAPOLIS, MN 55404							FISCAL AGENT ACTIVITY
WISDOM DANCES 308 E PRINCE ST ST PAUL, MN 55101			5,733				FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FORTUNE'S FOOL 2113 22ND AVE S MINNEAPOLIS, MN 55404							FISCAL AGENT ACTIVITY
APOLLO MALE CHORUS 2418 WEST 107TH ST BLOOMINGTON, MN 55431							FISCAL AGENT ACTIVITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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MN ORCHESTRA MUSICIANS 1111 NICOLLET MALL MINNEAPOLIS, MN 55403							FISCAL AGENT ACTIVITY
WE THEATER 308 E PRINCE ST ST PAUL, MN 55101							FISCAL AGENT ACTIVITY

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

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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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE THIRD RAIL PO BOX 96063 PORTLAND, OR 97296							FISCAL AGENT ACTIVITY
SOSPCO 308 E PRINCE ST ST PAUL, MN 55101							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALZHEIMERS POETRY PROJECT 290 20TH STREET 1L BROOKLYN, NY 11215							FISCAL AGENT ACTIVITY
ART SHANTY PROJECTS 2932 BRYANT AVE S MINNEAPOLIS, MN 55408	27-1457642						FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE BAROQUE ROOM 275 E 4TH ST 280 ST PAUL, MN 55101							FISCAL AGENT ACTIVITY
BODY CARTOGRAPHY 3528 10TH AVE S MINNEAPOLIS, MN 55407	55-4076159						FISCAL AGENT ACTIVITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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THE BUOYANT GROUP 3247 LYNDAL AVE S 105 MINNEAPOLIS, MN 55408							FISCAL AGENT ACTIVITY
CATALYST PO BOX 18262 MINNEAPOLIS, MN 55418	57-4584428		46,683				FISCAL AGENT ACTIVITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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COMO POPS 3428 ST PAUL AVE MINNEAPOLIS, MN 55416			13,101				FISCAL AGENT ACTIVITY
COURAGEOUS HEARTS 4164 CEDAR AVE MINNEAPOLIS, MN 55407	46-2105289						FISCAL AGENT ACTIVITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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DREAM SONGS PROJECT 30 WEST 22ND STREET 105 MINNEAPOLIS, MN 55404							FISCAL AGENT ACTIVITY
FRANKLIN ART WORKS 1021 E FRANKLIN AVE MINNEAPOLIS, MN 55404							FISCAL AGENT ACTIVITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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FRESHWATER THEATER 308 E PRINCE ST ST PAUL, MN 55101			5,642				FISCAL AGENT ACTIVITY
TANGO TEACHERS' CO-OP 29847 CO 2 BLVD FRONTENAC, MN 55026							FISCAL AGENT ACTIVITY

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

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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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KINSHIP OF RIVERS 308 E PRINCE ST ST PAUL, MN 55101							FISCAL AGENT ACTIVITY
MAD KING THOMAS 308 E PRINCE ST ST PAUL, MN 55101							FISCAL AGENT ACTIVITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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MIXED PRECIPITATION 1422 GRAND ST NE MINNEAPOLIS, MN 55413			11,584				FISCAL AGENT ACTIVITY
FILM IN THE CITY 308 E PRINCE ST ST PAUL, MN 55101							FISCAL AGENT ACTIVITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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PENELOPE FREEH 308 E PRINCE ST ST PAUL, MN 55101							FISCAL AGENT ACTIVITY
PRAIRIE FIRE LADY CHOIR 308 E PRINCE ST ST PAUL, MN 55101							FISCAL AGENT ACTIVITY

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

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Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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THEATRE FOREVER 308 E PRINCE ST ST PAUL, MN 55101							FISCAL AGENT ACTIVITY
TLALNEPANTLA ARTS 308 PRINCE ST STE 270 ST PAUL, MN 55101			10,218				FISCAL AGENT ACTIVITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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TUCKUNDER PROJECTS 308 E PRINCE ST STE 270 ST PAUL, MN 55101							FISCAL AGENT ACTIVITY
CRACKED WALNUT 308 PRINCE ST STE 270 ST PAUL, MN 55101							FISCAL AGENT ACTIVITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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THE BIGGER PICTURE 308 E PRINCE ST 270 ST PAUL, MN 55101							FISCAL AGENT ACTIVITY
CREATING LANGUAGE THROUGH THE 318 N MOORE ST ST PAUL, MN 55104							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SHOW BIZ MUSIC RESIDENCY 308 PRINCE ST STE 270 ST PAUL, MN 55101							FISCAL AGENT ACTIVITY
DIAL GROUP 1930 GLENWOOD AVENUE MINNEAPOLIS, MN 55405							FISCAL AGENT ACTIVITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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ARS BELLUM FOUNDATION 1043 GRAND AVE 313 ST PAUL, MN 55105							FISCAL AGENT ACTIVITY
SECOND FIDDLE PRODUCTIONS 308 PRINCE STREET STE 270 ST PAUL, MN 55101							FISCAL AGENT ACTIVITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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CELN YOLLOTL IN TLAPIZALLI 308 PRINCE ST STE 270 ST PAUL, MN 55101							FISCAL AGENT ACTIVITY
RACHEL PERLMETER PRODUCTIONS 308 PRINCE ST ST PAUL, MN 55101							FISCAL AGENT ACTIVITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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ALZHEIMER CHORUS PROJECT 501 S 2ND ST MINNEAPOLIS, MN 55401							FISCAL AGENT ACTIVITY
ART ASAP INC 600 SIXTH AVENUE DES MOINES, IA 50309							FISCAL AGENT ACTIVITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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RELICS OF THE PLASTIC AGE 308 PRINCE ST STE 270 ST PAUL, MN 55101							FISCAL AGENT ACTIVITY
LAZY HMONG WOMAN PROD 275 4TH ST EAST STE 482 ST PAUL, MN 55101							FISCAL AGENT ACTIVITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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7TH HOUSE THEATER 1006 W LAKE STREET 319 MINNEAPOLIS, MN 55408							FISCAL AGENT ACTIVITY
MAGPIES & RAVENS 308 PRINCE STREET STE 270 ST PAUL, MN 55101							FISCAL AGENT ACTIVITY

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

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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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALTERNATIVE MOTION 5740 36TH AVE S MINNEAPOLIS, MN 55417							FISCAL AGENT ACTIVITY
CERULEAN FIRE 308 PRINCE ST STE 270 ST PAUL, MN 55105							FISCAL AGENT ACTIVITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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SPITTING IMAGE COLLECTIVE 308 PRINCE ST STE 270 ST PAUL, MN 55101							FISCAL AGENT ACTIVITY
SEWTROPOLIS 4755 CHICAGO AVE S MINNEAPOLIS, MN 55407							FISCAL AGENT ACTIVITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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ACME 708 1ST ST N G31 MINNEAPOLIS, MN 55401							FISCAL AGENT ACTIVITY
ANCIA SAXOPHONE QUARTET - C 308 PRINCE ST STE 270 ST PAUL, MN 55101							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BLUE OX MINI GOLF 1750 HENNEPIN AVE MINNEAPOLIS, MN 55403							FISCAL AGENT ACTIVITY
BODY CARTOGRAPHY 3304 EAST 24TH ST MINNEAPOLIS, MN 55406							FISCAL AGENT ACTIVITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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BUCKET BRIGADE 858 JUNO AVE ST PAUL, MN 55102			17,806				FISCAL AGENT ACTIVITY
WONDERLUST PRODUCTIONS 3419 BLAISDELL AVE MINNEAPOLIS, MN 55408							FISCAL AGENT ACTIVITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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HONEYWELL CONCERT BAND 308 PRINCE ST STE 270 ST PAUL, MN 55101							FISCAL AGENT ACTIVITY
SIX ELEMENTS 308 PRINCE ST 270 ST PAUL, MN 55101							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WAKEMUP PRODUCTIONS 1184 MACKUBIN ST APT 308 ST PAUL, MN 55117							FISCAL AGENT ACTIVITY
SCENIUS STUDIO 2925 MONTERAY ST LOUIS PARK, MN 55416			34,415				FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
REVIVAL DANCE ACADEMY 408 ELM AVE PO BOX 332 WAVERLY, MN 55390							FISCAL AGENT ACTIVITY
THEATRE ELISION 3401 EAST VIA PALOMITA TUSCON, AZ 85718							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RED BIRD THEATRE 345 CHESTER ST MINNEAPOLIS, MN 55419			17,304				FISCAL AGENT ACTIVITY
TEDXMINNEAPOLIS 3536 IRVING AVE S MINNEAPOLIS, MN 55408			43,505				FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FOR THE LOVE 2929 21ST AVE S UNIT 212 MINNEAPOLIS, MN 55407							FISCAL AGENT ACTIVITY
WAVELETS CREATIVE PO BOX 18262 MINNEAPOLIS, MN 55418			5,219				FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TRADEMARK THEATER 2285 UNIVERSITY AVE W 451 ST PAUL, MN 55114							FISCAL AGENT ACTIVITY
NORTHSTAR CONSORT 4011 WASHBURN AVE N MINNEAPOLIS, MN 55412							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PRIME PRODUCTIONS 8001 VICTORIA LANE ST LOUIS PARK, MN 55426			17,472				FISCAL AGENT ACTIVITY
ON STAGE 2845 COLFAX AVE S 402 MINNEAPOLIS, MN 55408			15,393				FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIVE SKYWATCHERS 10375 150TH AVE FORESTON, MN 56330							FISCAL AGENT ACTIVITY
ALL ST PAUL'S A STAGE 5428 PENN AVE S MINNEAPOLIS, MN 55419							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DANCECO 2801 32ND AVE S MINNEAPOLIS, MN 55406			20,281				FISCAL AGENT ACTIVITY
KNOWN BY HEART 1003 BAYLESS AVE ST PAUL, MN 55114							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FINAL ROUND 7376 TIMBER CREST DRIVE S COTTAGE GROVE, MN 55016							FISCAL AGENT ACTIVITY
LIVING AND SUSTAINING BOOK TO 5700 BLAISDELL AVE MINNEAPOLIS, MN 55419							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OTHER TIGER PRODUCTIONS 3740 13TH AVE S MINNEAPOLIS, MN 55407							FISCAL AGENT ACTIVITY
IMPOSSIBLE SALT 3328 BLAISDELL AVE 3 MINNEAPOLIS, MN 55408							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PUBLIC FUNCTIONARY 1400 12TH AVE NW MINNEAPOLIS, MN 55413			37,000				FISCAL AGENT ACTIVITY
LAURA HOLWAY'S SMALL ART 3528 27TH AVE S MINNEAPOLIS, MN 55406							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RED WING INNOVATION INCUBATOR 312 WEST AVE RED WING, MN 55066							FISCAL AGENT ACTIVITY
A HILL IN NATCHEZ 2520 COLFAX AVE S MINNEAPOLIS, MN 55405							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RIGHT HERE COMMISIONS 3540 34 AVE S MINNEAPOLIS, MN 55406			9,874				FISCAL AGENT ACTIVITY
MNKINO 2300 QUINCY ST NE APT 1 MINNEAPOLIS, MN 55418			9,950				FISCAL AGENT ACTIVITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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SPARKLE THEATRICALS 2216 GARFIELD AVE S 101 MINNEAPOLIS, MN 55405			5,990				FISCAL AGENT ACTIVITY
HEALING PLACE MN 1308 E FRANKLIN STE 203HPC MINNEAPOLIS, MN 55404							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOREALIS DANCE 2417 GUNFLINT TRL BROOKLYN PARK, MN 55444							FISCAL AGENT ACTIVITY
LOFTRECITAL 720 4TH ST N 702 MINNEAPOLIS, MN 55401							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TRANSATLANTIC LOVE AFFAIR 1798 ASHLAND AVE 7 ST PAUL, MN 55104							FISCAL AGENT ACTIVITY
ARTS GARDEN 4513 GARDEN WAY N HUGO, MN 55038							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MAIA MAIDEN PRODUCTIONS 7614 16TH AVE S RICHFIELD, MN 55423			15,083				FISCAL AGENT ACTIVITY
MN HARD BOP COLLECTIVE 1344 MISSISSIPPI RIVERBLVDS ST PAUL, MN 55116			10,000				FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TURTLE THEATER COLLECTIVE 5412 43RD AVE S MINNEAPOLIS, MN 55417							FISCAL AGENT ACTIVITY
PICASSO PROJECTS 400 2ND ST SE 108 MINNEAPOLIS, MN 55414							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ORCHARD THEATER COLLECTIVE 412 CEDAR AVE S APT 4 MINNEAPOLIS, MN 55454			14,438				FISCAL AGENT ACTIVITY
BIG TURN MUSIC FESTIVAL 227 E 4TH ST WINONA, MN 55987			43,000				FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MILLION ARTIST MOVEMENT 887 RAYMOND AVE UPPER ST PAUL, MN 55114			10,500				FISCAL AGENT ACTIVITY
CIALUNA STORYDANCE THEATRE 1661 LONGVIEW DR ST PAUL, MN 55112							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BLACK MARKET 3538 PILLSBURY AVE S MINNEAPOLIS, MN 55408			42,000				FISCAL AGENT ACTIVITY
TWIN CITIES FLAMENCO COLLECTI 9 W FRANKLIN AVE S301 MINNEAPOLIS, MN 55404							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOUL OF AMERICA 25 LUVERNE AVE S MINNEAPOLIS, MN 55419							FISCAL AGENT ACTIVITY
MOVEMENT ARCHITECTURE 653 GALTIER STREET 111 ST PAUL, MN 55103			12,902				FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VOICES OF HOPE 4122 BLAISDELL AVE S MINNEAPOLIS, MN 55409			19,949				FISCAL AGENT ACTIVITY
STYLUS 463 LAFOND AVE ST PAUL, MN 55103							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MINNESHOWTA 19595 NIDAROS CHURCH DR CLITHERALL, MN 56524							FISCAL AGENT ACTIVITY
DEANNE JOY MINISTRIES 7023 CLEARWATER RD APT 108 BAXTER, MN 56425							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COLLECTIVE UNCONSCIOUS 3315 34TH AVE S MINNEAPOLIS, MN 55406							FISCAL AGENT ACTIVITY
THEATRE COUP D'ETAT 2443 3RD AVE S C15 MINNEAPOLIS, MN 55404							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RAW SUGAR 2012 31ST AVE S MINNEAPOLIS, MN 55406							FISCAL AGENT ACTIVITY
JEFFREY PETERSON DANCE 5 RITTENHOUSE PLACE 21 ARDMORE, PA 19003							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KALEENA MILLER DANCE 2648 CLINTON AVE MINNEAPOLIS, MN 55409			6,298				FISCAL AGENT ACTIVITY
WLDRNSS 1921 BENJAMIN ST NE MINNEAPOLIS, MN 55418							FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OPERATUNITY THEATRE 201 WATER ST N STILLWATER, MN 55082			5,312				FISCAL AGENT ACTIVITY
WILDLING THE 4110 UPTON AVE S MINNEAPOLIS, MN 55410	82-2354088		20,700				FISCAL AGENT ACTIVITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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TRU RUTS ENDEAVORS 308 PRINCE STREET STE 270 STPAUL, MN 55101			9,700				FISCAL AGENT ACTIVITY
ONE EARTH UNITED 772 101ST AVE N NAPLES, FL 34108	47-3941560		19,300				FISCAL AGENT ACTIVITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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THEATRE 55 976 GOODRICH AVE 3 ST PAUL, MN 55105			22,702				FISCAL AGENT ACTIVITY
IMPROV PARENTING 2019 FREMONT AVE S MINNEAPOLIS, MN 55405	47-2880688		6,104				FISCAL AGENT ACTIVITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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ED LLC 315 MAIN STREET SE 605 MINNEAPOLIS, MN 55414	84-3319483		6,874				FISCAL AGENT ACTIVITY
BALLET CO LABORATORY 276 E LAFAYETTE FRONTAGE RD ST PAUL, MN 55107			14,824				FISCAL AGENT ACTIVITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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BAND GROUP THE			10,848				FISCAL AGENT ACTIVITY
ARBEIT OPERA THEATRE 75 ORLIN AVE SE MINNEAPOLIS, MN 55414	47-6210660		16,896				FISCAL AGENT ACTIVITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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PERILOUS PRINTING 24220 SPUR TRAIL SPICEWOOD, TX 78669			27,500				FISCAL AGENT ACTIVITY
RACING AGE			25,094				FISCAL AGENT ACTIVITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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APIA MN 7715 STAFFORD TRAIL SAVAGE, MN 55378	81-2656047		37,846				FISCAL AGENT ACTIVITY
FUNNY ASIAN WOMEN KOLLECTIVE 685 RIVOLI ST STPAUL, MN 55130	83-0635886		47,700				FISCAL AGENT ACTIVITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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RONDO FAMILY REUNION 308 PRINCE STREET STE 270 STPAUL, MN 55101			9,670				FISCAL AGENT ACTIVITY
SHEEP THEATER 1265 WEST COMO BLVD STPAUL, MN 55103	46-9252378		6,915				FISCAL AGENT ACTIVITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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10TH WAVE 640 KNIGHTS BRIDGE RD NEW BRIGHTON, MN 55112	82-5375612		10,840				FISCAL AGENT ACTIVITY
EMERGING CURATORS INSTITUTE 3957 15TH AVE S MINNEAPOLIS, MN 55407	83-4640140		19,300				FISCAL AGENT ACTIVITY

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 section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNDERGROUND MEDIA COLLECTIVE 2822 LYNDALE AVENUE SOUTH MINNEAPOLIS, MN 55408			7,863				FISCAL AGENT ACTIVITY
PERSISTENT THEATRE PRODUCTIONS 1564 SELBY AVENUE 7 STPAUL, MN 55104	39-2040165		6,075				FISCAL AGENT ACTIVITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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PATRICK SCULLY PRODUCTIONS 107 W ISLAND AVE 2 MINNEAPOLIS, MN 55401	47-3664066		11,317				FISCAL AGENT ACTIVITY
LUMIN THEATER LAB 718 TYLER ST HASTINGS, MN 55033	81-5058768		10,946				FISCAL AGENT ACTIVITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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JENSON DANCE 1491 N MILPITAS BLVD MILPITAS, CA 95035			10,000				FISCAL AGENT ACTIVITY
SIGMA'S BOOKSHELF 13540 KNOLLWAY DRIVE NORTH MINNETONKA, MN 55305	27-1834391		5,570				FISCAL AGENT ACTIVITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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COW TIPPING PRESS 509 BROADWAY STREET NE 2 MINNEAPOLIS, MN 55413	81-2431227		9,053				FISCAL AGENT ACTIVITY
WE ARE ALL CONNECTED 619 BUCHANAN ST NE MINNEAPOLIS, MN 55413	47-0179131		5,021				FISCAL AGENT ACTIVITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
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SOD HOUSE THEATER 2613 30TH AVE NE ST ANTHONY, MN 55418			5,642				FISCAL AGENT ACTIVITY
UMBRELLA COLLECTIVE 3048 12TH AVE S APT 3 MINNEAPOLIS, MN 55407	83-3844886		20,607				FISCAL AGENT ACTIVITY

Schedule J (Form 990) Department of the Treasury Internal Revenue Service	Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990. ▶ Go to <u>www.irs.gov/Form990</u> for instructions and the latest information.		OMB No 1545-0047
			2018
			Open to Public Inspection
Name of the organization SPRINGBOARD FOR THE ARTS		Employer identification number 41-1690483	

Part I Questions Regarding Compensation		Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
<input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.		1b	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?		2	
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
<input checked="" type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Form 990 of other organizations	<input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee		
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
a Receive a severance payment or change-of-control payment?		4a	No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?		4b	No
c Participate in, or receive payment from, an equity-based compensation arrangement?		4c	No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
a The organization?		5a	No
b Any related organization?		5b	No
If "Yes," on line 5a or 5b, describe in Part III.			
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
a The organization?		6a	No
b Any related organization?		6b	No
If "Yes," on line 6a or 6b, describe in Part III.			
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.		7	No
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.		8	No
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?		9	

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

Schedule J (Form 990) 2018

Part III **Supplemental Information**

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

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury

Name of the organization
SPRINGBOARD FOR THE ARTS**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.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018**Open to Public
Inspection****Employer identification number**

41-1690483

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	LINE 11B EXPLANATION - FULL BOARD OF DIRECTORS REVIEWS BOTH THE 990 AND AUDIT AND VOTES TO APPROVE BEFORE FILING

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	BOARD & STAFF SIGN ANNUAL CONFLICT OF INTEREST DISCLOSURE AGREEMENT FULL BOARD OF DIRECTORS APPROVES OR DENIES BOARD MEMBERS & STAFF TO ACT WHEN THERE IS A CONFLICT OF INTEREST

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE EXECUTIVE COMMITTEE USES THE MN COUNCIL OF NONPROFITS' SALARY & BENEFIT SURVEY TO DETERMINE COMPARABLE DATA AND MAKES AN ANNUAL RECOMMENDATION THE EXECUTIVE COMMITTEE USES THE MN COUNCIL OF NONPROFITS' SALARY & BENEFIT SURVEY TO DETERMINE COMPARABLE DATA AND MAKES AN ANNUAL RECOMMENDATION

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	BY REQUEST

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART IX, LINE 11G	OTHER PROFESSIONAL FEES PROGRAM SERVICE EXPENSES 365,127 MANAGEMENT AND GENERAL EXPENSES 12,290 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 377,417

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9	FISCAL SPONSORSHIP ACTIVITY -2,101