0423220225 APR2121 DROC PRODUC

Form 990-PF

Department of the Treasury Internal Revenue Service

Return of Private Foundation

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

▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

1912

2019

| | For | caler | idar year 2019 or tax year beginning | | , and ending | | |
|--------|----------------|-------|---|---|---------------------------------------|--|--|
| | Nar | ne of | foundation | A Employer identification | number | | |
| | P | RA | IRIE CENTER OF THE ARTS | 33-1078799 | | | |
| | | | nd street (or P O box number if mail is not delivered to street | t address) | Room/suite | B Telephone number | |
| 3 | | | 2 S.W. WASHINGTON ST. | | | 309-673-55 | 89 |
| _ | | | own, state or province, country, and ZIP or foreign p | oostal code | | C If exemption application is p | ending, check here |
| 4 | | | RIA, IL 61602 | | | | |
| • | GC | heck | all that apply: Initial return | _ | ormer public charity | D 1 Foreign organizations | , check here |
| | | | Final return Address change | Amended return | | 2 Foreign organizations me check here and attach co | eting the 85% test, |
| | <u> </u> | hock | | Name change | - A | | _ |
| | 7 | _ | | Other taxable private founda- | utuan 114 | E If private foundation state under section 507(b)(1) | . F . 1 |
| | L Fa | _ | | ing method. X Cash | Accrual | 1 | • • |
| | | | · I | ther (specify) | 7.00,000 | F If the foundation is in a (under section 507(b)(1) | |
| | | \$ | 295,173. (Part I, colur | | is) | , | (- // -· · - · - · |
| | Pa | art I | Analysis of Revenue and Expenses | (a) Revenue and | (b) Net investment | (c) Adjusted net | (d) Disbursements |
| | | | (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) | expenses per books | income | income | for charitable purposes (cash basis only) |
| | | 1 | Contributions, gifts, grants, etc., received | 11,285. | | | |
| | | 2 | Check Inf the foundation is not required to attach Sch. B | | | | |
| | | 3 | Interest on savings and temporary cash investments | 3,526. | 3,526. | 3,526. | STATEMENT 1 |
| | | 4 | Dividends and interest from securities | | | | |
| | | Ι. | Gross rents | , | | <u> </u> | |
| | | ١. | Net rental income or (loss) | | | | |
| | ne | Ба | Net gain or (loss) from sale of assets not on line 10 Gross sales price for all | | | | |
| • | Revenue | ,0 | assets on line 6a Capital gain net income (from Part IV, fine 2) | | 0. | | |
| | Re | 8 | Net short-term capital gain | | | 0. | |
|) | | 9 | Income modification ECEIVED IN CORRE | | | | |
| _ | | 1 - | Gross sales less returns and allowances RS - OSC - 01 | - | | | |
| _ | | Ι. | Less Cost of goods sold OCT 1 4 0000 | | | | |
| _ | | C | Gross profit or (loss) | | | | |
| j | | 11 | Other income OCIENI ITAL | 2,736. | 0. | | STATEMENT 2 |
| 4 | | 12 | Total. Add lines 1 through TPEN, UTAH | 17,547. | 3,526. | 6,262. | |
|) | | 13 | Compensation of officers, directors, trustees, etc | 0. | 0. | 0. | 0. |
| • | | 14 | Other employee salaries and wages | | | | · |
| | es | | Pension plans, employee benefits Legal fees | | | ` | |
| | SUS. | IDa | Accounting fees STMT 3 | 2,090. | 0. | 0. | 2,090. |
| | Expens | ٦ | Other professional fees STMT 4 | 500. | 0. | 0. | 500. |
| | e m | 17 | Interest | | | | |
| } | ati | 18 | Taxes STMT 5 | 65. | 0. | 0. | 65. |
| | ist | 19 | Depreciation and depletion | 4,199. | 0. | 0. | |
|) | Administrative | 20 | Occupancy | | - | | |
| • | Ad | 21 | Travel, conferences, and meetings | | | | |
| , | and | 22 | Printing and publications | 337. | · 0. | 0. | 337. |
| | ug | 23 | Other expenses STMT 6 | 8,687. | . 0 | 0. | 8,687. |
| , | Operating | 24 | Total operating and administrative | 15 050 | • | | 11 670 |
|) \ | adc | | expenses. Add lines 13 through 23 | 15,878. | 0. | 0. | 11,679. |
| ر - | _ | i | Contributions, gifts, grants paid | 1,400. | - ` | · | 1,400. |
| - | | 26 | • | 17,278. | 0. | 0. | 13,079. |
|) | _ | 27 | Add lines 24 and 25 Subtract line 26 from line 12: | 17,270. | | • | 13,0,3. |
| - | | | Excess of revenue over expenses and disbursements | 269. | | | |
| | | | Net investment income (if negative, enter -0-) | | 3,526. | - | |
| | | | Adjusted net income (if negative, enter -0-) | | · · · · · · · · · · · · · · · · · · · | 6,262. | |
| | _ | _ | | | | | |

| Part II Balance Sheets Attached schedules and amounts in the description rolliums should be for end-of-year amounts only | Beginning of year | End of ye | |
|---|-------------------|----------------|-----------------------|
| column should be for end-of-year amounts only | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| 1 Cash - non-interest-bearing | 10,439. | 12,864. | 12,864. |
| 2 Savings and temporary cash investments | 269,694. | 271,120. | 271,120. |
| 3 Accounts receivable ▶ | | | |
| Less, allowance for doubtful accounts | | | |
| 4 Pledges receivable ▶ | | | |
| Less: allowance for doubtful accounts | | | |
| 5 Grants receivable | | | |
| 6 Receivables due from officers, directors, trustees, and other | | | |
| disqualified persons | | | |
| 7 Other notes and loans receivable | | | |
| Less: allowance for doubtful accounts | | | |
| g 8 Inventories for sale or use | | <u> </u> | |
| 9 Prepaid expenses and deferred charges | • | | |
| 10a Investments - U.S. and state government obligations | | | |
| b Investments - corporate stock | | | |
| c Investments - corporate bonds | | | |
| 11 Investments - land buildings, and equipment basis | | | |
| Less accumulated depreciation | | | |
| 12 Investments - mortgage loans | | | |
| 13 Investments - other | | | |
| 14 Land, buildings, and equipment: basis ► 112, 904. | | | |
| Less accumulated depreciation \blacktriangleright 101, 752. | 15,134. | 11,152. | 11,152. |
| 15 Other assets (describe ► OTHER RECEIVABLE) | 37. | 37. | 11,152. 37. |
| 16 Total assets (to be completed by all filers - see the | | | |
| instructions Also, see page 1, item I) | 295,304. | 295,173. | 295,173. |
| 17 Accounts payable and accrued expenses | · | | |
| 18 Grants payable | | | |
| ທ 19 Deferred revenue | | | |
| 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable | | | |
| 21 Mortgages and other notes payable | | | |
| 22 Other liabilities (describe > ARTISTS DEPOSITS) | 600. | 200. | |
| | | j | |
| 23 Total liabilities (add lines 17 through 22) | 600. | 200. | |
| Foundations that follow FASB ASC 958, check here | | | |
| and complete lines 24, 25, 29, and 30 | | | |
| | | | |
| 24 Net assets without donor restrictions 25 Net assets with donor restrictions Foundations that do not follow FASB ASC 958, check here X and complete lines 26 through 30 | | | |
| Foundations that do not follow FASB ASC 958, check here | | | |
| and complete lines 26 through 30 | | | |
| ් 26 Capital stock, trust principal, or current funds | 0. | 0. | |
| 27 Paid-in or capital surplus, or land, bldg., and equipment fund | 0. | 0. | |
| Paid-in or capital surplus, or land, bldg., and equipment fund Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances | 294,704. | 294,973. | |
| 29 Total net assets or fund balances | 294,704. | 294,973. | |
| 2 | | } | |
| 30 Total liabilities and net assets/fund balances | 295,304. | 295,173. | |
| Part III Analysis of Changes in Net Assets or Fund Ba | lances | | |
| Tare in | | | |
| 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 2 | 9 | | |
| (must agree with end-of-year figure reported on prior year's return) | | . 1 | 294,704. |
| 2 Enter amount from Part I, line 27a | | 2 | 269. |
| 3 Other increases not included in line 2 (itemize) | | 3 | 0. |
| 4 Add lines 1, 2, and 3 | • | 4 | 294,973. |
| 5 Decreases not included in line 2 (itemize) | | 5 | 0. |
| 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, col | umn (b), line 29 | 6 | 294,973. |

| Part IV Capital Gains | and Lo | sses for Tax on Inve | estment | Income | | | | | | |
|---|--|--|----------------|------------------------------------|--------|----------------------------|-----------------------|------------------------|------------------------------|----------------------------------|
| | |) of property sold (for examp or common stock, 200 shs. N | | te, | P | How ac - Purc - Dona | nase | (c) Date a (mo., da | | (d) Date sold (mo., day, yr.) |
| 1a | | | | | | | | | | |
| b NO | ONE | | | | | | | | | |
| <u>c</u> | _ | | | | | | | | | |
| <u> </u> | | | | | | | | | | |
| e | /6\ F | Depreciation allowed | (a) Coo | t or other book | ١ | | I | (h) Co | un or (loss) | <u> </u> |
| (e) Gross sales price | (1) | (or allowable) | | t or other basis xpense of sale | | | | | (1) minus (1) | |
| 8 | | | | | | | | | | |
| b | ļ | | | | | | | | | |
| <u>c</u> | ļ | | | | | | | | | |
| <u>d</u> | | | | | | | | | | |
| Complete only for assets show | ing osin in i | column (h) and owned by the | foundation | on 12/31/69 | | | (1) | Gains (Cr | ol. (h) gain | minus |
| (i) FMV as of 12/31/69 | 1 | J) Adjusted basis as of 12/31/69 | (k) Ex | cess of col. (i) | | | | (k), but n | ot less that (from col. (| 1 -0-) or |
| a | | 43 01 12/3 1/03 | 0461 | coi. (j), ii ariy | | | | | | |
| b | | | | | | | | | | |
| C | | | | | | | | | | |
| d | | | | | | | | | | |
| е | | | | | | | | | | |
| 2 Capital gain net income or (net o | capital loss) | If gain, also enter in If (loss), enter -0- in | | | } | 2 | | | | |
| 3 Net short-term capital gain or (lo | oss) as defi | | | | | | | | | |
| If gain, also enter in Part I, line 8 | | | ,- ,. | | } | | | | | |
| If (loss), enter -0- in Part I, line (| 8 | | 1 | Tau an Nat | | 3 | | | | |
| <u> </u> | | ection 4940(e) for F | | | | | nent inc | ome | | |
| (For optional use by domestic priva | ite foundatie | ons subject to the section 494 | 40(a) tax on | net investment in | come | e.) | | | | |
| If section 4940(d)(2) applies, leave | this part bla | ank | | | | | | | | |
| Was the foundation liable for the se | ction 4942 | tax on the distributable amou | unt of any ve | ear in the base per | od? | | | | | Yes X No |
| If "Yes," the foundation doesn't qua | | | | • | | | | | | |
| Enter the appropriate amount in | n each colui | nn for each year; see the inst | ructions bef | lore making any e | ntries | S | | | | |
| (a) Base period years | | (b) | | Not value of an | (c) | | uaa aaaala | | | (d) outlon ratio |
| Calendar year (or tax year beginn | กเกฐ เท) | Adjusted qualifying distrib | | Net value of no | пспа | | | | (col (b) div | ided by col. (c)) |
| 2018 | | | ,993. ,933. | | | | 6,632 1,304 | | | .07588 |
| 2017 2016 | | | ,894. | | | | $\frac{1,304}{4,722}$ | | | .19253 |
| 2015 | | | ,731. | | | | 4,350 | | - | .29790 |
| 2014 | | | ,685. | | | | 4,168 | | | 1.72492 |
| | | | • | | | | | | | |
| 2 Total of line 1, column (d) | | | | | | | | 2 | | 2.36841 |
| 3 Average distribution ratio for the | e 5-year bas | se period - divide the total on | line 2 by 5.0 |), or by the numb | er of | years | | | | |
| the foundation has been in exist | tence if less | than 5 years | | | | | • | 3 | | .47368 |
| | | | | | | | | 1.1 | | 273,666 |
| 4 Enter the net value of noncharita | adie-use as: | sets for 2019 from Part X, III | e 5 . | • | | | | 4 | | 213,000 |
| 5 Multiply line 4 by line 3 | _ | | | | | | | 5 | | 129,631 |
| C. Fater 18/ of anti-migrature transfer | /40/ al | Dort Line 27h) | | | | | | 6 | | 35 |
| 6 Enter 1% of net investment inco | וט 170 טוויע | Fait 1, IHIC 210) | | | | | | - | | <u></u> |
| | | | | | | | | 7 | | 129,666 |
| 7 Add lines 5 and 6 | | • | | | | | - | ' | | 123,000 |
| 7 Add lines 5 and 68 Enter qualifying distributions from | om Part XII, | ine 4 | | | | | ٠ | 8 | | 13,296 |

| Form,990-PF (2019) PF | RAIRIE CENTER OF THE ARTS | | *_** | | | Page 4 |
|---|--|---------------------|----------|-----------------|----------|-------------|
| Part VI Excise Tax | Based on Investment Income (Section 4940(a), 4940(b), 494 | 40(e), or 494 | 18 - see | instru : | ction | าร) |
| 1a Exempt operating foundation | ions described in section 4940(d)(2), check here and enter "N/A" on line 1 |) | | | | |
| Date of ruling or determinat | ation letter: (attach copy of letter if necessary-see instruction | s) | | | | |
| b Domestic foundations that i | meet the section 4940(e) requirements in Part V, check here and enter 1% | · | 1 | | | 71. |
| of Part I, line 27b | | . [| | | | |
| c All other domestic foundation | ions enter 2% of line 27b Exempt foreign organizations, enter 4% of Part I, line 12, col (| (b) | | | | |
| 2 Tax under section 511 (don | mestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) | | 2 | | | 0. |
| 3 Add lines 1 and 2 | | Γ | 3 | | | 71. |
| 4 Subtitle A (income) tax (dor | omestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) | | 4 | | | 0. |
| 5 Tax based on investment i | income Subtract line 4 from line 3. If zero or less, enter -0- | | 5 | | | 71. |
| 6 Credits/Payments: | | | | | | |
| a 2019 estimated tax paymen | nts and 2018 overpayment credited to 2019 6a | 0. | 1 | | | |
| b Exempt foreign organization | | 0. | | | | |
| c Tax paid with application fo | or extension of time to file (Form 8868) 6c | 0. | ļ | | | |
| d Backup withholding erroned | eously withheld 6d | 0. |] | | | |
| 7 Total credits and payments. | • | | 7 | | | 0. |
| | erpayment of estimated tax. Check here if Form 2220 is attached | . – | 8 | | | 0. |
| | s 5 and 8 is more than line 7, enter amount owed | ▶ □ | 9 | | | 71. |
| 10 Overpayment If line 7 is m | nore than the total of lines 5 and 8, enter the amount overpaid | . ▶ 🗆 | 10 | | | |
| 11 Enter the amount of line 10 | 0 to be: Credited to 2020 estimated tax | lefunded 🕨 | 11 | | | |
| Part VII-A Statemer | nts Regarding Activities | | | | | |
| 1a During the tax year, did the | e foundation attempt to influence any national, state, or local legislation or did it participat | e or intervene in | | | Yes | No |
| any political campaign? | | - | | 1a | | X |
| b Did it spend more than \$10 | 00 during the year (either directly or indirectly) for political purposes? See the instruction | s for the definitio | n | 1b | | X |
| If the answer is "Yes" to 1a | or 1b, attach a detailed description of the activities and copies of any materials published | ed or | | | | |
| distributed by the foundation | on in connection with the activities | | | | | |
| c Did the foundation file Form | m 1120-POL for this year? | | | 1c | | X |
| d Enter the amount (if any) of | of tax on political expenditures (section 4955) imposed during the year. | | | | | |
| (1) On the foundation. | S \$ \$ | 0. | | | | |
| e Enter the reimbursement (if | if any) paid by the foundation during the year for political expenditure tax imposed on fou | ındatıon | | l l | | I |
| managers > \$ | 0. | | | | ļ | i |
| 2 Has the foundation engaged | ed in any activities that have not previously been reported to the IRS? | | | 2 | | X |
| If "Yes," attach a detailed de | escription of the activities | | | 1 1 | ļ | Į |
| 3 Has the foundation made ar | any changes, not previously reported to the IRS, in its governing instrument, articles of in | corporation, or | | } | - | į |
| bylaws, or other similar inst | struments? If "Yes," attach a conformed copy of the changes | | | 3 | | <u> </u> |
| 4a Did the foundation have uni | nrelated business gross income of \$1,000 or more during the year? | | | 4a | | <u> </u> |
| b If "Yes," has it filed a tax retu | turn on Form 990-T for this year? | | N/A | 4b | | |
| 5 Was there a liquidation, terr | rmination, dissolution, or substantial contraction during the year? | | - | 5 | | <u>X</u> |
| If "Yes," attach the statemen | nt required by General Instruction T | | | 1 1 | | I |
| | ction 508(e) (relating to sections 4941 through 4945) satisfied either | | | l i | | i |
| By language in the govern | | | | 1 1 | | i |
| | effectively amends the governing instrument so that no mandatory directions that conflict | t with the state la | N | | - | Ì |
| remain in the governing ins | • | | | 6 | Х | |
| 7 Did the foundation have at I | least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and | Part XV | | 7 | Х | |
| _ | | | | | | i |
| | he foundation reports or with which it is registered. See instructions | | | - | | ı |
| IL | 75 - 20 25 11 21 2 | | | - | | ı |
| | e 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or desi | - | | | , | ı |
| | y General Instruction G? If "No," attach explanation | | | 8b | <u> </u> | |
| | status as a private operating foundation within the meaning of section 4942(j)(3) or 4942 | 2(J)(5) for calenda | 31 | | , | ı |
| | reginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV | | | 9 | Х | |
| 10 Dia any persons become su | substantial contributors during the tax year? If "Yes," attach a schedule listing their names and ac | dresses | | 10 | | X (2010) |
| | | | 1 | Form 990 | -rr(| (2019) |

923531 12-17-19

| | | 1 | Yes | No |
|----|---|----------|------|----------|
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of | | | |
| | section 512(b)(13)? If "Yes," attach schedule. See instructions | 11 | | X |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? | | | |
| | If "Yes," attach statement. See instructions | 12 | | X |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | Х | |
| | Website address ► PRAIRIECENTEROFTHEARTS.BLOGSPOT.COM | - | | |
| 14 | The books are in care of ► MICHELE J. RICHEY Telephone no. ► 309-67 | 3-5 | 589 | |
| | Located at ► 1412 S.W. WASHINGTON ST., PEORIA, IL ZIP+4 ►61 | 602 | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here | | ▶ | |
| | and enter the amount of tax-exempt interest received or accrued during the year | Ņ | /A | |
| 16 | At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, | | Yes | No |
| | securities, or other financial account in a foreign country? | 16 | | _X_ |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the | | | |
| | foreign country | | | |
| Pa | art VII-B Statements Regarding Activities for Which Form 4720 May Be Required | , | , | |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | Yes | No |
| 1a | During the year, did the foundation (either directly or indirectly). | | | |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No | | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | | | |
| | a disqualified person? | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? X Yes No | | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | | | |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available | | | |
| | for the benefit or use of a disqualified person)? | | | |
| | (6) Agree to pay money or property to a government official? (Exception Check "No" | | | |
| | If the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) Yes X No | | | |
| | | | | |
| C | of any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations | | | v |
| | section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions | 16 | | <u> </u> |
| | Organizations relying on a current notice regarding disaster assistance, check here | | ! | |
| · | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2019? | 10 | | X |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation | 1c | | |
| 2 | defined in section 4942(j)(3) or 4942(j)(5)): | | | |
| , | At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines) | | | |
| Ĭ | 6d and 6e) for tax year(s) beginning before 2019? | | | |
| | If "Yes," list the years \[\bigs | | | |
| t | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect | | | |
| | valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer *No* and attach | | | |
| | statement - see instructions) N/A | 2b | | |
| | : If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here | | | |
| | > | | | |
| 38 | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time | | | |
| | during the year? | | | |
| t | If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after | 1 | | |
| | May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose | | | |
| | of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, | 1 | | |
| | Schedule C, to determine if the foundation had excess business holdings in 2019.) N/A | 3b | ļ | |
| | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | <u>X</u> |
| t | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that | | | • |
| | had not been removed from jeopardy before the first day of the tax year beginning in 2019? | 4b |) Dr | <u>X</u> |
| | Fo | rm 991 |)-PF | (2019) |

| Part VII-B Statements Regarding Activities for Which F | orm 4/20 May be h | equirea (continu | jeaj T | V | l Nia |
|--|---|-----------------------------|--|--|---------------------|
| 5a During the year, did the foundation pay or incur any amount to: | | <u></u> ,, | | Yes | No |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section | | | s X No | | |
| (2) Influence the outcome of any specific public election (see section 4955); o | r to carry on, directly or indire | | s X No | | 1 |
| any voter registration drive? | , | | s X No | | 1 |
| (3) Provide a grant to an individual for travel, study, or other similar purposes' | | те | מאנבבו אי | | İ |
| (4) Provide a grant to an organization other than a charitable, etc., organization | described in section | | s X No | 1 | ł |
| 4945(d)(4)(A)? See instructions | or adventional avenues or t | | S LALINO | | |
| (5) Provide for any purpose other than religious, charitable, scientific, literary, | or educational purposes, or it | | s X No | | |
| the prevention of cruelty to children or animals? | lor the eventuese described in | • | מו שו מ | | |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und section 53 4945 or in a current notice regarding disaster assistance? See instru | | i negulations | N/A | 5b | |
| Organizations relying on a current notice regarding disaster assistance, check h | | | | - | |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr | | ned | | 1 | 1 |
| expenditure responsibility for the grant? | | | s 🔲 No | | |
| If Yes, attach the statement required by Regulations section 53.4945-5(d). | , - \ | , | | | |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to | pay premiums on | | | | |
| a personal benefit contract? | , p | Ye | s X No | | |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a p | ersonal benefit contract? | | | 6b | X |
| If "Yes" to 6b, file Form 8870 | | • | | | |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax s | helter transaction? | Ye | s X No | | |
| b If Yes," did the foundation receive any proceeds or have any net income attribu | | | N/A | 7b | |
| 8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$ | | | | | |
| excess parachute payment(s) during the year? | | | s X No | ļ | |
| Part VIII Information About Officers, Directors, Trusto Paid Employees, and Contractors | ees, Foundation Ma | nagers, Highly | <i>'</i> | | |
| 1 List all officers, directors, trustees, and foundation managers and t | neir compensation. | | | | |
| | (b) Title, and average hours per week devoted | (c) Compensation | (d) Contributions to employee benefit plans | (e) Ex | pense it, other |
| (a) Name and address | to position | (If not paid, enter -0-) | and defensed compensation | allow | ances |
| MICHELE J. RICHEY | PRESIDENT | | | 1 | |
| 1412 S.W. WASHINGTON ST. | | | | | |
| PEORIA, IL 61602 | 20.00 | 0. | 0. | | 0. |
| | SECRETARY/TRE | ASURER | | | |
| 1412 S.W. WASHINGTON ST. | | | | | |
| PEORIA, IL 61602 | 20.00 | 0. | 0. | - | 0. |
| | DIRECTOR | | | | |
| 1412 S.W. WASHINGTON ST. | 0.00 | | • | | • |
| PEORIA, IL 61602 | 2.00 | 0. | 0. | | 0. |
| | | | | | |
| | | | | | |
| 2 Compensation of five highest-paid employees (other than those inc | luded on line 1). If none. | enter "NONE." | | i | |
| | (b) Title, and average | | (d) Contributions to employee benefit plans and deterred | (e) E) | pense nt, other |
| (a) Name and address of each employee paid more than \$50,000 | hours per week devoted to position | (c) Compensation | and deterred compensation | accour | nt, other ances |
| NONE | governor to produce | | | | |
| *************************************** | | | | | |
| | | | | | |
| | | 1 | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | } | |
| | | <u> </u> | <u> </u> | <u> </u> | |
| Total number of other employees paid over \$50,000 | | · | | 000 5 | 0 |
| | | | Form | 990-PI | - (2019) |

| | **-***8799 | Page 7 |
|--|-------------------|-------------|
| Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) | | |
| 3 Five highest-paid independent contractors for professional services. If none, enter "NONE." | | · |
| (a) Name and address of each person paid more than \$50,000 (b) Type of service | ce (c) Co | mpensation |
| NONE | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | İ | |
| Total number of others receiving over \$50,000 for professional services. | ▶ | 0 |
| Part IX-A Summary of Direct Charitable Activities | | |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. | Expens | es |
| 1 | | |
| SEE STATEMENT 7 | | 7,288. |
| 2 | | ,200. |
| | \rightarrow | |
| | | |
| 3 | | |
| | | |
| | | |
| 4 | | |
| | | |
| | | <u> </u> |
| Part IX-B Summary of Program-Related Investments | | |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. | Amour | <u> </u> |
| 1 <u>N/A</u> | | |
| | | |
| | | |
| 2 | - | |
| | - | |
| All other program-related investments. See instructions | | |
| 3 | | |
| <u> </u> | — | |
| | | |
| | | |
| | | |
| | | |
| Total. Add lines 1 through 3 | > | 0. |
| | Form 990 - | -PF (2019) |

| P | art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four | ndations, se | e instructions) |
|----|--|------------------|------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes | | |
| a | Average monthly fair market value of securities | 1a | 0. |
| b | Average of monthly cash balances | 1b | 277,834. |
| | Fair market value of all other assets | 10 | |
| d | Total (add lines 1a, b, and c) | 1d | 277,834. |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) 1e 0. | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0. |
| 3 | Subtract line 2 from line 1d | 3 | 277,834. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 4,168. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 273,666. |
| 6 | Minimum investment return Enter 5% of line 5 | 6 | 13,683. |
| P | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an | d certain | |
| | foreign organizations, check here 🕨 🗶 and do not complete this part.) | | |
| 1 | Minimum investment return from Part X, line 6 | 1 | |
| 2a | Tax on investment income for 2019 from Part VI, line 5 | | |
| b | Income tax for 2019. (This does not include the tax from Part VI.) | | |
| C | Add lines 2a and 2b | 2c | |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | |
| 5 | Add lines 3 and 4 | 5 | |
| 6 | Deduction from distributable amount (see instructions) | 6 | |
| 7_ | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7 | |
| P | art XII Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | |
| а | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | 1a | 13,079. |
| b | Program-related investments - total from Part IX-B | 1b | 0. |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes | 2 | 217. |
| 3 | Amounts set aside for specific charitable projects that satisfy the. | | |
| а | Suitability test (prior IRS approval required) | 3a | |
| b | Cash distribution test (attach the required schedule) | 3b | |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4 | 4 | 13,296. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment | | |
| | income Enter 1% of Part I, line 27b | 5 | 0. |
| 6 | Adjusted qualifying distributions Subtract line 5 from line 4 | 6 | 13,296. |
| | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (| qualifies for th | e section |

Form **990-PF** (2019)

4940(e) reduction of tax in those years.

| Part XIII Undistributed Income (see | instructions) | N/A | | |
|--|--|---------------------|--------------|----------|
| | (a) | (b) | (c) | (d) |
| | Corpus | Years prior to 2018 | 2018 | 2019 |
| 1 Distributable amount for 2019 from Part XI, | - | | | - |
| line 7 | | | | |
| 2 Undistributed income if any, as of the end of 2019 | | | | |
| a Enter amount for 2018 only | | | | İ |
| b Total for prior years: | | | | |
| , , | | | | |
| 3 Excess distributions carryover, if any, to 2019: | | | | |
| a From 2014 | | | | |
| b From 2015 | | | | |
| c From 2016 | | | Ì | |
| d From 2017 | | | | |
| e From 2018 | | | | |
| f Total of lines 3a through e | | | | |
| 4 Qualifying distributions for 2019 from | | | | |
| Part XII, line 4: ► \$ | | | | |
| a Applied to 2018, but not more than line 2a | | | | |
| b Applied to undistributed income of prior | | | | |
| years (Election required - see instructions) | | | | |
| c Treated as distributions out of corpus | | | | |
| (Election required - see instructions) | | | 1 | |
| d Applied to 2019 distributable amount | | | | <u> </u> |
| e Remaining amount distributed out of corpus | | | | |
| 5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a)) | | | | |
| 6 Enter the net total of each column as indicated below: | | | | |
| 8 Corpus Add knes 3f, 4c, and 4e Subtract line 5 | | | | |
| b Prior years' undistributed income. Subtract | | | | |
| line 4b from line 2b | | | | |
| c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed | | | | |
| d Subtract line 6c from line 6b. Taxable | | | | - |
| amount - see instructions | | | | |
| e Undistributed income for 2018. Subtract line | ·· | | | |
| 4a from line 2a. Taxable amount - see instr. | | | | |
| f Undistributed income for 2019. Subtract | | | | |
| lines 4d and 5 from line 1. This amount must | | | | |
| be distributed in 2020 | | | | |
| 7 Amounts treated as distributions out of | | | | |
| corpus to satisfy requirements imposed by | | | | |
| section 170(b)(1)(F) or 4942(g)(3) (Election | | | | } |
| may be required - see instructions) | | | | |
| 8 Excess distributions carryover from 2014 | | | | |
| not applied on line 5 or line 7 | | | | |
| 9 Excess distributions carryover to 2020 | | | | |
| Subtract lines 7 and 8 from line 6a | | | | |
| 10 Analysis of line 9: | | | | |
| a Excess from 2015 | | | | |
| b Excess from 2016 | | | | |
| c Excess from 2017 | | | | |
| d Excess from 2018 | | | | |
| e Excess from 2019 | | | <u> </u> | <u> </u> |

Form **990-PF** (2019)

17600401

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors.

PRAIRIE CENTER OF THE ARTS **-***8799 Supplementary Information (continued) Part XV 3 Grants and Contributions Pald During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to status of recipient Amount any foundation manager Name and address (home or business) or substantial contributor a Paid during the year ARTSPARTNERS OF CENTRAL ILLINOIS, N/A ÞС ARTSPARTNERS OF INC. CENTRAL ILLINOIS, INC. 820 SW ADAMS ST PROMOTES THE ARTS AS A PEORIA, IL 61602 VITAL COMPONENT OF CENTRAL ILLINOIS' 1,400, **▶** 3a Total 1,400. b Approved for future payment NONE

Form **990-PF** (2019)

Total

923611 12-17-19

Part XVI-A Analysis of Income-Producing Activities

| Enter gross amounts unless otherwise indicated | Unrelated business income | | | ded by section 512, 513, or 514 | (e) |
|---|---------------------------------------|--|---------------|---------------------------------|-------------------|
| · | (a) Business | (b) | (c) Exclu- | (d) | Related or exempt |
| 1 Program service revenue | code | Amount | sion | Amount | function income |
| a APPLICATION FEES | 900099 | | | | 75. |
| b CLASS FEES | 900099 | | | | 2,524. |
| c INDIVIDUAL DUES | 900099 | | | | 100. |
| d | | | | | |
| e | | | | | |
| f | | | | | |
| Fees and contracts from government agencies | | | - | | |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash | | | | | |
| investments | | | 14 | 3,526. | |
| 4 Dividends and interest from securities | | | | 5,020, | |
| 5 Net rental income or (loss) from real estate. | | | | | |
| a Debt-financed property | | | | | |
| h Not deht-financed property | | | | | |
| 6 Net rental income or (loss) from personal | | | - | | |
| · ' ' | | | | | |
| property | <u> </u> | | | | |
| 7 Other investment income | | • | | | |
| 8 Gain or (loss) from sales of assets other | | | | | |
| than inventory | | | - | | |
| 9 Net income or (loss) from special events | | | - | | |
| 10 Gross profit or (loss) from sales of inventory | | | | | |
| 11 Other revenue | | | | | 2.5 |
| a MISCELLANEOUS REVENUE | 900099 | | | | 37. |
| b | | | | | |
| C | | | | | |
| d | | | | <u> </u> | |
| e | | | | | |
| 12 Subtotal. Add columns (b), (d), and (e) | | 0. | <u> </u> | 3,526. | 2,736. |
| 13 Total Add line 12, columns (b), (d), and (e) | | | | 13 _ | 6,262. |
| (See worksheet in line 13 instructions to verify calculations.) | | | | | |
| Part XVI-B Relationship of Activities to | the Acc | omplishment of Ex | emp | t Purposes | |
| Line No. Explain below how each activity for which incor | ne is reported | in column (e) of Part XVI-A | contril | buted importantly to the accor | nplishment of |
| ▼ the foundation's exempt purposes (other than t | | | | , . | · |
| 1A-C CASH IS RECEIVED TO SER | VE VIS | ITING ARTIST | S, | WHICH IS A DI | RECT |
| CHARITABLE ACTIVITY OF | THE FO | UNDATION. | | | |
| 11A CASH IS RECEIVED TO SER | | | S, | WHICH IS A DI | RECT |
| CHARITABLE ACTIVITY OF | | | | | |
| | | | | | |
| | · · · · · · · · · · · · · · · · · · · | | | | |
| | | · · · · · · · · · · · · · · · · · · · | | | |
| | | | | ···· | |
| | | | | | |
| | | ······································ | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

| Form 990-PF (2 | 2019) PRAIRIE CENTER OF | THE ARTS | **_** | 3799 Page 13 |
|----------------|---|--|---|--|
| Part XVII | Information Regarding Transfers | to and Transactions an | d Relationships With Nonchar | table |
| 4 D.d.th | Exempt Organizations | | | Waa Na |
| | rganization directly or indirectly engage in any of the f | | described in section 501(c) | Yes No |
| | in section 501(c)(3) organizations) or in section 527, from the reporting foundation to a noncharitable exe | | | |
| (1) Cash | | inprorganization of. | | 1a(1) X |
| (2) Other | • | | • | 1a(1) X 1a(2) X |
| b Other tran | • | • • • • | | 10(2) |
| (1) Sales | s of assets to a noncharitable exempt organization | | | 1b(1) X |
| | hases of assets from a noncharitable exempt organiza | | | 1b(2) X |
| (3) Renta | al of facilities, equipment, or other assets | | | 1b(3) X |
| (4) Reim | bursement arrangements | | | 1b(4) X |
| | s or loan guarantees | | | 1b(5) X |
| | ormance of services or membership or fundraising so | , | | 1b(6) X |
| | of facilities, equipment, mailing lists, other assets, or p | | | 1c X |
| d If the ansi | wer to any of the above is "Yes," complete the following | ig schedule. Column (b) should alwa | lys show the fair market value of the goods, o | ther assets, |
| | is given by the reporting foundation. If the foundation if the value of the goods, other assets, or services rec | | in any transaction or snaring arrangement, sr | low in |
| (a) Line no | | aritable exempt organization | (d) Description of transfers, transactions, and s | haring arrangements |
| • | | /A | (-, | and an angerments |
| | | <u> </u> | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| - | | | | |
| | | | | - · · · · · · · · · · · · · · · · · · · |
| | | | | |
| | | | | |
| | | | | |
| 2a Is the fou | ndation directly or indirectly affiliated with, or related | to, one or more tax-exempt organiza | tions described | |
| in section | 501(c) (other than section 501(c)(3)) or in section 5 | 27? | | Yes X No |
| b If Yes, c | omplete the following schedule. | · · · · · · · · · · · · · · · · · · · | | · |
| | (a) Name of organization | (b) Type of organization | (c) Description of relationsh | <u>. </u> |
| | N/A | | | |
| | | | | |
| | | | | |
| | | | | |
| | penalties of perjury, I declare that have examined this return | | | |
| Sign and b | elief, it is true, correct, and complete Declaration of pregarer (o | ther than taxpayer) is based on all informat | retur | the IRS discuss this n with the preparer on below? See instr |
| Here | Virgilia & Richard | 1/0/15/20 | | Yes No |
| Sign | nature of officer or trustee (| Date | Title | |
| - | Print/Type preparer's name Prepa | rer's signature | Date Check if PTIN | |
| | | | self- employed | |
| Paid | | | | 072158 |
| Preparer | Firm's name ► HEINOLD BANWART | , LTD. | Firm's EIN ► **-** | *6235 |
| Use Only | Firm's address > 201 GT COTT | D DDTII | | |
| | Firm's address ► 201 CLOCK TOWE | | Dh /300\0 | 04 4051 |
| | EAST PEORIA, I | D 01011-2442 | | 94-4251 m 990-PF (2019) |

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No 1545-0047

Employer identification number

| | PRAIRIE CENTER OF THE ARTS | **-***8799 | | | |
|--|---|---|--|--|--|
| Organization type (chec | | | | | |
| Filers of: | Section: | | | | |
| Form 990 or 990 EZ | 501(c)() (enter number) organization | | | | |
| | 4947(a)(1) nonexempt charitable trust not treated as a private foundation | | | | |
| | 527 political organization | | | | |
| Form 990-PF | X 501(c)(3) exempt private foundation | | | | |
| | 4947(a)(1) nonexempt charitable trust treated as a private foundation | | | | |
| | 501(c)(3) taxable private foundation | | | | |
| | n is covered by the General Rule or a Special Rule . (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Speci | al Rule See instructions | | | |
| General Rule | | | | | |
| | tion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions to any one contributor. Complete Parts I and II. See instructions for determining a contrib | | | | |
| Special Rules | | | | | |
| sections 509(a)(any one contribi | tion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% sup (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990 EZ), Part II, line 13, utor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the a EZ, line 1 Complete Parts I and II | 16a, or 16b, and that received from | | | |
| For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III | | | | | |
| For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this bound is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year. | | | | | |
| = | that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule | • | | | |
| | on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on et the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF) | its Form 990 PF, Part I, line 2, to | | | |
| LHA For Paperwork Redu | iction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Sche | dule B (Form 990, 990-EZ, or 990-PF) (2019) | | | |

Name of organization

Employer identification number

| <u> </u> | PRAIRIE CE | ENTER OF | THE | ARTS | | |
|----------|------------|----------|-----|------|--|--|
|----------|------------|----------|-----|------|--|--|

-*8799

| Part I | Contributors (see instructions) Use duplicate copies of Part I | if additional space is needed | |
|------------|--|-------------------------------|---|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | JOSEPH AND MICHELE RICHEY 1412 SW WASHINGTON ST PEORIA, IL 61602 | \$ 10,000. | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Onncash Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |

Name of organization

Employer identification number

PRAIRIE CENTER OF THE ARTS

-*8799

| Part II | Noncash Property (see instructions). Use duplicate copies of P | art II if additional space is needed | |
|------------------------------|--|--|----------------------|
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| - | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | s | · |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| - - - | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| _ | | \$ | |

| Name of or | rganization | | | Employer identification number |
|---------------------------|---|---|------------------------|--------------------------------|
| PRAIR | IE CENTER OF THE ARTS | | | **-***8799 |
| Part III | Exclusively religious, charitable, etc., contributo from any one contributor. Complete columns (a) to completing Part III, enter the total of exclusively religious, chart Use duplicate copies of Part III if additional s | hrough (e) and the following line en aritable, etc., contributions of \$1,000 or | try. For organizations | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Des | cription of how gift is held |
| | | | | |
| | | (e) Transfer of gif | it | |
| _ | Transferee's name, address, and | 1 ZIP + 4 | Relationship of tr | ansferor to transferee |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Des | cription of how gift is held |
| | | | | |
| | | (e) Transfer of gif | tt | |
| | Transferee's name, address, and | 3 ZIP + 4 | Relationship of tr | ansferor to transferee |
| | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Des | cription of how gift is held |
| | | | | |
| | _ | (e) Transfer of gif | | |
| | Transferee's name, address, and | 1 ZIP + 4 | Relationship of tr | ansferor to transferee |
| (a) No. from | (b) Purpose of gift | (c) Use of gift | (d) Des | cription of how gift is held |
| Part I | | | | |
| | | (e) Transfer of gif | ft | |
| | Transferee's name, address, and | 1 ZIP + 4 | Relationship of tr | ansferor to transferee |
| | | | | |

| FORM 990-PF INTEREST ON SAV | INGS AND TE | MPORARY CASH | INVESTMENTS | STATEMENT 1 |
|---|------------------------------|-----------------------------|-----------------------------------|-------------------------------|
| SOURCE | REVI | A) ENUE NET BOOKS | (B) INVESTMENT INCOME | (C) ADJUSTED NET INCOME |
| CEFCU | | 3,526. | 3,526. | 3,526. |
| TOTAL TO PART I, LINE 3 | | 3,526. | 3,526. | 3,526. |
| FORM 990-PF | OTHER I | INCOME | | STATEMENT 2 |
| DESCRIPTION | | (A) REVENUE PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME |
| APPLICATION FEES CLASS FEES INDIVIDUAL DUES MISCELLANEOUS REVENUE | _ | 75 2,524 100 37 | . 0. | 2,524. 100. |
| TOTAL TO FORM 990-PF, PART I | , LINE 11 == | 2,736 | 0. | 2,736. |
| FORM 990-PF | ACCOUNT | ING FEES | | STATEMENT 3 |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST MENT INCOM | | |
| ACCOUNTING | 2,090 | , | 0. | 2,090. |
| TO FORM 990-PF, PG 1, LN 16B | 2,090 | . (| <u> </u> | 2,090. |

| FORM 990-PF (| OTHER PROFES | SIONAL FEES | ST | PATEMENT 4 |
|--------------------------------|----------------------------------|---|-----------------------------|-------------------------------|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | | (D) CHARITABLE PURPOSES |
| INSTRUCTORS | 500. | 0. | 0. | 500. |
| TO FORM 990-PF, PG 1, LN 16C = | 500. | 0. | 0. | 500. |
| FORM 990-PF | TAX | ES | ST | PATEMENT 5 |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | | (D) CHARITABLE PURPOSES |
| OTHER TAXES | 65. | 0. | 0. | 65. |
| TO FORM 990-PF, PG 1, LN 18 = | 65. | 0. | 0. | 65. |
| | | | | |
| FORM 990-PF | OTHER E | XPENSES | ST | CATEMENT 6 |
| FORM 990-PF DESCRIPTION | OTHER E (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED | (D) CHARITABLE PURPOSES |
| | (A) EXPENSES | (B) NET INVEST- MENT INCOME 0. 0. 0. 0. 0. 0. 0. 0. 0. | (C) ADJUSTED NET INCOME 0. | (D) CHARITABLE |

| FORM 990-PF | SUMMARY | OF | DIRECT | CHARITABLE | ACTIVITIES | STATEMENT | 7 |
|--------------|---------|----|--------|------------|------------|-----------|---|
| ACTIVITY ONE | | | | | | | |

VISITING ARTISTS AND GALLERY EXHIBITIONS PROGRAM: HOST RECEPTION FOR VISITING ARTIST; PROVIDE PUBLICITY FOR GALLERY EXHIBITIONS AND STIPEND FOR EXHIBITING ARTISTS; PROVIDE COMMUNITY PRINT SHOP TO TEACH CLASSES; 6 VISITING ARTISTS WERE RECEIVED IN 2019.

| | EXPENSES | |
|-----------------------------------|-----------|-----|
| TO FORM 990-PF, PART IX-A, LINE 1 | 17,28 | 38. |
| FORM 990-PF PART XV - LINE 1A | STATEMENT | 8 |
| LIST OF FOUNDATION MANAGERS | | |

NAME OF MANAGER

MICHELE J. RICHEY JOSEPH RICHEY, JR. FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

9

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

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

TELEPHONE NUMBER

309-673-5589

FORM AND CONTENT OF APPLICATIONS

INFORMATION SHOULD INCLUDE A DESCRIPTION OF THE AREA OF ART.

ANY SUBMISSION DEADLINES

OPEN APPLICATIONS FOR LOCAL ARTISTS.

RESTRICTIONS AND LIMITATIONS ON AWARDS

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

| FORM 990-PF INTEREST ON SAVI | NGS AND TEM | PORARY CASH | INVESTMENTS | STATEMENT 1 |
|---|------------------------------|---------------------------------|-----------------------------------|-------------------------------|
| SOURCE | (A REVE PER B | NUE NET | (B) INVESTMENT INCOME | (C) ADJUSTED NET INCOME |
| CEFCU | | 3,526. | 3,526. | 3,526. |
| TOTAL TO PART I, LINE 3 | | 3,526. | 3,526. | 3,526. |
| FORM 990-PF | OTHER I | NCOME | | STATEMENT 2 |
| DESCRIPTION | | (A) REVENUE PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME |
| APPLICATION FEES CLASS FEES INDIVIDUAL DUES MISCELLANEOUS REVENUE | | 75. 2,524. 100. 37. | . 0. | . 2,524. . 100. |
| TOTAL TO FORM 990-PF, PART I, | LINE 11 | 2,736 | . 0 | 2,736. |
| FORM 990-PF | ACCOUNTI | NG FEES | | STATEMENT 3 |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST MENT INCOM | | |
| ACCOUNTING | 2,090. | (| 0. | 2,090. |
| TO FORM 990-PF, PG 1, LN 16B | 2,090. | (| 0. | 2,090. |

| FORM 990-PF C | OTHER PROFES | SIONAL FEES | STATEMENT 4 | | |
|--|--|-----------------------------------|--|--|--|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES | |
| INSTRUCTORS | 500. | 0. | 0. | 500. | |
| TO FORM 990-PF, PG 1, LN 16C = | 500. | 0. | 0. | 500. | |
| FORM 990-PF | TAX | ES | ST | 'ATEMENT 5 | |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES | |
| OTHER TAXES | 65. | 0. | 0. | 65. | |
| TO FORM 990-PF, PG 1, LN 18 = | 65. | 0. | 0. | 65. | |
| FORM 990-PF | OTHER E | XPENSES | Sī | PATEMENT 6 | |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES | |
| MEMBERSHIP DUES INSURANCE POSTAGE, SHIPPING & DELIVERY MISCELLANEOUS SUPPLIES RECEPTION EXPENSE COMPUTER VISITING ARTISTS BANK AND CREDIT CARD FEES MAINTENANCE PUBLIC FORUM ADVERTISING | 800. 1,636. 88. 27. 1,364. 2,645. 140. 1,000. 27. 147. 750. 63. | 0. 0. 0. 0. 0. | 0. 0. 0. 0. 0. 0. 0. | 800. 1,636. 88. 27. 1,364. 2,645. 140. 1,000. 27. 147. 750. 63. | |
| TO FORM 990-PF, PG 1, LN 23 | 8,687. | | 0. | 8,687 | |

FORM 990-PF SUMMARY OF DIRECT CHARITABLE ACTIVITIES STATEMENT 7

ACTIVITY ONE

VISITING ARTISTS AND GALLERY EXHIBITIONS PROGRAM: HOST RECEPTION FOR VISITING ARTIST; PROVIDE PUBLICITY FOR GALLERY EXHIBITIONS AND STIPEND FOR EXHIBITING ARTISTS; PROVIDE COMMUNITY PRINT SHOP TO TEACH CLASSES; 6 VISITING ARTISTS WERE RECEIVED IN 2019.

| | EXPENSES | |
|---|-----------|-----|
| TO FORM 990-PF, PART IX-A, LINE 1 | 17,28 | 88. |
| FORM 990-PF PART XV - LINE 1A LIST OF FOUNDATION MANAGERS | STATEMENT | 8 |

NAME OF MANAGER

MICHELE J. RICHEY JOSEPH RICHEY, JR. FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION
PART XV, LINES 2A THROUGH 2D

STATEMENT

9

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

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

TELEPHONE NUMBER

309-673-5589

FORM AND CONTENT OF APPLICATIONS

INFORMATION SHOULD INCLUDE A DESCRIPTION OF THE AREA OF ART.

ANY SUBMISSION DEADLINES

OPEN APPLICATIONS FOR LOCAL ARTISTS.

RESTRICTIONS AND LIMITATIONS ON AWARDS

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