

## Return of Organization Exempt From Income Tax

OMB No 1545-0047

2001

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2001 calendar year, or tax year beginning

07/01, 2001, and ending 06/30/2002

B Check if applicable

- ☐ Address change  
☐ Name change  
☐ Initial return  
☐ Final return  
☐ Amended return  
☐ Application pending

Please use IRS label or print or type See Specific Instructions.

C Name of organization

GREATER LOUISVILLE FUND FOR THE ARTS

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

Room/suite

623 WEST MAIN STREET

City or town, state or country, and ZIP + 4

LOUISVILLE, KY 40202

D Employer identification number

61-0479626

E Telephone number

(502) 582-0100

F Accounting method

☐ Cash☒ Accrual

Other (specify) ▶

- Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)

H and I are not applicable to section 527 organizations

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) If "Yes" enter number of affiliates ▶

H(c) Are all affiliates included? (If "No" attach a list. See instructions.) ☐ Yes ☒ NoH(d) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☒ No

I Enter 4-digit GEN ▶

M Check ☐ if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF)

G Web site ▶

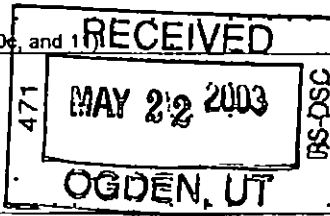
J Organization type (check only one) ☒ 501(c) ( 3 ) (insert no) ☐ 4947(a)(1) or ☐ 527K Check here ☐ if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

L Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12 ▶

8,217,557

## Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Specific Instructions on page 16)

Revenue	1	Contributions, gifts, grants, and similar amounts received STMT 1			
	a	Direct public support	1a	7,887,931	
	b	Indirect public support	1b	155,944	
	c	Government contributions (grants)	1c	550,000	
	d	Total (add lines 1a through 1c) (cash \$ 8,593,875 noncash \$ )	1d	8,593,875	
	2	Program service revenue including government fees and contracts (from Part VII, line 93)		2	
	3	Membership dues and assessments		3	
	4	Interest on savings and temporary cash investments		4	
	5	Dividends and interest from securities		5	68,001
	6a	Gross rents	6a		
b	Less rental expenses	6b			
c	Net rental income or (loss) (subtract line 6b from line 6a)		6c		
7	Other investment income (describe ▶ )		7		
Expenses	8a	Gross amount from sales of assets other than inventory	(A) Securities	(B) Other	
	b	Less cost or other basis and sales expenses	8a		
	c	Gain or (loss) (attach schedule)	8b		
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8c		
	8d			8d	565
	9	Special events and activities (attach schedule)			
	a	Gross revenue (not including \$ of contributions reported on line 1a)	9a		
	b	Less direct expenses other than fundraising expenses	9b		
	c	Net income or (loss) from special events (subtract line 9b from line 9a)		9c	
	10a	Gross sales of inventory, less returns and allowances	10a		
b	Less cost of goods sold	10b			
c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)		10c		
11	Other revenue (from Part VII, line 103)		11	-444,884	
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)		12	8,217,557	
Net Assets	13	Program services (from line 44, column (B))		13	6,662,761
	14	Management and general (from line 44, column (C))		14	506,253
	15	Fundraising (from line 44, column (D))		15	885,900
	16	Payments to affiliates (attach schedule)		16	
	17	Total expenses (add lines 16 and 44, column (A))		17	8,054,914
	18	Excess or (deficit) for the year (subtract line 17 from line 12)		18	162,643
	19	Net assets or fund balances at beginning of year (from line 73, column (A))		19	3,217,985
	20	Other changes in net assets or fund balances (attach explanation) STMT 3		20	-55,674
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)		21	3,324,954



For Paperwork Reduction Act Notice, see the separate Instructions

Form 990 (2001)

22

**Part II Statement of Functional Expenses**

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See Specific Instructions on page 21.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) (cash \$ <u>6,424,756</u> noncash \$ <u>STMT 17</u> )	22 6,424,756	6,424,756		
23 Specific assistance to individuals (attach schedule)	23			
24 Benefits paid to or for members (attach schedule)	24			
25 Compensation of officers, directors, etc	25 238,362	47,672	95,345	95,345
26 Other salaries and wages	26 419,193	34,299	61,611	323,283
27 Pension plan contributions	27 77,739	8,833	21,337	47,569
28 Other employee benefits	28 86,524	9,831	23,748	52,945
29 Payroll taxes	29 41,350	4,358	8,976	28,016
30 Professional fundraising fees	30			
31 Accounting fees	31 22,500		22,500	
32 Legal fees	32 8,946		8,946	
33 Supplies	33 15,118	1,251	4,758	9,109
34 Telephone	34 24,732	1,981	7,895	14,856
35 Postage and shipping	35 34,051	876	3,136	30,039
36 Occupancy	36 32,790	1,581	19,347	11,862
37 Equipment rental and maintenance	37			
38 Printing and publications	38 21,664	1,771	6,609	13,284
39 Travel	39 6,099	205	821	5,073
40 Conferences, conventions, and meetings	40 21,496	382	14,909	6,205
41 Interest	41			
42 Depreciation depletion etc (attach schedule)	42 6,325	507	2,026	3,792
43 Other expenses not covered above (itemize) <u>STMT 20</u>	43a 573,269	124,458	204,289	244,522
b	43b			
c	43c			
d	43d			
e	43e			
44 Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44 8,054,914	6,662,761	506,253	885,900

Joint Costs Check ☐ if you are following SOP 98-2Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ☐ Yes ☒ No

If "Yes," enter (i) the aggregate amount of these joint costs \$ \_\_\_\_\_, (ii) the amount allocated to Program services \$ \_\_\_\_\_

(iii) the amount allocated to Management and general \$ \_\_\_\_\_, and (iv) the amount allocated to Fundraising \$ \_\_\_\_\_

**Part III Statement of Program Service Accomplishments** (See Specific Instructions on page 24.)What is the organization's primary exempt purpose? STMT 5

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses  
(Required for 501(c)(3) and (4) orgs. and 4947(a)(1) trusts but optional for others.)

a <u>STMT 6</u>	(Grants and allocations \$ _____)	
b <u>STMT 6</u>	(Grants and allocations \$ _____)	
c	(Grants and allocations \$ _____)	
d	(Grants and allocations \$ _____)	
e Other program services (attach schedule)	(Grants and allocations \$ _____)	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)		6,662,761

**Part IV Balance Sheets** (See Specific Instructions on page 24 )

Note	Where required, attached schedules and amounts within the description column should be for end-of-year amounts only	(A) Beginning of year	(B) End of year
45	Cash - non-interest-bearing		45
46	Savings and temporary cash investments	1,812,065	46 1,243,317
47a	Accounts receivable	47a	
b	Less allowance for doubtful accounts	47b	47c
48a	Pledges receivable	48a 5,236,434	
b	Less allowance for doubtful accounts	48b 673,951	48c 4,562,483
49	Grants receivable		49
50	Receivables from officers, directors, trustees, and key employees (attach schedule)	3,039	50 2,338
51a	Other notes and loans receivable (attach schedule)	STMT 7 51a 60,606	
b	Less allowance for doubtful accounts	51b 13,621	51c 46,985
52	Inventories for sale or use		52
53	Prepaid expenses and deferred charges	66,647	53 92,550
54	Investments - securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54
55a	Investments - land, buildings, and equipment basis	55a	
b	Less accumulated depreciation (attach schedule)	55b	55c
56	Investments - other (attach schedule)	STMT 8 760,501	56 1,980,527
57a	Land, buildings and equipment basis	STMT 8 57a 1,568,892	
b	Less accumulated depreciation (attach schedule)	STMT 19 57b 708,027	57c 860,865
58	Other assets (describe <input type="checkbox"/> STMT 9 )	63,183	58 53,401
59	<b>Total assets</b> (add lines 45 through 58) (must equal line 74)	7,933,963	59 8,842,466
60	Accounts payable and accrued expenses	82,036	60 115,328
61	Grants payable	4,141,225	61 5,402,184
62	Deferred revenue		62
63	Loans from officers, directors, trustees, and key employees (attach schedule)		63
64a	Tax-exempt bond liabilities (attach schedule)		64a
b	Mortgages and other notes payable (attach schedule)		64b
65	Other liabilities (describe <input type="checkbox"/> )	492,717	65 NONE
66	<b>Total liabilities</b> (add lines 60 through 65)	4,715,978	66 5,517,512
<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74</b>			
67	Unrestricted	3,114,723	67 2,989,663
68	Temporarily restricted	53,262	68 35,291
69	Permanently restricted	50,000	69 300,000
<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74</b>			
70	Capital stock, trust principal, or current funds		70
71	Paid-in or capital surplus, or land, building, and equipment fund		71
72	Retained earnings, endowment, accumulated income, or other funds		72
73	<b>Total net assets or fund balances</b> (add lines 67 through 69 OR lines 70 through 72, column (A) must equal line 19, and column (B) must equal line 21)	3,217,985	73 3,324,954
74	<b>Total liabilities and net assets / fund balances</b> (add lines 66 and 73)	7,933,963	74 8,842,466

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organizations programs and accomplishments.

#### Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

<b>a</b> Total revenue, gains, and other support per audited financial statements	<b>a</b> 6,308,927	<b>a</b> Total expenses and losses per audited financial statements	<b>a</b> 6,201,958
<b>b</b> Amounts included on line a but not on line 12, Form 990 (1) Net unrealized gains on investments \$ -55,674 (2) Donated services and use of facilities \$ (3) Recoveries of prior year grants \$ (4) Other (specify) \$ Add amounts on lines (1) through (4)	<b>b</b> -55,674	<b>b</b> Amounts included on line a but not on line 17, Form 990 (1) Donated services and use of facilities \$ (2) Prior year adjustments reported on line 20, Form 990 \$ (3) Losses reported on line 20, Form 990 \$ (4) Other (specify) \$ Add amounts on lines (1) through (4)	<b>b</b>
<b>c</b> Line a minus line b	<b>c</b> 6,364,601	<b>c</b> Line a minus line b	<b>c</b> 6,201,958
<b>d</b> Amounts included on line 12, Form 990 but not on line a (1) Investment expenses not included on line 6b, Form 990 \$ (2) Other (specify) \$ <b>STMT 10</b> \$ 1,852,956 Add amounts on lines (1) and (2)	<b>d</b> 1,852,956	<b>d</b> Amounts included on line 17, Form 990 but not on line a (1) Investment expenses not included on line 6b, Form 990 \$ (2) Other (specify) \$ <b>STMT 11</b> \$ 1,852,956 Add amounts on lines (1) and (2)	<b>d</b> 1,852,956
<b>e</b> Total revenue per line 12, Form 990 (line c plus line d)	<b>e</b> 8,217,557	<b>e</b> Total expenses per line 17, Form 990 (line c plus line d)	<b>e</b> 8,054,914

**Part V** List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated, see Specific Instructions on page 26 )

[illegible]

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? ☐ Yes ☒ No  
If "Yes," attach schedule - see Specific Instructions on page 27

**Part VI Other Information** (See Specific Instructions on page 27 )

	Yes	No
<b>76</b> Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76	X
<b>77</b> Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	77	X
<b>78 a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78 a	N/A
<b>b</b> If "Yes," has it filed a tax return on Form 990-T for this year?	78 b	N/A
<b>79</b> Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
<b>80 a</b> Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80 a	X
<b>b</b> If "Yes," enter the name of the organization <b>FUND FOR THE ARTS PROPERTIES FOUNDATION, INC</b> and check whether it is <input checked="" type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt		
<b>81 a</b> Enter direct or indirect political expenditure See line 81 instructions	81 a	
<b>b</b> Did the organization file Form 1120-POL for this year?	81 b	N/A
<b>82 a</b> Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82 a	X
<b>b</b> If "Yes," you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III )	82 b	N/A
<b>83 a</b> Did the organization comply with the public inspection requirements for returns and exemption applications?	83 a	X
<b>b</b> Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83 b	X
<b>84 a</b> Did the organization solicit any contributions or gifts that were not tax deductible?	84 a	X
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84 b	N/A
<b>85 501(c)(4) (5) or (6) organizations</b> <b>a</b> Were substantially all dues nondeductible by members?	85 a	N/A
<b>b</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year	85 b	N/A
<b>c</b> Dues, assessments, and similar amounts from members	85 c	N/A
<b>d</b> Section 162(e) lobbying and political expenditures	85 d	N/A
<b>e</b> Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85 e	N/A
<b>f</b> Taxable amount of lobbying and political expenditures (line 85d less 85e)	85 f	N/A
<b>g</b> Does the organization elect to pay the section 6033(e) tax on the amount in 85f?	85 g	N/A
<b>h</b> If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85 h	N/A
<b>86 501(c)(7) orgs</b> Enter <b>a</b> Initiation fees and capital contributions included on line 12	86 a	N/A
<b>b</b> Gross receipts, included on line 12 for public use of club facilities	86 b	N/A
<b>87 501(c)(12) orgs</b> Enter <b>a</b> Gross income from members or shareholders	87 a	N/A
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )	87 b	N/A
<b>88</b> At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	X
<b>89 a 501(c)(3) organizations</b> Enter Amount of tax imposed on the organization during the year under section 4911 <b>N/A</b> , section 4912 <b>N/A</b> , section 4955 <b>N/A</b>		
<b>b 501(c)(3) and 501(c)(4) orgs</b> Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89 b	X
<b>c</b> Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		NONE
<b>d</b> Enter Amount of tax on line 89c, above, reimbursed by the organization		NONE
<b>90 a</b> List the states with which a copy of this return is filed <b>KENTUCKY</b>		
<b>b</b> Number of employees employed in the pay period that includes March 12, 2001 (See instructions)	90 b	13
<b>91</b> The books are in care of <b>MONICA BECKMANN</b> Telephone no <b>502-582-0100</b> Located at <b>623 WEST MAIN ST, LOUISVILLE, KENTUCKY</b> ZIP + 4 <b>40202</b>		
<b>92</b> Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year	92	N/A

**Part VII Analysis of Income-Producing Activities** (See Specific Instructions on page 32 )

Note Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a _____					
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities			14	68,001	
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	565	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue a _____					
b MISCELLANEOUS INC					55,116
c ALLOWANCE FOR					
d UNCOLL PLEDGES					-500,000
e _____					
104 Subtotal (add columns (B), (D), and (E))				68,566	-444,884
105 Total (add line 104, columns (B), (D), and (E))					-376,318

Note Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See Specific Instructions on page 32 )

Line No	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
103B	DETAILS SEE ATTACHED

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See Specific Instructions on page 33 )

(A) Name, address and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of year assets
	%			
	%			
	%			
	%			

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts** (See Specific Instructions on page 33 )

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Note If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

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.

Please Sign

Diane Connors

Date

5-14-03

CFP

Date

Check if

Preparer's SSN or PTIN (See Gen. Inst. W)

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

**Organization Exempt Under Section 501(c)(3)**

(Except Private Foundation) and Section 501(e), 501(f), 501(k),  
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

**Supplementary Information - (See separate instructions.)**

OMB No 1545-0047

**2001**

Department of the Treasury  
Internal Revenue Service

**▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization

**GREATER LOUISVILLE FUND FOR THE ARTS**

Employer identification number

**61-0479626**

**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**  
(See page 1 of the instructions List each one If there are none, enter "None")

(a) Name and address of each employee paid more than \$50 000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
MONICA BECKMANN 623 WEST MAIN STREET LOUISVILLE, KY 40202	CONTROLLER 40	53,145	8,868	
BARBARA SEXTON SMITH 623 WEST MAIN STREET	CAMPAIGN OFFICER 40	112,056	17,284	
Total number of other employees paid over \$50,000 . . . . .	▶ NONE			

**Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services**  
(See page 2 of the instructions List each one (whether individuals or firms) If there are none, enter "None")

(a) Name and address of each independent contractor paid more than \$50 000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50 000 for professional services . . . . .	▶ NONE	

For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ

Schedule A (Form 990 or 990-EZ) 2001

**Part III** Statements About Activities (See page 2 of the instructions)

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ (Must equal amount on line 38, Part VI-A, or line 1 or Part VI-B) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a Sale, exchange, or leasing of property? . . . . .		X
b Lending of money or other extension of credit? . . . . .		X
c Furnishing of goods, services, or facilities? . . . . .		X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? . . . . .	X	
e Transfer of any part of its income or assets? . . . . .		X
3 Does the organization make grants for scholarships, fellowships, student loans, etc.? (See Note below.)	X	
4 Do you have a section 403(b) annuity plan for your employees?		X
<b>Note.</b> Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments.		

**Part IV** Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions)

The organization is not a private foundation because it is (Please check only ONE applicable box.)

- 5 ☐ A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 ☐ A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 ☐ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 ☐ A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ▶ \_\_\_\_\_
- 10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the Support Schedule in Part IV-A.)
- 11 a ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.) **STMT 18**
- 11 b ☐ A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)
- 12 ☐ 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 charitable, etc., 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). (Also complete the Support Schedule in Part IV-A.)
- 13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)

Provide the following information about the supported organizations. (See page 5 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14 ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)



**Part IV-A Support Schedule** (Complete only if you checked a box on line 10, 11, or 12 ) *Use cash method of accounting***Note** You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
<b>15</b> Gifts, grants, and contributions received (Do not include unusual grants. See line 28 )	7,498,686	7,034,780	6,484,237	6,802,847	27,820,550
<b>16</b> Membership fees received					
<b>17</b> Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose					
<b>18</b> Gross income from interest, dividends amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	171,057	85,772	143,774	143,521	544,124
<b>19</b> Net income from unrelated business activities not included in line 18					
<b>20</b> Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
<b>21</b> The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.					
<b>22</b> Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	STMT 15 -459,360	-168,300	148,228	161,110	-318,322
<b>23</b> Total of lines 15 through 22	7,210,383	6,952,252	6,776,239	7,107,478	28,046,352
<b>24</b> Line 23 minus line 17	7,210,383	6,952,252	6,776,239	7,107,478	28,046,352
<b>25</b> Enter 1% of line 23	72,104	69,523	67,762	71,075	
<b>26</b> Organizations described on lines 10 or 11	a Enter 2% of amount in column (e), line 24				
					26a 560,927
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1997 through 2000 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b 2,021,627
c Total support for section 509(a)(1) test. Enter line 24, column (e)					26c 28046352
d Add: Amounts from column (e) for lines 18 544,124 19					
22 -318,322 26b 2,021,627					26d 2,247,429
e Public support (line 26c minus line 26d total)					26e 25798923
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 91.9867 %
<b>27</b> Organizations described on line 12	a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each disqualified person. Do not file this list with your return. Enter the sum of such amounts for each year.				
(2000)	(1999)	(1998)	NOT APPLICABLE	(1997)	
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year.	(2000)	(1999)	(1998)	(1997)	
c Add: Amounts from column (e) for lines 15 16					
17 20 21					27c
d Add: Line 27a total and line 27b total					27d
e Public support (line 27c total minus line 27d total)					27e
f Total support for section 509(a)(2) test. Enter amount on line 23, column (e)					27f
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h %
<b>28</b> Unusual Grants. For an organization described in line 10, 11, or 12 that received any unusual grants during 1997 through 2000, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.					

**Part V Private School Questionnaire** (See page 7 of the instructions)  
**(To be completed ONLY by schools that checked the box on line 6 in Part IV)**

	Yes	No
<b>29</b> Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	<b>29</b>	
<b>30</b> Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	<b>30</b>	
<b>31</b> Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement )	<b>31</b>	
-----		
-----		
-----		
<b>32</b> Does the organization maintain the following		
<b>a</b> Records indicating the racial composition of the student body, faculty, and administrative staff?	<b>32a</b>	
<b>b</b> Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	<b>32b</b>	
<b>c</b> Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	<b>32c</b>	
<b>d</b> Copies of all material used by the organization or on its behalf to solicit contributions?	<b>32d</b>	
If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement )		
-----		
-----		
<b>33</b> Does the organization discriminate by race in any way with respect to		
<b>a</b> Students' rights or privileges?	<b>33a</b>	
<b>b</b> Admissions policies?	<b>33b</b>	
<b>c</b> Employment of faculty or administrative staff?	<b>33c</b>	
<b>d</b> Scholarships or other financial assistance?	<b>33d</b>	
<b>e</b> Educational policies?	<b>33e</b>	
<b>f</b> Use of facilities?	<b>33f</b>	
<b>g</b> Athletic programs?	<b>33g</b>	
<b>h</b> Other extracurricular activities?	<b>33h</b>	
If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement )		
-----		
-----		
-----		
<b>34a</b> Does the organization receive any financial aid or assistance from a governmental agency?	<b>34a</b>	
<b>b</b> Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement	<b>34b</b>	
<b>35</b> Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	<b>35</b>	

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions)(To be completed **ONLY** by an eligible organization that filed Form 5768) **NOT APPLICABLE**

- Check ☐ **a** if the organization belongs to an affiliated group
- Check ☐ **b** if you checked "a" and "limited control" provisions apply

**Limits on Lobbying Expenditures**

(The term "expenditures" means amounts paid or incurred)

		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
<b>36</b> Total lobbying expenditures to influence public opinion (grassroots lobbying)	<b>36</b>		
<b>37</b> Total lobbying expenditures to influence a legislative body (direct lobbying)	<b>37</b>		
<b>38</b> Total lobbying expenditures (add lines 36 and 37)	<b>38</b>		
<b>39</b> Other exempt purpose expenditures	<b>39</b>		
<b>40</b> Total exempt purpose expenditures (add lines 38 and 39)	<b>40</b>		
<b>41</b> Lobbying nontaxable amount Enter the amount from the following table -			
<b>If the amount on line 40 is -</b>	<b>The lobbying nontaxable amount is -</b>		
Not over \$500 000	20% of the amount on line 40		
Over \$500 000 but not over \$1 000 000	\$100,000 plus 15% of the excess over \$500 000		
Over \$1 000 000 but not over \$1 500 000	\$175 000 plus 10% of the excess over \$1 000 000	<b>41</b>	
Over \$1 500 000 but not over \$17 000 000	\$225 000 plus 5% of the excess over \$1 500 000		
Over \$17 000 000	\$1 000 000		
<b>42</b> Grassroots nontaxable amount (enter 25% of line 41)	<b>42</b>		
<b>43</b> Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	<b>43</b>		
<b>44</b> Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	<b>44</b>		

**Caution** If there is an amount on either line 43 or line 44, you must file Form 4720**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below)

See the instructions for lines 45 through 50 on page 11 of the instructions )

**Lobbying Expenditures During 4-Year Averaging Period**

Calendar year (or fiscal year beginning in) ►	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
<b>45</b> Lobbying nontaxable amount					
<b>46</b> Lobbying ceiling amount (150% of line 45(e))					
<b>47</b> Total lobbying expenditures					
<b>48</b> Grassroots nontaxable amount					
<b>49</b> Grassroots ceiling amount (150% of line 48(e))					
<b>50</b> Grassroots lobbying expenditures					

**Part VI-B Lobbying Activity by Nonelecting Public Charities****NOT APPLICABLE**

(For reporting only by organizations that did not complete Part VI-A) (See page 12 of the instructions)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of

- a** Volunteers
- b** Paid staff or management (Include compensation in expenses reported on lines c through h)
- c** Media advertisements
- d** Mailings to members, legislators, or the public
- e** Publications, or published or broadcast statements
- f** Grants to other organizations for lobbying purposes
- g** Direct contact with legislators, their staffs, government officials, or a legislative body
- h** Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i** Total lobbying expenditures (add lines c through h)

Yes	No	Amount
<b>a</b>	<b>N/A</b>	
<b>b</b>	<b>N/A</b>	
<b>c</b>	<b>N/A</b>	
<b>d</b>	<b>N/A</b>	
<b>e</b>	<b>N/A</b>	
<b>f</b>	<b>N/A</b>	
<b>g</b>	<b>N/A</b>	
<b>h</b>	<b>N/A</b>	
<b>i</b>		

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

Schedule A (Form 990 or 990-EZ) 2001



FORM 990, PART I - OTHER DECREASES IN FUND BALANCES  
=====DESCRIPTION  
-----AMOUNT  
-----

UNREALIZED LOSS

- 55,674.

TOTAL

-----  
- 55,674.  
=====

FORM 990, PART II - OTHER EXPENSES

DESCRIPTION	TOTAL	PROGRAM SERVICES	MANAGEMENT AND GENERAL	FUNDRAISING
CONTRACT LABOR	135,198.		93,233.	41,965.
DATA PROCESSING	71,264.		71,264.	
DUES AND SUBSCRIPTIONS	5,667.		5,667.	
DEPRECIATION- OFFICE EQUIPMENT				
INSURANCE	20,977.	1,613.	7,271.	12,093.
MISCELLANEOUS	12,094.	841.	3,131.	8,122.
BANK FEES	7,929.		7,929.	
NPC PROCESSING FEE	4,442.		4,442.	
BROKER COMMISSION	1,520.		1,520.	
NEWSLETTER	69,078.	69,078.		
EVENTS	22,703.			22,703.
PRINTING AND MARKETING	64,932.			64,932.
INCENTIVES	59,506.			59,506.
ENTERTAINMENT	3,858.	75.		3,783.
SERVICES & SUPPLIES	6,720.			6,720.
ARTS INSTITUTE	38,724.	38,724.		
WHITTENBERG SCHOLARSHIP	8,100.	8,100.		
COMMUNITY FOUNDATION FEES	1,551.	1,551.		
TRANSPORTATION	39,006.	4,476.	9,832.	24,698.
TOTALS	573,269.	124,458.	204,289.	244,522.

FORM 990, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE

=====

FOSTERING EXCELLENCE IN THE ARTS

FORM 990, PART III - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

DESCRIPTION

GRANTS AND ALLOCATIONS

EXPENSES

CONTRIBUTIONS TO MEMBER ART ORGANIZATIONS FOR THE PURPOSE OF FOSTERING EXCELLANCE IN THE ARTS AS A PRIMARY MEANS OF IMPROVING THE QUALITY OF LIFE AND FURTHERING ECONOMIC DEVELOPMENT OF METROPOLITAN LOUISVILLE AREA. THIS MISSION IS FULFILLED BY INCREASING SUPPORT FOR THE ARTS. ASSURING OPTIMUM UTILIZATION OF THE ARTS SUPPORT ENTRUSTED TO OUR

CARE AND ENSURING ASSESS TO THE BROAD METROLITAN COMMUNITY. SEE STATEMENT "A" FOR A LIST OF THE ORGANIZATIONS AND PROGRAMS WHICH BENEFIT FROM THE GREATER LOUISVILLE FUND FOR THE ARTS ASSISTANCE. MEMBER ORGANIZATIONS ARE LISTED AS WELL AS NON-MEMBER ORGANIZATIONS BOTH OF WHICH BENEFITED FROM ASSISTANCE DURING THE YEAR.

6,424,756. 6,662,761

TOTAL

6,424,756. 6,662,761



FORM 990, PART IV - OTHER NOTES AND LOANS RECEIVABLE  
=====

BORROWER: TRIART GALLERY

ORIGINAL AMOUNT: 50,000.

BEGINNING BALANCE DUE ..... 49,125.

BORROWER: ALLAN COWAN-HURSTBOURNE

ORIGINAL AMOUNT: 22,000.

BEGINNING BALANCE DUE ..... 22,000.

BORROWER: K - COOPER

ORIGINAL AMOUNT: 631.

BEGINNING BALANCE DUE ..... NONE

TOTAL BEGINNING OTHER NOTES AND LOANS RECEIVABLE ..... 71,125.  
=====

## FORM 990, PART IV - INVESTMENTS - OTHER

=====

DESCRIPTION -----	ENDING BOOK VALUE -----
COMMUNITY FNDTN (WHITTENBERG)	90,590.
BONDS	1,656,508.
MUTUAL FUNDS	168,174.
MONEY MARKET FUNDS	3,472.
CERTIFICATE OF DEPOSIT	61,783.
	-----
TOTALS	1,980,527.
	=====

FORM 990, PART IV - OTHER ASSETS  
=====DESCRIPTION  
-----ENDING  
BOOK VALUE  
-----

OTHER ASSETS

53,401.

TOTALS

-----  
53,401.  
=====

FORM 990, PART IV-A - OTHER REVENUE ON RETURN BUT NOT ON BOOKS  
=====DESCRIPTION  
-----AMOUNT  
-----

DESIGNATED GIFTS

1,852,956.

TOTAL

-----  
1,852,956.  
=====

FORM 990, PART IV-B - OTHER EXPENSES ON RETURN BUT NOT ON BOOKS  
=====DESCRIPTION  
-----AMOUNT  
-----

DESIGNATED GIFTS

1,852,956.

TOTAL

-----  
1,852,956.  
=====

GREATER LOUISVILLE FUND FOR THE ARTS

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES  
=====

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
ALLAN COWEN 623 WEST MAIN STREET LOUISVILLE, KENTUCKY	PRESIDENT 40 40	238,362.	66,916.	20,107.
BOARD OF DIRECTORS SEE STATEMENT "B"		NONE	NONE	NONE
	GRAND TOTALS	238,362.	66,916.	20,107.

SCHEDULE A, PART III - EXPLANATION FOR LINE 2D

=====

SEE FORM 990, PART V

SCHEDULE A, PART III - EXPLANATION FOR LINE 4

=====

SEE STATEMENT "C".



SCHEDULE A, PART IV-A - OTHER INCOME

DESCRIPTION	2000	1999	1998	1997	TOTAL
COST REIMBURSEMENT BY DONORS	40,640.	NONE	NONE	103,847.	144,487.
LIFE INSURANCE PROCEEDS		NONE	NONE	57,263.	57,263.
ARTS LEADERSHIP		765.	55,250.	NONE	56,015.
MISCELLANEOUS INCOME		36,138.	92,978.	NONE	129,116.
ALLOWANCE FOR UNCOLLECTIBLE PLEDGE	-310,000.	-205,203.	NONE	NONE	-310,000.
	-190,000.				-395,203.
TOTALS	-459,360.	-168,300.	148,228.	161,110.	-318,322.

SCH. A, PART IV-A - ORGANIZATIONS DESCRIBED IN PART IV, BOX 10 OR 11  
(NOT OPEN TO PUBLIC INSPECTION)

CONTRIBUTOR NAME	TOTAL CONTRIBUTION	MINUS 2% OF LINE 24	EXCESS CONTRIBUTION AMOUNT
BROWN-FORMAN CORPORATION	798,000.	560,927.	237,073.
THE HUMANA FOUNDATION	713,200.	560,927.	152,273.
NATIONAL CITY	560,000.		
CITY OF LOUISVILLE	900,000.	560,927.	339,073.
JEFFERSON COUNTY GOVERNMENT	765,000.	560,927.	204,073.
AEGON INSURANCE GROUP	487,500.		
BANK ONE, KENTUCKY, NA	648,250.	560,927.	87,323.
PNC BANK	657,500.	560,927.	96,573.
THE COMMUNITY FOUNDATION OF LOUISVILLE	1,466,166.	560,927.	905,239.
BROWN & WILLIAMSON TOBACCO CORP	420,000.		
TOTAL	7,415,616.		2,021,627.

# **GREATER LOUISVILLE FUND FOR THE ARTS**

**61-0479626**

## **FORM 990, PART II - GRANTS AND ALLOCATIONS**

	<b>Amount</b>
ACTORS THEATRE OF LOUISVILLE	1,224,058
FUND FOR THE ARTS PROPERTIES FOUNDATION, INC	210,000
KENTUCKY OPERA ASSOCIATION	666,859
KENTUCKY SHAKESPEARE FESTIVAL	165,404
KY ART & CRAFT FOUNDATION	167,183
LOUISVILLE BACH SOCIETY	55,700
LOUISVILLE BALLET	861,999
LOUISVILLE THEATRICAL ASSOC	65,098
LOUISVILLE VISUAL ART ASSOC	268,248
LOUISVILLE YOUTH CHOIR	50,917
LOUISVILLE YOUTH ORCHESTRA	102,689
MUSIC THEATRE LOUISVILLE	52,777
OTHER COMMUNITY AND SCHOOLS GRANTS/PARTNERSHIPS	270,268
STAGE ONE LCT	474,323
THE LOUISVILLE ORCHESTRA	1,698,101
WALDEN THEATRE	54,484
WEST LOUISVILLE BOY'S CHOIR	36,648
<b>TOTAL</b>	<b>\$6,424,756</b>

**GREATER LOUISVILLE FUND FOR THE ARTS**

**61-0479626**

**SCH. A, PART IV-A - ORGANIZATIONS DESCRIBED IN PART IV, BOX 10 OR 11**

THIS LIST OF MAJOR DONORS HAS BEEN PREPARED AND WILL BE PROVIDED TO THE IRS UPON REQUEST

# GREATER LOUISVILLE FUND FOR THE ARTS

61-0479626

## PART IV, LINE 57a & 57b DETAILS

### LAND, BUILDING ANDF EQUIPMENT BASIS

DESCRIPTION	BEG YEAR	ADDITIONS	RETIREMENTS	TRANSFER	END YEAR
BUILDING	600,000				600,000
BUILDING RENOVATION	346,160				346,160
BUILDING ADDITIONS	26,172				26,172
BUILDING IMPROVEMENTS	224,503				224,503
EQUIPMENT	16,197	10,000			26,197
AUTO	0	17,895			17,895
FURNITIRE & EQUIP	327,965				327,965
	1,540,997	27,895	0	0	1,568,892

### LAND, BUILDING ANDF EQUIPMENT ACCUMULATED DEPRECIATION

DESCRIPTION	BEG YEAR	ADDITIONS	RETIREMENTS	TRANSFER	END YEAR
BUILDING	267,315	17,865			285,180
BUILDING RENOVATION	0				0
BUILDING ADDITIONS	6,274	1,424			7,698
BUILDING IMPROVEMENTS	112,106	14,245			126,351
EQUIPMENT	8,360	3,070			11,430
AUTO	0	497			497
FURNITIRE & EQUIP	241,867	35,006			276,873
	635,922	72,105	0	0	708,027

**GREATER LOUISVILLE FUND FOR THE ARTS**

**61-0479626**

**PART II, LINE 42 DETAILS**

**DEPRECIATION ALLOCATED TO FUNCTIONAL EXPENSES**

**6,325**

**TOTAL DEPRECIATION INCLUDED IN OTHER EXPENSE ITEMS:**

DEPRECIATION	6,325
POSTAGE	1,405
TELEPHONE	1,842
DATA PROCESSING	25,431
TRAVEL	497
OCCUPANCY COSTS - INCLUDED IN	36,605
NET TOTAL	
	<hr/>
	72,105
	<hr/>

**FUND FOR THE ARTS**  
**6/30/2002**

**Members**

Actors Theatre of Louisville  
KY Art & Craft Foundation  
Kentucky Opera Association  
Kentucky Shakespeare Festival  
Louisville Ballet  
Louisville Bach Society  
The Louisville Orchestra  
Louisville Theatrical Assoc  
Louisville Visual Art Assoc  
Louisville Youth Choir  
Louisville Youth Orchestra  
Music Theatre Louisville  
Stage One LCT  
Walden Theatre

**Non - Members**

Regional Arts  
Other Designated Gifts  
Black Achievers  
School Partnership Grants and Youth Arts  
Special Projects  
Community Grants  
Brown Theatre  
Kentucky Center for the Arts  
West Louisville Boys Choir

**FUND FOR THE ARTS  
2002 BOARD OF DIRECTORS**

**Mr Robert P Adelberg**  
President  
Robert Adelberg Companies  
325 W Main Street, Suite 1804  
Louisville, KY 40202-4250

**Alberta Wood Allen**  
4020 Glenview Avenue  
Glenview, KY 40025  
(H) Phon 896-6225

**Ms Carolee Allen \***  
Chief Business Officer  
Office of Jefferson County Judge/Executive  
527 W Jefferson Street, Suite 400  
Louisville, KY 40202

**Mr P Richard Anderson, Jr \***  
Chairman, Executive Committee  
Greenebaum Doll & McDonald PLLC  
3300 National City Tower  
Louisville, KY 40202

**Ms Pamela G Atherton**  
1020 Garden Creek Circle  
Louisville, KY 40223

**Mr. J Stephen Barger**  
Executive Secretary-Treasurer  
Kentucky State District Council of Carpenters  
632 Comanche Trail  
Frankfort, KY 40601

**Mr Barry Bingham, Jr \***  
Billy Goat Strut Publishing Company  
600 E Main Street, Suite 103  
Louisville, KY 40202

**Mr Steven B Bing**  
Principal & COO  
Prosperitas Investment Partners, LP



**FUND FOR THE ARTS  
2002 BOARD OF DIRECTORS**

3600 National City Tower  
101 South 5<sup>th</sup> Street  
Louisville, Kentucky 40202

Mr Todd Blue  
Managing Director  
Cobalt Ventures LLC  
301 E Main Street, Suite #1  
Louisville, KY 40202

Mr Jonathan D Blum \*  
Sr Vice President, Public Affairs  
Tricon Global Restaurants, Inc  
1441 Gardiner Lane  
Louisville, KY 40213

Mr Morton Boyd \*  
13415 Highway 42  
Prospect, KY 40059

Mr David H Brooks  
Chairman & CEO  
Stock Yards Bank & Trust Company  
1040 E Main Street  
Louisville, KY 40206

Mr Owsley Brown, II \*  
Chairman & CEO  
Brown-Forman Corporation  
P O Box 1080  
Louisville, KY 40201

Mr Thomas F Buetow  
Certified Public Accountant  
Buetow LeMastus & Dick PLLC  
500 W Jefferson Street  
Louisville, Kentucky 40202

Mr Van G Carlisle  
President & CEO  
Fire King International, Inc  
101 Security Parkway  
New Albany, IN 47150

Mr Patrick Cass

STATEMENT B

**FUND FOR THE ARTS  
2002 BOARD OF DIRECTORS**

Managing Partner  
Arthur Andersen LLP  
2300 Meidinger Tower  
Louisville, KY 40202

Mr Karl Cheuvront, Jr  
Press Secretary  
Governor's Office, State Capitol  
700 Capitol Avenue  
Frankfort, Kentucky 40601

Dr Stephen Daeschner  
Superintendent  
Jefferson County Public Schools  
P O Box 34020  
Louisville, KY 40232-4020

Mr Stanley S Dickson  
519 Tiffany Lane  
Louisville, KY 40207

Mr John Dorkin  
President & General Manager  
WDRB TV Fox 41  
624 W Muhammad Ali Boulevard  
Louisville, KY 40203

Mr C Hayden Edwards  
3104 Woodside Road  
Glenview, KY 40025  
(H) Phon 339-7661

Dr Susan Galandiuk  
Professor, Dept Of Surgery  
University of Louisville  
Louisville, KY 40292

Mr George Gans  
Chairman  
Paul Semonin Realtors  
4967 US Highway 42, Suite 200  
Louisville, KY 40222

Mr James R Gaunt \*  
President & CEO

STATEMENT B

**FUND FOR THE ARTS  
2002 BOARD OF DIRECTORS**

**Fifth Third Bank  
401 S 4th Avenue, 7<sup>th</sup> Floor  
Louisville, KY 40202**

**Mr William R Gernert  
President & CEO  
AEGON Institutional Markets  
P O Box 35330  
Louisville, KY 40232**

**Mr C Edward Glasscock \*  
Co-Managing Partner  
Frost Brown Todd LLC  
32nd Floor, 400 W Market Street  
Louisville, KY 40202**

**Mr Jonathan D Goldberg  
Managing Partner  
Goldberg & Simpson PSC  
3000 National City Tower  
Louisville, KY 40202**

**Dr Richard Green  
President  
Jefferson Community College  
109 E Broadway  
Louisville, KY 40202**

**Mrs Marlene M Grissom \*  
Director of Special Projects  
Louisville Waterfront Development Corporation  
129 E River Road  
Louisville, KY 40202**

**Mr R K Guillaume  
Vice Chairman & CEO  
Bank of Louisville  
500 W Broadway  
Louisville, KY 40202**

**Mr Kevin Hable  
Managing Partner  
Wyatt Tarrant & Combs  
500 W Jefferson Street  
Louisville, KY 40202**

**FUND FOR THE ARTS  
2002 BOARD OF DIRECTORS**

Mr Michael C Hagan  
President & CEO  
American Commercial Lines, Inc  
P O Box 610  
Jeffersonville, IN 47130

Mr Daniel Hall  
Vice President for University Relations  
University of Louisville  
102 Grawemeyer Hall  
Louisville, KY 40292

Mrs Martha Dunbar Hall  
203 Loganberry Court  
Louisville, KY 40207

Mrs Margaret Handmaker \*  
World Wide Partner  
William M Mercer, Inc  
462 South Fourth Street, Suite 1500  
Louisville, KY 40202

Mr Leonard V Hardin \*  
6300 Glen Hill Road  
Louisville, KY 40222

Ms Bonnie C Hathcock  
Senior Vice President, Human Resources  
Humana Inc  
500 W Main Street  
Louisville, KY 40202

Mr John H Hawkins, Jr \*  
Office Managing Partner  
Deloitte & Touche  
220 W Main Street, Suite 2100  
Louisville, KY 40202

Mrs Carol W Hebel  
President  
Carol W Hebel, Inc , Realtors  
6511 Glenridge Park Place, Suite #2  
Louisville, KY 40222

**FUND FOR THE ARTS  
2002 BOARD OF DIRECTORS**

Mr Dennis Heishman  
President  
Bank One, Kentucky, NA  
416 W Jefferson Street  
Louisville, KY 40202

Mr Audwin Helton  
President & Owner  
Spatial Data Integrations, Inc  
710 W Main Street, Suite 108  
Louisville, KY 40202

Mr David K Karem  
President / Executive Director  
Louisville Waterfront Development Corporation  
129 E River Road  
Louisville, KY 40202

Mr Bertram W Klein \*  
Chairman of the Board  
Bank of Louisville  
500 W Broadway  
Louisville, KY 40202

Mr David Klein  
Chief Operating Officer / EVP  
Bank of Louisville  
500 W Broadway  
Louisville, KY 40202

Mr Mark Kristy  
Managing Partner  
PricewaterhouseCoopers LLP  
500 W Main Street, Suite 1800  
Louisville, KY 40202

Ms Nancy Lampton (Nana)  
Chairman & CEO  
American Life & Accident Insurance Co of KY  
3 Riverfront Plaza  
Louisville, KY 40202

Mr Philip M Lanier  
5901 Cabin Way  
Louisville, KY 40222

STATEMENT B

**FUND FOR THE ARTS  
2002 BOARD OF DIRECTORS**

Mr John Long  
Executive Vice President & COO  
Churchill Downs, Inc  
700 Central Avenue  
Louisville, KY 40208

Mr Edward E Manassah \*  
President & Publisher  
The Courier-Journal  
525 W Broadway  
Louisville, KY 40202

Mr Michael B McCallister \*  
President & CEO  
Humana Inc  
500 W Main Street, 6<sup>th</sup> Floor  
Louisville, Kentucky 40202

Mr A Stevens Miles  
213 Coralberry Road  
Louisville, KY 40207

Mr Tom Monahan  
President & Publisher  
Business First  
501 South Fourth Street, Suite 130  
Louisville, KY 40202

Mr Ronald J Murphy \*  
President & CEO  
Glenview Trust Company  
4969 U S Highway 42, Suite 2000  
Louisville, KY 40222

Dr Thomas R Oates \*  
President  
Spalding University  
851 South Fourth Street  
Louisville, KY 40203

Mr Orson Oliver  
President  
Bank of Louisville  
P O Box 1101

**FUND FOR THE ARTS  
2002 BOARD OF DIRECTORS**

Louisville, KY 40201

Ms Lynn Pendergrass  
Vice President – Sales & Marketing  
GE Appliance Park  
Building 4, Room 208  
Louisville, Kentucky 40225

Dr F C Richardson  
Chancellor  
Indiana University Southeast  
4201 Grant Line Road  
New Albany, IN 47150

M Benjamin K Richmond \*  
President & CEO  
Louisville Urban League  
1535 W Broadway  
Louisville, KY 40203

Mr Eddy C Roberts, Jr \*  
State President - Kentucky  
BellSouth  
601 W Chestnut Street  
Louisville, KY 40203

Mr David E Rogers  
Office Managing Partner  
Ernst & Young  
Suite 2100, 400 W Market Street  
Louisville, KY 40202

Mr Robert W Rounsavall, III \*  
Manager  
Dixie Real Properties, LLC  
6040 Dutchmans Lane, Suite 315  
Louisville, KY 40205

Mr David E Sams, Jr  
9 River Edge Road  
Old Saybrook, CT 06475

Mrs Mary Norton Shands  
Founder & Chairperson  
Fox Hollow, Inc

**FUND FOR THE ARTS  
2002 BOARD OF DIRECTORS**

8909 Highway 329  
Crestwood, KY 40014

Mr Wayne T Smith  
4175 Westport Road, Suite 102  
Louisville, KY 40207

Mr Carl M Thomas \*  
President & CEO  
Commonwealth Bank & Trust Company  
12906 Shelbyville Road  
Louisville, KY 40253

Mr James Thompson  
854 Starks Building  
455 So 4th Avenue  
Louisville, KY 40202

Mr Steven E Trager  
Chairman & CEO  
Republic Bank & Trust Company  
601 W Market Street, 2nd Floor  
Louisville, KY 40202

Mr C Bruce Traugher \*  
Executive Director  
Louisville Development Authority  
600 W Main Street, Suite 300  
Louisville, KY 40202

Mrs Patricia R Updegraff  
2564 Cherosen Road  
Louisville, Ky 40205

Mr Henry C Wagner \*  
President & CEO  
Jewish Hospital HealthCare Services  
217 E Chestnut Street  
Louisville, KY 40202

Mr James S Welch  
Ogden, Newell & Welch  
1700 Citizens Plaza  
500 W Jefferson Street  
Louisville, KY 40202



**FUND FOR THE ARTS  
2002 BOARD OF DIRECTORS**

Mr Mark Wheeler  
Regional Chairman / EVP  
Firststar Bank  
One Financial Square  
Louisville, KY 40202

Mrs Joan T Whittenberg  
425 Twinbrook Road  
Louisville, KY 40207

Mr Stephen R Wood \*  
President  
Centaur Energy Development, LLC  
1295 Bardstown Road  
Louisville, KY 40204

**SCHEDULE A, PART III - EXPLANATION FOR LINE 4B**

THE GREATER LOUISVILLE FUND FOR THE ARTS (THE FUND) PROVIDES FINANCIAL SUPPORT PREDOMINATELY TO MEMBER ORGANIZATIONS AND OCCASIONALLY TO NON-MEMBER ORGANIZATIONS. IN ORDER TO BECOME A MEMBER OF THE FUND, AN ORGANIZATION MUST BE APPROVED BY THE FUND'S ADMISSIONS AND ENDORSEMENTS COMMITTEE, WHICH USES THE FOLLOWING CRITERIA TO DETERMINE PROSPECTIVE APPLICANTS' ELIGIBILITY:

- 1 THE PROJECT SEEKING MEMBERSHIP MUST DEMONSTRATE THAT IT FILLS A NEED NOT ALREADY WELL-FILLED OR CAPABLE OF BEING FILLED BY AN EXISTING AGENCY
- 2 THE NEED SHALL BE RELATIVELY GREAT ENOUGH TO WARRANT THE SUPPORT OF A SEPARATE AGENCY
- 3 IN THE CASE OF LOCAL INSTITUTIONS INTENDED TO BE PERMANENT, THE ORGANIZATION SHALL BE ESTABLISHED IN SUCH MANNER AS TO ASSURE PERMANENT ORGANIZATION AND SUPPORT. IT SHALL HAVE A BOARD OF RESPONSIBLE DIRECTORS
- 4 THE APPLYING AGENCY SHALL AGREE TO COOPERATE WITH OTHER AGENCIES IN PREVENTING DUPLICATION OF EFFORT AND IN PROMOTING ECONOMY AND EFFICIENCY
- 5 THE ACCOUNTS OF ALL FINANCIALLY PARTICIPATING AGENCIES, WHETHER THEY RECEIVE FUNDS FROM THE FUND FOR ANY CURRENT YEAR OR NOT, SHALL BE AUDITED ANNUALLY BY A CERTIFIED AUDITOR, AND A COPY OF THE AUDIT REPORT AND OTHER REPORTS, BOTH FINANCIAL AND SOCIAL, WHICH MAY BE REQUESTED BY THE EXECUTIVE COMMITTEE, SHALL BE FILED WITH THE FUND. YEARLY BUDGETS SHALL BE SUBMITTED TO THE BUDGET COMMITTEE BY FINANCIALLY PARTICIPATING AGENCIES WHETHER REQUESTING FUNDS OR NOT
- 6 THE OPERATIONS OF THE FINANCIALLY PARTICIPATING ORGANIZATION AND THEIR RECORDS SHALL ALWAYS BE OPEN TO AN INVESTIGATION OF AN ACCREDITED REPRESENTATIVE OF THE FUND. THE SYSTEM OF BOOKKEEPING MAINTAINED BY SUCH MEMBER AGENCIES SHALL BE ONE APPROVED BY THE FUND

**Application for Extension of Time To File an  
Exempt Organization Return**

OMB No 1545-1709

▶ File a separate application for each return

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒
- If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

**Note** Do not complete **Part II** unless you have already been granted an automatic 3-month extension on a previously filed**Form 8868****Part I Automatic 3-Month Extension of Time - Only submit original (no copies needed)****Note** Form 990-T corporations requesting an automatic 6-month extension - check this box and complete Part I only ☐

All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066 or 1041

**Type or  
print**

Name of Exempt Organization

Employer identification number

**GREATER LOUISVILLE FUND FOR THE ARTS****61-0479626**

Number, street, and room or suite no. If a P O box, see instructions

**623 WEST MAIN STREET**

City, town or post office, state, and ZIP code. For a foreign address, see instructions

**LOUISVILLE, KY 40202****Check type of return to be filed (file a separate application for each return)**

- |  |   |                                    |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation)               | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL         | <input type="checkbox"/> Form 990-T(sec 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ         | <input type="checkbox"/> Form 990-T (trust other than above)    | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF         | <input type="checkbox"/> Form 1041-A                            | <input type="checkbox"/> Form 8870 |

- If the organization does **not** have an office or place of business in the United States, check this box ☐
- If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ If this is for the **whole** group, check this box ☐ If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension will cover

- 1 I request an automatic 3-month (6-month, for **990-T corporation**) extension of time until 02/17, 2003, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
- ▶ ☐ calendar year \_\_\_\_\_ or
- ▶ ☒ tax year beginning 07/01, 2001, and ending 06/30, 2002

- 2 If this tax year is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period

- 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions \$ \_\_\_\_\_
- b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit \$ \_\_\_\_\_
- c **Balance Due** Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions \$ \_\_\_\_\_

**Signature and Verification**

Under penalties of perjury I declare that I have examined this form including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ▶

Title ▶ **KPMG LLP**

Date ▶

**For Paperwork Reduction Act Notice, see Instruction**Form **8868** (12 2000)

• If you are filing for an Additional (not automatic) 3-Month Extension, complete only Part II and check this box ☒

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868

• If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)

**Part II Additional (not automatic) 3-Month Extension of Time - Must File Original and One Copy.**

Type or print File by the extended due date for filing the return. See instructions	Name of Exempt Organization <b>GREATER LOUISVILLE FUND FOR THE ARTS</b>	Employer identification number <b>61-0479626</b>
	Number, street, and room or suite no. If a P.O. box, see instructions <b>623 WEST MAIN STREET</b>	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions <b>LOUISVILLE, KY 40202</b>	

**Check type of return to be filed (File a separate application for each return)**

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 5227	<input type="checkbox"/> Form 8870
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 4720	<input type="checkbox"/> Form 6069	

**STOP. Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868**

• If the organization does not have an office or place of business in the United States, check this box ☐

• If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ If this is for the **whole group**, check this box ☐ If it is for **part of the group**, check this box ☐ and attach a list with the names and EINs of all members the extension is for

4 I request an additional 3-month extension of time until 05/15/2003

5 For calendar year \_\_\_\_\_, or other tax year beginning 07/01/2001 and ending 06/30/2002

6 If this tax year is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period

7 State in detail why you need the extension INFORMATION NECESSARY TO PREPARE A COMPLETE AND ACCURATE RETURN IS NOT YET AVAILABLE

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions \$ \_\_\_\_\_

b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868 \$ \_\_\_\_\_

c **Balance Due** Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions \$ \_\_\_\_\_

**Signature and Verification**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ▶

Title ▶ **KPMG LLP**

Date ▶

**Notice to Applicant - To Be Completed by the IRS**

☐ We have approved this application. Please attach this form to the organization's return.

☐ We have not approved this application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to the organization's return.

☐ We have not approved this application. After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file. We are not granting a 10-day grace period.

☐ We cannot consider this application because it was filed after the due date of the return for which an extension was requested.

☐ Other \_\_\_\_\_

By \_\_\_\_\_

Director

Date

**Alternate Mailing Address** - Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above.

Type or print	Name <b>KPMG LLP</b>
	Number and street (include suite, room, or apt. no.) Or a P.O. box number <b>400 WEST MARKET STREET, SUITE 2600</b>
	City or town, province or state, and country (including postal or ZIP code) <b>LOUISVILLE, KY 40202</b>
	ISA