

## Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

2002

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

A For the 2002 calendar year, or tax year beginning July 1, 2002, and ending June 30, 2003

- 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 ) 582-0125

## 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)

G Web site: ▶ www.fundforthearts.com

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.

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? ☐ Yes ☐ No

(If "No," attach a list. See instructions.)

H(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)

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 7,607,782.

## Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 17 of the instructions.)

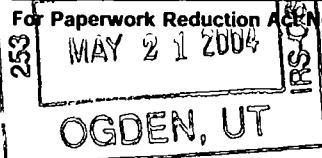
1 Contributions, gifts, grants, and similar amounts received.					
a	Direct public support	1a	7,404,722.		
b	Indirect public support	1b	134,218.		
c	Government contributions (grants)	1c	425,000.		
d	Total (add lines 1a through 1c) (cash \$ 7,963,940. noncash \$ )	1d		7,963,940.	
2	Program service revenue 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		68,748.	
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			
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		-49,988.	
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		-374,918.	
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12		7,607,782.	
13	Program services (from line 44, column (B))	13		6,383,995.	
14	Management and general (from line 44, column (C))	14		426,487.	
15	Fundraising (from line 44, column (D))	15		880,188.	
16	Payments to affiliates (attach schedule)	16			
17	Total expenses (add lines 16 and 44, column (A))	17		7,690,670.	
18	Excess or (deficit) for the year (subtract line 17 from line 12)	18		-82,888.	
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19		3,324,954.	
20	Other changes in net assets or fund balances (attach explanation)	20		25,705.	
21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21		3,267,771.	

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2002)

SCANNED JUN 17 2004



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**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 page 21 of the instructions.)

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>6,206,195</u> noncash <u>0</u> )	22 6,206,195.	6,206,195.		
23	Specific assistance to individuals (attach schedule)	23			
24	Benefits paid to or for members (attach schedule)	24			
25	Compensation of officers, directors, etc.	25 238,382.	47,676.	95,353.	95,353.
26	Other salaries and wages	26 423,716.	44,667.	67,768.	311,281.
27	Pension plan contributions	27 54,708.	4,905.	15,689.	34,114.
28	Other employee benefits	28 88,506.	16,626.	30,176.	41,704.
29	Payroll taxes	29 39,373.	4,117.	9,588.	25,668.
30	Professional fundraising fees	30			
31	Accounting fees	31 24,600.		24,600.	
32	Legal fees	32 570.		570.	
33	Supplies	33 11,739.	940.	3988.	6811.
34	Telephone	34 21,060.	1,701.	7,027.	12,332.
35	Postage and shipping	35 38,178.	760.	3,123.	34,295.
36	Occupancy	36 34,768.	5181.	-7,973.	37,560.
37	Equipment rental and maintenance	37			
38	Printing and publications	38 12,088.	970.	4,088.	7,030.
39	Travel	39 2,913.	233.	991.	1,689.
40	Conferences, conventions, and meetings	40 11,662.	473.	536.	10,653.
41	Interest	41			
42	Depreciation, depletion, etc. (attach schedule)	42 5,753.	460.	1,956.	3,337.
43	Other expenses not covered above (itemize): a	43a			
b	See Statement 3	43b 476,459.	49,091.	169,007.	258,361.
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 7,690,670.	6,383,995.	426,487.	880,188.

Joint Costs. Check ☐ if you are following SOP 98-2.Are 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 page 24 of the instructions.)What is the organization's primary exempt purpose? ☐ \_\_\_\_\_

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	Statement 4	
	(Grants and allocations \$ _____)	6,383,995.
b		
	(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)	6,383,995.

**Part IV Balance Sheets** (See page 24 of the instructions.)

<b>Note:</b> 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
<b>Assets</b>	<b>45</b> Cash—non-interest-bearing . . . . .		<b>45</b>	
	<b>46</b> Savings and temporary cash investments . . . . .	1,243,317.	<b>46</b>	868,225.
	<b>47a</b> Accounts receivable . . . . . <b>47a</b> 41,346.			
	<b>b</b> Less: allowance for doubtful accounts . . . . . <b>47b</b> 3,644.	46,985.	<b>47c</b>	37,702.
	<b>48a</b> Pledges receivable . . . . . <b>48a</b> 5,368,017.			
	<b>b</b> Less: allowance for doubtful accounts . . . . . <b>48b</b> 654,122.	4,562,483.	<b>48c</b>	4,713,895.
	<b>49</b> Grants receivable . . . . .		<b>49</b>	
	<b>50</b> Receivables from officers, directors, trustees, and key employees (attach schedule) <i>Stmnt 5</i> . . . . .	2,338.	<b>50</b>	1,074.
	<b>51a</b> Other notes and loans receivable (attach schedule) . . . . . <b>51a</b>			
	<b>b</b> Less: allowance for doubtful accounts . . . . . <b>51b</b>		<b>51c</b>	
	<b>52</b> Inventories for sale or use . . . . .		<b>52</b>	
	<b>53</b> Prepaid expenses and deferred charges . . . . .	92,550.	<b>53</b>	61,290.
	<b>54</b> Investments—securities (attach schedule) . . . . . <input type="checkbox"/> Cost <input type="checkbox"/> FMV		<b>54</b>	
	<b>55a</b> Investments—land, buildings, and equipment: basis . . . . . <b>55a</b>			
	<b>b</b> Less: accumulated depreciation (attach schedule) . . . . . <b>55b</b>		<b>55c</b>	
<b>56</b> Investments—other (attach schedule) <i>Stmnt 5</i> . . . . .	1,980,527.	<b>56</b>	2,248,653.	
<b>57a</b> Land, buildings, and equipment: basis . . . . . <b>57a</b> 1,600,968.				
<b>b</b> Less: accumulated depreciation (attach schedule) <i>Stmnt 6</i> . . . . . <b>57b</b> 776,951.	860,865.	<b>57c</b>	824,017.	
<b>58</b> Other assets (describe <input type="checkbox"/> See Stmnt. 5 ) . . . . .	53,401.	<b>58</b>	70,407.	
<b>59</b> <b>Total assets</b> (add lines 45 through 58) (must equal line 74) . . . . .	8,842,466.	<b>59</b>	8,825,263.	
<b>Liabilities</b>	<b>60</b> Accounts payable and accrued expenses . . . . .	115,328.	<b>60</b>	115,453.
	<b>61</b> Grants payable . . . . .	5,402,184.	<b>61</b>	5,442,039.
	<b>62</b> Deferred revenue . . . . .		<b>62</b>	
	<b>63</b> Loans from officers, directors, trustees, and key employees (attach schedule) . . . . .		<b>63</b>	
	<b>64a</b> Tax-exempt bond liabilities (attach schedule) . . . . .		<b>64a</b>	
	<b>b</b> Mortgages and other notes payable (attach schedule) . . . . .		<b>64b</b>	
	<b>65</b> Other liabilities (describe <input type="checkbox"/> ) . . . . .		<b>65</b>	
<b>66</b> <b>Total liabilities</b> (add lines 60 through 65) . . . . .	5,517,512.	<b>66</b>	5,557,492.	
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.</b>			
	<b>67</b> Unrestricted . . . . .	2,989,663.	<b>67</b>	2,635,208.
	<b>68</b> Temporarily restricted . . . . .	35,291.	<b>68</b>	332,563.
	<b>69</b> Permanently restricted . . . . .	300,000.	<b>69</b>	300,000.
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.</b>			
	<b>70</b> Capital stock, trust principal, or current funds . . . . .		<b>70</b>	
	<b>71</b> Paid-in or capital surplus, or land, building, and equipment fund . . . . .		<b>71</b>	
	<b>72</b> Retained earnings, endowment, accumulated income, or other funds . . . . .		<b>72</b>	
	<b>73</b> <b>Total net assets or fund balances</b> (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19; column (B) must equal line 21). . . . .	3,324,954.	<b>73</b>	3,267,771.
	<b>74</b> <b>Total liabilities and net assets / fund balances</b> (add lines 66 and 73) . . . . .	8,842,466.	<b>74</b>	8,825,263.

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 organization's programs and accomplishments.

**Part IV-A**      **Reconciliation of Revenue per Audited  
Financial Statements with Revenue per  
Return (See page 26 of the instructions.)**

<b>a</b>	Total revenue, gains, and other support per audited financial statements . . . ▶	<b>a</b>	6,484,875.
<b>b</b>	Amounts included on line <b>a</b> but not on line 12, Form 990		
	(1) Net unrealized gains on investments . . . \$ 25,705.		
	(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>	25,705.
<b>c</b>	Line <b>a</b> minus line <b>b</b> . . . . . ▶	<b>c</b>	6,459,170.
<b>d</b>	Amounts included on line 12, Form 990 but not on line <b>a</b> :		
	(1) Investment expenses not included on line 6b, Form 990 . . . \$		
	(2) Other (specify): ..... \$ 1,148,612.		
	Add amounts on lines (1) and (2) ▶	<b>d</b>	1,148,612.
<b>e</b>	Total revenue per line 12, Form 990 (line <b>c</b> plus line <b>d</b> ) . . . . . ▶	<b>e</b>	7,607,782.

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

<b>a</b>	Total expenses and losses per audited financial statements . . . ▶	<b>a</b>	<b>6,542,058.</b>
<b>b</b>	Amounts included on line <b>a</b> but not on line 17, Form 990.		
<b>(1)</b>	Donated services and use of facilities \$ _____		
<b>(2)</b>	Prior year adjustments reported on line 20, Form 990 . . . . \$ _____		
<b>(3)</b>	Losses reported on line 20, Form 990 . . . \$ _____		
<b>(4)</b>	Other (specify): _____ _____ \$ _____		
	Add amounts on lines <b>(1)</b> through <b>(4)</b> ▶	<b>b</b>	
<b>c</b>	Line <b>a</b> minus line <b>b</b> . . . . ▶	<b>c</b>	<b>6,542,058.</b>
<b>d</b>	Amounts included on line 17, Form 990 but not on line <b>a</b> :		
<b>(1)</b>	Investment expenses not included on line 6b, Form 990 . . . \$ _____		
<b>(2)</b>	Other (specify): _____ _____ \$ _____		
	<b>Stmt 7</b> \$ <b>1,148,612.</b>	<b>d</b>	<b>1,148,612.</b>
	Add amounts on lines <b>(1)</b> and <b>(2)</b> ▶		
<b>e</b>	Total expenses per line 17, Form 990 (line <b>c</b> plus line <b>d</b> ) . . . . ▶	<b>e</b>	<b>7,690,670.</b>

**Part V** **List of Officers, Directors, Trustees, and Key Employees** (List each one even if not compensated; see page 26 of the instructions.)

[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 page 26 of the instructions.

**Part VI Other Information** (See page 27 of the instructions.)

	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	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<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.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>78a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>79</b> Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>80a</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?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<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	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>81a</b> Enter direct or indirect political expenditures See line 81 instructions <b>81a</b> None	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>b</b> Did the organization file <b>Form 1120-POL</b> for this year?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>82a</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?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<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.) <b>82b</b> Not Available	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>83a</b> Did the organization comply with the public inspection requirements for returns and exemption applications?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>b</b> Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>84a</b> Did the organization solicit any contributions or gifts that were not tax deductible?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>85</b> <b>501(c)(4), (5), or (6) organizations.</b> <b>a</b> Were substantially all dues nondeductible by members?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<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, <b>do not</b> complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>c</b> Dues, assessments, and similar amounts from members <b>85c</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>d</b> Section 162(e) lobbying and political expenditures <b>85d</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>e</b> Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices <b>85e</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>f</b> Taxable amount of lobbying and political expenditures (line 85d less 85e) <b>85f</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>g</b> Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>h</b> If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? <b>85h</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>86</b> <b>501(c)(7) orgs.</b> Enter: <b>a</b> Initiation fees and capital contributions included on line 12 <b>86a</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>b</b> Gross receipts, included on line 12, for public use of club facilities <b>86b</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>87</b> <b>501(c)(12) orgs.</b> Enter: <b>a</b> Gross income from members or shareholders <b>87a</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<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.) <b>87b</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<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 <b>88</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>89a</b> <b>501(c)(3) organizations.</b> Enter: Amount of tax imposed on the organization during the year under: section 4911 <b>None</b> , section 4912 <b>None</b> ; section 4955 <b>None</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>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. <b>89b</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>c</b> Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <b>N/A</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>d</b> Enter: Amount of tax on line 89c, above, reimbursed by the organization <b>N/A</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>90a</b> List the states with which a copy of this return is filed <b>Kenutcky</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>b</b> Number of employees employed in the pay period that includes March 12, 2002 (See instructions) <b>90b</b> 13	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>91</b> The books are in care of <b>Monica Beckmann</b> Telephone no. <b>( )</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Located at <b>623 West Main St., Louisville, KY</b> ZIP + 4 <b>40202</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<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 <b>92</b> <b>N/A</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**Part VII Analysis of Income-Producing Activities** (See page 31 of the instructions.)**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	
<b>93</b> Program service revenue:					
<b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>f</b> Medicare/Medicaid payments . . . . .					
<b>g</b> Fees and contracts from government agencies					
<b>94</b> Membership dues and assessments . . . . .					
<b>95</b> Interest on savings and temporary cash investments					
<b>96</b> Dividends and interest from securities . . . . .			<b>14</b>	<b>68,748.</b>	
<b>97</b> Net rental income or (loss) from real estate:					
<b>a</b> debt-financed property . . . . .					
<b>b</b> not debt-financed property . . . . .					
<b>98</b> Net rental income or (loss) from personal property					
<b>99</b> Other investment income . . . . .					
<b>100</b> Gain or (loss) from sales of assets other than inventory			<b>18</b>	<b>-49988.</b>	
<b>101</b> Net income or (loss) from special events . . . . .					
<b>102</b> Gross profit or (loss) from sales of inventory . . . . .					
<b>103</b> Other revenue: <b>a</b> _____					
<b>b</b> Miscellaneous Income					<b>82.</b>
<b>c</b> Allowance for Uncoll. Pledges					<b>-375,000.</b>
<b>d</b> _____					
<b>e</b> _____					
<b>104</b> Subtotal (add columns (B), (D), and (E))				<b>18,760.</b>	<b>374,918.</b>
<b>105</b> Total (add line 104, columns (B), (D), and (E))					<b>-356,158</b>

**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 page 32 of the instructions.)

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)
<b>103B</b>	Details - See Attached - <i>Sheet 10</i>

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See page 32 of the instructions.)

(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 page 33 of the instructions.)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No
- Note:** If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Please  
Sign  
Here

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.

*Diane Cornwell*  
Signature of officer

**Diane Cornwell, Chief Financial Officer**

*4-20-04*  
Date

Date	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN (See Gen. Inst. W)
EIN		

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

Department of the Treasury  
Internal Revenue Service

**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

**2002**

▶ **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 Beckman Louisville, KY 40202	Controller - 40+	55,275.	8,761.	
Barbara Sexton Smith Louisville, KY 40202	Campaign Officer - 40+	116,758.	19,056.	
Lee Smith Louisville, KY 40202	VP-Legal Affairs - 40+	76,111.	4,158.	
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
Total number of others receiving over \$50,000 for professional services ▶	None	

**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 a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ \_\_\_\_\_ (Must equal amounts on line 38, Part VI-A, or line i of 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

- 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? . . . . .

b Lending of money or other extension of credit? *STMT 9* . . . . .

c Furnishing of goods, services, or facilities? . . . . .

d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? *STMT 9* . . . . .

e Transfer of any part of its income or assets? . . . . .

- 3 Does the organization make grants for scholarships, fellowships, student loans, etc.? (See Note below.) *STMT 10*

- 4 Do you have a section 403(b) annuity plan for your employees? . . . . .

**Note:** 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 5 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.)
- 11a ☒ 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.)
- 11b ☐ 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 5 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) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
<b>15</b> Gifts, grants, and contributions received. (Do not include unusual grants. See line 28) . . . . .	<b>8,593,875.</b>	<b>7,498,686.</b>	<b>7,034,780.</b>	<b>6,484,237.</b>	<b>29,611,578.</b>
<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 . . . . .	<b>125,501.</b>	<b>171,057.</b>	<b>85,772.</b>	<b>143,774.</b>	<b>526,104.</b>
<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 <i>STMT</i> . . . . .	<b>-402,160.</b>	<b>-459,360.</b>	<b>-168,300.</b>	<b>148,228</b>	<b>-881,592.</b>
<b>23</b> Total of lines 15 through 22 . . . . .	<b>8,317,216.</b>	<b>7,210,383.</b>	<b>6,952,252.</b>	<b>6,776,239.</b>	<b>29,256,090.</b>
<b>24</b> Line 23 minus line 17 . . . . .	<b>8,317,216.</b>	<b>7,210,383.</b>	<b>6,952,252.</b>	<b>6,776,239.</b>	<b>29,256,090</b>
<b>25</b> Enter 1% of line 23 . . . . .	<b>83,172.</b>	<b>72,104.</b>	<b>69,523.</b>	<b>67,762.</b>	
<b>26 Organizations described on lines 10 or 11:</b> <b>a</b> Enter 2% of amount in column (e), line 24 . . . . . ▶					<b>585,122</b>
<b>b</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 1998 through 2001 exceeded the amount shown in line 26a. <b>Do not file this list with your return.</b> Enter the total of all these excess amounts ▶					<b>1,031,918.</b>
<b>c</b> Total support for section 509(a)(1) test. Enter line 24, column (e) . . . . . ▶					<b>29,256,090.</b>
<b>d</b> Add: Amounts from column (e) for lines: 18 <u>526,104.</u> 19 <u>                    </u> 22 <u>-881,592</u> 26b <u>1,031,918</u> . . . . . ▶					<b>676,430.</b>
<b>e</b> Public support (line 26c minus line 26d total) . . . . . ▶					<b>28,579,660.</b>
<b>f</b> Public support percentage (line 26e (numerator) divided by line 26c (denominator)) . . . . . ▶					<b>97.6879 %</b>
<b>27 Organizations described on line 12:</b> <b>a</b> 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." <b>Do not file this list with your return.</b> Enter the sum of such amounts for each year: (2001) <u>                    </u> (2000) <u>                    </u> (1999) <u>                    </u> (1998) <u>                    </u> <b>b</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.) <b>Do not file this list with your return.</b> 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: (2001) <u>                    </u> (2000) <u>                    </u> (1999) <u>                    </u> (1998) <u>                    </u> <b>c</b> Add: Amounts from column (e) for lines: 15 <u>                    </u> 16 <u>                    </u> 17 <u>                    </u> 20 <u>                    </u> 21 <u>                    </u> . . . . . ▶					<b>27c</b> <u>                    </u>
<b>d</b> Add: Line 27a total <u>                    </u> and line 27b total <u>                    </u> . . . . . ▶					<b>27d</b> <u>                    </u>
<b>e</b> Public support (line 27c total minus line 27d total). . . . . ▶					<b>27e</b> <u>                    </u>
<b>f</b> Total support for section 509(a)(2) test. Enter amount from line 23, column (e). . . . . ▶					<b>27f</b> <u>                    </u>
<b>g</b> Public support percentage (line 27e (numerator) divided by line 27f (denominator)) . . . . . ▶					<b>27g</b> <u>                    </u> %
<b>h</b> Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) ▶					<b>27h</b> <u>                    </u> %
<b>28 Unusual Grants:</b> For an organization described in line 10, 11, or 12 that received any unusual grants during 1998 through 2001, 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. <b>Do not file this list with your return.</b> 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)

 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		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
(The term "expenditures" means amounts paid or incurred.)			
36	Total lobbying expenditures to influence public opinion (grassroots lobbying) . . . . .	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying) . . . . .	37	
38	Total lobbying expenditures (add lines 36 and 37) . . . . .	38	
39	Other exempt purpose expenditures . . . . .	39	
40	Total exempt purpose expenditures (add lines 38 and 39). . . . .	40	
41	Lobbying nontaxable amount. Enter the amount from the following table— If the amount on line 40 is—      The lobbying nontaxable amount is— 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 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 . . . . .	41	
42	Grassroots nontaxable amount (enter 25% of line 41) . . . . .	42	
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36 . . . . .	43	
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38 . . . . .	44	

**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.)

Calendar year (or fiscal year beginning in) ►	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
45	Lobbying nontaxable amount . . . . .				
46	Lobbying ceiling amount (150% of line 45(e))				
47	Total lobbying expenditures . . . . .				
48	Grassroots nontaxable amount . . . . .				
49	Grassroots ceiling amount (150% of line 48(e))				
50	Grassroots lobbying expenditures . . . . .				

**Part VI-B Lobbying Activity by Nonelecting Public Charities**

(For reporting only by organizations that did not complete Part VI-A) (See page 11 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
	✓	
	✓	
	✓	
	✓	
	✓	
	✓	
	✓	
	✓	
		None

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

**Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations** (See page 12 of the instructions.)

**51** Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

**a** Transfers from the reporting organization to a noncharitable exempt organization of

Yes	No
-----	----

(i) Cash	51a(i)	✓
----------	--------	---

51a(i)		✓
--------	--	---

(ii) Other assets	a(ii)		✓
-------------------	-------	--	---

a(ii)		✓
-------	--	---

**b Other transactions:**

(i) Sales or exchanges of assets with a noncharitable exempt organization . . . . .	b(i)		<input checked="" type="checkbox"/>
---	------	--	-------------------------------------

b(1)		
------	--	--

(ii) Purchases of assets from a noncharitable exempt organization . . . . .	b(ii)	✓
---	-------	---

<b>b(ii)</b>		✓
--------------	--	---

(iii) Rental of facilities, equipment, or other assets . . . . .	b(iii)		✓
--	--------	--	---

b(iii)		✓
--------	--	---

(iv) Reimbursement arrangements	b(iv)	✓
---------------------------------	-------	---

b(iv)		✓
-------	--	---

(v) Loans or loan guarantees	b(v)	✓
------------------------------	------	---

<b>b(v)</b>		✓
-------------	--	---

(vi) Performance of services or membership or fundraising solicitations . . . . .	b(vi)		✓
---	-------	--	---

<b>b(vī)</b>		✓
--------------	--	---

<b>c</b>	Sharing of facilities, equipment, mailing lists, other assets, or paid employees . . . . .	<b>c</b>		<input checked="" type="checkbox"/>
----------	--	----------	--	-------------------------------------

c		✓
---	--	---

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received:

[illegible]

**52a** Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

**b** If "Yes," complete the following schedule

[illegible]

**Greater Louisville Fund for the Arts**

FEIN: 61-0479626

**STMT 1**

FORM 990, Part I - Other Changes in Fund Balance

Description

Amount

Unrealized Gains

25,705

**Greater Louisville Fund for the Arts**  
FEIN: 61-0479626

**STMT 2**

FORM 990, Part II - Grants and Allocations

<b>Organization</b>	<b>2003</b>
Actors Theatre of Louisville	\$ 1,110,887
Fund for the Arts Properties Foundation, Inc.	210,000
Kentucky Museum of Arts + Design	118,410
Kentucky Opera Association	620,678
Kentucky Shakespeare Festival	130,235
Louisville Youth Orchestra	68,285
Louisville Bach Society	45,598
Louisville Ballet	776,223
The Louisville Orchestra	1,930,267
Louisville Theatrical Association	65,025
Louisville Visual Art Association	207,320
Louisville Youth Choir	36,433
Music Theatre Louisville	113,447
Stage One – Louisville Children's Theatre	360,370
Walden Theatre	42,679
West Louisville Boys and Girls Choirs	57,911
Miscellaneous grants and special projects	312,427
Total allocations to member and nonmember organizations	\$ <u>6,206,195</u>

**Greater Louisville Fund for the Arts**

FEIN: 61-0479626

**STMT 3**

## FORM 990, Part II - Other Expenses

Description	Total	Services	Management and General	Fundraising
Contract Labor	147,605	10,320	86,428	50,857
Data Processing	51,708		51,708	
Dues and Subscriptions	6,397		6,397	
Insurance	19,096	1,528	6,493	11,075
Miscellaneous	2,078	184	558	1,336
Transportation	27,257	3,238	6,554	17,465
Bank Fees	10,869		10,869	
Credit Card Processing Fees	4,201			4,201
Broker Commission	1,438			1,438
Newsletter	27,407	27,407		
Events	23,971			23,971
Printing and Marketing	82,832			82,832
Incentives	54,717			54,717
Performers	3,420			3,420
Services and Supplies	7,049			7,049
Whittenberg Scholarship	5,501	5,501		
Community Foundation Fees	913	913		
Totals	<u>476,459</u>	<u>49,091</u>	<u>169,007</u>	<u>258,361</u>

**Greater Louisville Fund for the Arts****STMT 4**

FEIN: 61-0479626

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 INCREAS- SUPPORT FOR THE ARTS, ASSURING OPTIMUM UTILIZATION OF THE ARTS SUPPORT ENTRUSTED TO OUR CARE AND ENSURING ACCESS TO THE BROAD METROPOLI- TAN COMMUNITY. SEE STATEMENT FOR THE ORGANIZA- TIONS AND PROGRAMS WHICH DIRECTLY BENEFITED FROM ASSISTANCE.	6,383,995	6,383,995
Total	<u>6,383,995</u>	<u>6,383,995</u>



**Greater Louisville Fund for the Arts**  
FEIN: 61-0479626

**STMT 5**

**Part IV - Balance Sheets**

**Amounts**

Line 50 - Receivables from officers, directors, trustees and key employees  
Balance due on computer purchased through employee purchase  
program.

1,074

**Line 56 - Investments - Other**

Bonds  
Mutual Funds  
Certificate of Deposit  
Money Market Funds

1,928,280  
253,244  
63,699  
3430

Total

2,248,653

**Line 58 - Other Assets**

Miscellaneous

70,407

**Greater Louisville Fund for the Arts**

FEIN: 61-0479626

STMT 6

## FORM 990, Part IV, Line 57 - Assets and Accumulated Depreciation

## Land, Building and Equipment: Basis

Description	Beginning	Year Additions	Retirements	Transfer	End Year
Building	600,000				600,000
Building Renovation	346,160				346,160
Building Additions	26,172		-26,172		0
Building Improvements	224,503		26,172		250,675
Equipment	26,197	3,360	-10,000		19,557
Auto	17,895				17,895
Furniture & Equipment	327,965	28,716	10,000		366,681
	1,568,892	32,076	0	0	1,600,968

## Land, Building and Equipment: Accumulated Depreciation

Description	Beginning	Year Additions	Retirements	Transfer	End Year
Building	285,180	17,864			303,044
Building Renovation	0				0
Building Additions	7,698		-7,698		0
Building Improvements	126,351	17,965	7,698		152,014
Equipment	11,430	3,912			15,342
Auto	497	3,500			3,997
Furniture & Equipment	276,873	25,681			302,554
	708,029	68,922	0	0	776,951

## NOTE: Depreciation reported in Other Expenses:

Depreciation	5,753
Postage	1,405
Telephone	163
Data Processing	18,359
Travel	3,500
Occupancy Cost	<u>39,742</u>
TOTAL	68,922

**Greater Louisville Fund for the Arts**

**STMT 7**

FEIN: 61-0479626

FORM 990, Part IV -A - Other Revenue on Return Not on Books

Description	Amount
Partnership Gifts	<u>1,148,612</u>

FORM 990, Part IV-B - Other Expenses on Return Nor on Books

Description	
Partnership Gifts	<u>1,148,612</u>

**Greater Louisville Fund for the Arts****STMT 8**

FEIN: 61-0479626

## FORM 990, Part V - List of Officers, Directors and Key Employees

Name and Address	Title and Time Devoted to Position	Compensation	Contributions to Employee Benefit Plans	Expense Acct and Other Allowances
Allen Cowen 623 West Main Street Louisville, Kentucky	President 40 hr/wk	238,382	53,353	18,632
Board of Directors See Attachment		None	None	None
Independent Contractors Included in Definition of "Key Employee" per Instructions:				
Joseph Blitzko 623 West Main Street Louisville, Kentucky	CFO 20+ (part yr)	41,600*	None	None
Diane Cornwell 623 West Main Street Louisville, Kentucky	CFO 20+ (part yr)	10,000*	None	None

\*Amounts reported as part of Contract Labor totals on Part II.

**FUND FOR THE ARTS  
2003 BOARD OF DIRECTORS**

**STMT 8**

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

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

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

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

Ms. Pamela G. Atherton  
Vice President, Commercial Sales  
Appriss  
10401 Linn Station Road  
Louisville, KY 40223

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

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

Mr. Patrick Cass  
Ernst & Young  
400 West Market Street, Suite 2100  
Louisville, KY 40202

Mr. Steven B. Bing  
Principal & COO  
Prosperitas Investment Partners, LP  
3600 National City Tower  
101 South 5<sup>th</sup> Street  
Louisville, Kentucky 40202

Mr. Tom Cottingham  
11005 Park Road  
Louisville, Kentucky 40223

Dr. Stephen Daeschner  
Superintendent  
Jefferson County Public Schools  
3332 Newburg Road  
Louisville, KY 40218

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

Mr. Brad DeVries  
President & CEO  
Semonin Realtors  
4967 US Highway 42, Suite 200  
Louisville, KY 40222

Mr. Jonathan D. Blum  
Sr. Vice President, Public Affairs  
Yum! Brands Inc.  
1441 Gardiner Lane  
Louisville, KY 40213

Mr. Stanley S. Dickson  
519 Tiffany Lane  
Louisville, KY 40207

Mr. Morton Boyd  
13415 Highway 42  
Prospect, KY 40059

Mr. John Dorkin  
Bisig Communications  
640 So. 4<sup>th</sup> Street, Suite 300  
Louisville, KY 40202

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

Ms. Jane Driskell  
Deputy Mayor  
City Hall  
601 W. Jefferson Street  
Louisville, KY 40202

Mr. C. Hayden Edwards  
3104 Woodside Road  
Glenview, KY 40025

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

Mr. James R. Gaunt  
President & CEO  
Fifth Third Bank  
401 S. 4th Avenue, 7<sup>th</sup> Floor  
Louisville, KY 40202

Mr. William R. Gernert  
President & CEO  
AEGON Institutional Markets  
400 W. Market Street, 9<sup>th</sup> Floor  
Louisville, KY 40232

Dr. Gene Gilchrist  
Asst. to the President & VP for New Ventures  
University of Louisville  
202 Grawemeyer Hall  
Louisville, KY 40292

Mr. C. Edward Glasscock  
Co-Managing Member  
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

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

Mr. R. K. Guillaume  
Regional President  
Louisville Metro President  
BB&T  
500 W. Broadway  
Louisville, KY 40202

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

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

Mrs. Martha Dunbar Hall  
203 Loganberry Court  
Louisville, KY 40207

Mrs. Margaret Handmaker  
World Wide Partner  
Mercer Human Resource Consulting  
462 South Fourth Street, Suite 1500  
Louisville, KY 40202

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

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

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  
6403 Shrader Lane  
LaGrange, KY 40031

Mr. David Klein  
7107 Windham Parkway  
Prospect, KY 40059

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

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. Patrick B. McGinnis  
Chairman & CEO  
Trover Solutions, Inc.  
1600 Watterson Tower  
Louisville, Kentucky 40218

Mr. A. Stevens Miles  
1611 Parkins Mill Road  
Greenville, South Carolina 29607-3642

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

Ms. Mary Moseley  
President & Chairman  
Al J. Schneider Company  
325 W. Main Street, Suite 1010  
Louisville, KY 40202

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

Mr. Orson Oliver  
BB&T  
500 W. Broadway  
Louisville, KY 40202

Mr. Ted M. Parker  
President & CEO  
National City Bank of Kentucky, 37<sup>th</sup> Floor  
P.O. Box 36000  
Louisville, Kentucky 40233

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

Mr. 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. 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.  
609 W. Main Street  
Louisville, KY 40202

Mr. Wayne T. Smith  
President & CEO  
Community Health Systems  
155 Franklin Road, Suite 400  
Brentwood, TN 37027

Mr. Carl M. Thomas  
Chairman & 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

Mrs. Patricia R. Updegraff  
2564 Cherosen Road  
Louisville, Ky 40205

Mr. Michael B. Vairin  
Sr. Vice President  
PNC Bank  
500 W. Jefferson Street  
Louisville, Kentucky 40202

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

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

Mr. Mark Wheeler  
Regional Chairman / EVP  
U.S. 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



**Greater Louisville Fund for the Arts**

**STMT 9**

FEIN: 61-0479626

FORM 990, SCHEDULE A, Part III

Explanation for Line 2(b)

During the year, an officer purchased a computer pursuant to the organization's employee technology purchase program. This resulted in an "extension of credit" as the program allows the employee to amortize the cost of the computer through monthly payroll withholding.

Explanation of Line 2(d)

An officer was paid compensation for services and reimbursed business expenses as disclosed in the detail provided for Part V of Form 990.

**Greater Louisville Fund for the Arts****STMT 10**

FEIN: 61-0479626

**FORM 990, SCHEDULE A, Part III - Explanation for Line 3**

The Greater Louisville Fund for the Arts (THE FUND) provides financial support predominately to member organizations. In addition, other community arts organizations are sometimes identified for support. 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 organizations 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.

**Greater Louisville Fund for the Arts****STMT 11**

FEIN: 61-0479626

**FORM 990, SCHEDULE A, Part IV-A - Other Income**

Description	2001	2000	1999	1998	Total
Cost Reimb. By Donors	42,724	40,640	None	None	83,364
Life Ins. Proceeds					
Arts Leadership			765	55,250	56,015
Misc. Income	55,116		36,138	92,978	184,232
Allow for Uncollectible		-310,000			-310,000
Pledge	-500,000	-190,000	-205,203	None	-895,203
Totals	-402,160	-459,360	-168,300	148,228	-881,592

NOTE: Schedule A was prepared using the accrual method of accounting as used by this organization. It has been applied consistently for all years. Given the high percentage of public support, modification of all numbers to a cash basis, would not materially impact the results).

# 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.

<b>Type or print</b>  File by the due date for filing your 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>	
	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-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 **02/16**, 20**04**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
- ☐ calendar year 20 ... or
- ☒ tax year beginning **07/01**, 20**02**, and ending **06/30**, 20**03**.

- 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 ► *Diane Cornwell* Title ► **CFO** Date ► **11-17-03**

For Paperwork Reduction Act Notice, see Instruction

Cat. No. 27916D

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).

- ☒ Form 990    ☐ Form 990-EZ    ☐ Form 990-T (sec. 401(a) or 408(a) trust)    ☐ Form 1041-A    ☐ Form 5227    ☐ Form 8870  
☐ Form 990-BL    ☐ Form 990-PF    ☐ Form 990-T (trust other than above)    ☐ Form 4720    ☐ 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 May 17, 20 04
- 5 For calendar year \_\_\_\_\_, or other tax year beginning July 1, 20 02 and ending June 30, 20 03
- 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 \$ \_\_\_\_\_ **N/A**

**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 ▶

*Diane Cornwell*Title ▶ **CFO**

Date ▶

2-13-04**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 \_\_\_\_\_

Director

By \_\_\_\_\_

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>Diane Cornwell/Fund for the Arts</b>
	Number and street (include suite, room, or apt. no.) or P.O. box number <b>623 West Main Street</b>
	City or town, province or state, and country (including postal or ZIP code) <b>Louisville, KY 40202</b>

**EXTENSION APPROVED**

**LINDA WEISKOPF, FIELD DIRECTOR**  
SUBMISSION PROCESSING, OGDEN

