Form **990**

Department of the Treasury Internal Revenue

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)

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

OMB No 1545-0047 Open to Public Inspection

Serv									
			ear, or tax year beginning	07-01-2006 and ending	06-30-2007	7	D Employ	er ide	entification number
_		pplicable Please	C Name of organization FUND FOR THE ARTS INC						
	ddress ch	label or	% Diane Cornwell				61-04 E Telepho		
∏ Na	ame cha	nge print or type. See	Number and street (or P (D box if mail is not delivered to	street addres	ss) Room/suite	•		
☐ In	ııtıal retu	rn Specific Instruc-	623 West Main Street				(502)		
∏ Fı	nal retur	n tions.	City or town, state or cou Louisville, KY 40202	ntry, and ZIP + 4		•	F Accounts Othe		hod Cash Accrual
┌ Ar	mended	return	Louisville, KT 40202				, othe	Т	", P
Г Ap	pplication	n pending							
			on 501(c)(3) organizations						ction 527 organizations
		trusts	must attach a completed S	chedule A (Form 990 or 99	0-EZ).		- :		affiliates? Tyes V No
G V	Veb sit	e: 🕨 www fundfort	hearts com			H(b) If "Yes			
			 			H(c) Are all			Yes No e instructions)
۰ ،	organiza	ation type (check on	ıly one) ► 🔽 🥵 501(c) (3)	◀ (insert no) 4947(a)(1)	or 527	· ·			filed by an organization
			zation is not a 509(a)(3) suppo 0 A return is not required, but			1	d by a grou		· <u>-</u> -
		file a complete retur		ii the organization chooses to h	ne a return,	I Grou	Exempti	on Nu	mber -
				121 12111751		M Check	▶	e orgar	nization is not required to
			s 6b, 8b, 9b, and 10b to li	<u> </u>			•		990-EZ, or 990-PF)
Pa	art I		kpenses, and Chang		Fund Bal	ances (See	e the ins	<u>struc</u>	tions.)
			ifts, grants, and similar ar donor advised funds .		امدا				
	a b		pport (not included on line		1a 1b	0.64	8,372		
		·	upport (not included on hi	•	1c		-		
	c d	·	tributions (grants) (not in	•	1d		4,867 0,978		
	"			•					11,254,217
	е .		1a through 1d) (cash \$ <u>9</u>)	-	le 2	
	2	Program service revenue including government fees and contracts (from Part VII, line 93) .							0
	3	Membership dues and assessments							0
	4	Interest on savings and temporary cash investments							113,643
	5	Dividends and interest from securities							0
	6a	Gross rents .			6a		0		
	b	Less rental exp			6b				0
d.	С 7		ne or (loss) subtract line 6					5C 7	0
Revenue	8a		nt income (describe 🕨) om sales of assets			(D) O the are		′ +	
R P	l Ga		tory	(A) Securities 2,076,894	00	(B) O ther	0		
	ь		pasis and sales expenses	2,033,090			0		
	C		·	95 43,804	 		0		
	d	, , ,	i) Combine line 8c, colum					3d	43,804
	9	,	and activities (attach sche				-	-	
				saute, it any amount is it	om gamm g,	check here p	'		
	а	Gross revenue (not including \$ ported on line 1b)	of	9a		o		
	ь	·	enses other than fundrais		9b		0		
	c		oss) from special events					oc	0
	10a	•	nventory, less returns and		10a		0	_	
	ь		odssold		10b		0		
	c	Gross profit or (loss)) from sales of inventory (attac	h schedule) Subtract line 10b fr	om line 10a		1	0c	0
	11	Other revenue (f	from Part VII, line 103)				. -	11	0
	12		dd lines 1e, 2, 3, 4, 5, 6c,				-	12	11,411,664
	13		s (from line 44, column (E					13	9,886,904
an W	14	Management and	d general (from line 44, co	olumn (C))			. 1	.4	228,188
Expenses	15		m line 44, column (D)) .					15	958,314
Е Ж	16	Payments to affi	liates (attach schedule)				1	16	0
	17	Total expenses A	Add lines 16 and 44, colu	mn (A)			1	17	11,073,406
N.	18		ıt) for the year Subtract Iı				1	18	338,258
	19	Net assets or fu	nd balances at beginning	of year (from line 73, colu	ımn (A)) .		. 1	19	3,562,324
Nel Assel	20	Other changes II	n net assets or fund balar	ices (attach explanation)	图		. 7	20	-25,560
ž	21	Net assets or fu	nd balances at end of yea	r Combine lines 18, 19, a	nd 20 .	<u> </u>		21	3,875,022
For I	Privacv	Act and Paperwe	ork Reduction Act Notice.	see the separate instruc	tions. C	at No 11282	<u>'</u> 2Y		Form 990 (2006)

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 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
22a	Grants paid from donor advised funds (attach Schedule) (cash \$	22a	0	0		
22b	Other grants and allocations (attach schedule) (cash \$7,311,930 noncash \$2,150,000)					
	If this amount includes foreign grants, check here	22b	9,461,930	9,461,930		
23	Specific assistance to individuals (attach schedule)	23	0	0		
24	Benefits paid to or for members (attach schedule)	24	0	0		
25a	Compensation of current officers, directors, key employees etc. Listed in Part V-A (attach schedule)	25a	331,134	132,454	66,226	132,454
b	Compensation of former officers, directors, key employees etc listed in Part V -B (attach schedule)	25b	0	0	0	0
С	Compensation and other distributions not icluded above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)	25c	0	0	0	0
26	Salaries and wages of employees not included on lines 25a, b and c	26	526,148	101,222	65,570	359,356
27	Pension plan contributions not included on lines 25a, b and c	27	17,371	1,956	2,384	13,031
28	Employee benefits not included on lines 25a - 27	28	32,154	5,115	5,980	21,059
29	Payroll taxes	29	47,203	11,449	6,801	28,953
30	Professional fundraising fees	30	,	, 0	0	, 0
31	Accounting fees	31	15,225	0	15,225	0
32	Legal fees	32	5,329	0	5,329	0
33	Supplies	33	26,180	5,692	3,045	17,443
34	Telephone	34	22,175	5,144	3,163	13,868
35	Postage and shipping	35	39,028	2,586	1,509	34,933
36	Occupancy	36	52,170	15,565	0	36,605
37	Equipment rental and maintenance	37	0	0	0	0
38	Printing and publications	38	24,360	6,443	4,439	13,478
39	Travel	39	3,913	992	587	2,334
40	Conferences, conventions, and meetings	40	0	0	0	0
41	Interest	41	0	0	0	0
42	Depreciation, depletion, etc (attach schedule) 📆	42	3,371	855	506	2,010
43	Other expenses not covered above (Itemize)					
а	See Additional Data Table	43a				
b		43b				
С		43c				
d		43d				
е		43e				
f		43f				
g		43g				
44	Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13–15)	44	11,073,406	9,886,904	228,188	958,314
Joint	Costs. Check ► ✓ If you are following SOP 98-2				•	

Part III Statement of Program Service Accomplishments (See the instructions.)

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.

## Expenses Expenses Expenses			_		Program Service
publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt (4) orgs, and 4947(a)(1) trusts, but optional for others) a Arts, Culture & Humanities Programs, General/O ther. The mission of Fund for the Arts (the Fund) is to foster excellence in the arts as a primary means of improving the quality of life, education of children and furthering economic development of the Metro Louisville community. The Fund provides funding to 15 member groups and more than 200 community organizations and schools across the region. It also offers a range of community arts services designed to advocate for and extend the reach of the arts to the whole community. (215 Members and Programs) (Grants and allocations \$ 9,461,930) If this amount includes foreign grants, check here ▶ □ (Grants and allocations \$) If this amount includes foreign grants, check here ▶ □ (Grants and allocations \$) If this amount includes foreign grants, check here ▶ □ (Grants and allocations \$) If this amount includes foreign grants, check here ▶ □ (Grants and allocations \$) If this amount includes foreign grants, check here ▶ □	Wh	at is the organization's primary exempt purpos	se? 🟲 s	Support of the Arts	· •
excellence in the arts as a primary means of improving the quality of life, education of children and furthering economic development of the Metro Louisville community. The Fund provides funding to 15 member groups and more than 200 community organizations and schools across the region It also offers a range of community arts services designed to advocate for and extend the reach of the arts to the whole community (215 Members and Programs) (Grants and allocations \$ 9,461,930) If this amount includes foreign grants, check here (Grants and allocations \$) If this amount includes foreign grants, check here (Grants and allocations \$) If this amount includes foreign grants, check here (Grants and allocations \$) If this amount includes foreign grants, check here (Grants and allocations \$) If this amount includes foreign grants, check here (Grants and allocations \$) If this amount includes foreign grants, check here (Grants and allocations \$) If this amount includes foreign grants, check here (Grants and allocations \$) If this amount includes foreign grants, check here (Grants and allocations \$) If this amount includes foreign grants, check here	pub	lications issued, etc. Discuss achievements that are not r	neasural	ole (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt	(4) orgs , and 4947(a)(1) trusts, but optional for
Grants and allocations \$) If this amount includes foreign grants, check here ▶ ☐ (Grants and allocations \$) If this amount includes foreign grants, check here ▶ ☐ (Grants and allocations \$) If this amount includes foreign grants, check here ▶ ☐ e Other program services (attach schedule) (Grants and allocations \$) If this amount includes foreign grants, check here ▶ ☐	а	excellence in the arts as a primary means of economic development of the Metro Louisville more than 200 community organizations and services designed to advocate for and extend	improv e comn school	ing the quality of life, education of children and furthering nunity The Fund provides funding to 15 member groups and s across the region It also offers a range of community arts	
(Grants and allocations \$) If this amount includes foreign grants, check here ▶ ☐ (Grants and allocations \$) If this amount includes foreign grants, check here ▶ ☐ (Grants and allocations \$) If this amount includes foreign grants, check here ▶ ☐ e Other program services (attach schedule) (Grants and allocations \$) If this amount includes foreign grants, check here ▶ ☐		(Grants and allocations \$ 9,461,930)		If this amount includes foreign grants, check here 🕨 🦵	9,886,904
Grants and allocations \$) If this amount includes foreign grants, check here ▶ ☐ (Grants and allocations \$) If this amount includes foreign grants, check here ▶ ☐ e Other program services (attach schedule) (Grants and allocations \$) If this amount includes foreign grants, check here ▶ ☐	b				
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e Other program services (attach schedule) (Grants and allocations \$) If this amount includes foreign grants, check here ▶ □	d	(Grants and allocations \$)	If this amount includes foreign grants, check here 🕨 🦵	
e Other program services (attach schedule) (Grants and allocations \$) If this amount includes foreign grants, check here ▶ □		(Grants and allocations \$)	If this amount includes foreign grants, check here	
	e			Trains amount metados foreign grants, enter p	
f Total of Program Service Expenses (should equal line 44, column (B), Program services))		
	f	Total of Program Service Expenses (should ed	qual lın	e 44, column (B), Program services) 🕨	9,886,904

Pa	rt IV	Balance Sheets (See the instru	ctions	:.)			
Not	e:	Where required, attached schedules and amou		thin the description	(A) Beginning of year		(B) End of year
\Box	45	Cash—non-interest-bearing			0	45	0
	46	Savings and temporary cash investments		ŀ	1,062,531	46	1,394,661
	47a	Accounts receivable	47a	40,883			
	b	Less allowance for doubtful accounts	47b	0	58,671	47c	40,883
	405	Pledges receivable	48a	5,257,915			
	48a b	Less allowance for doubtful accounts	48b	512,163	4,962,172	48c	4,745,752
	49	Grants receivable	٠		0	49	0
	50a	Receivables from current and former office key employees (attach schedule)			0	50a	0
	b	Receivables from other disqualified person 4958(c)(3)(B) (attach schedule)	s (as d	efined under section	0	50b	0
	51a	Other notes and loans receivable (attach					
	_	schedule)	51a	270,000			257
Assets	ь	Less allowance for doubtful accounts	51b	0	0	51c	270,000
A.	52 53	Inventories for sale or use Prepaid expenses and deferred charges .			16,858	52 53	35,275
	54a	Investments—publicly-traded securities		· · · · · · · · · · · · · · · · · · ·	0	54a	0
	ь	Investments—other securities (attach sch		' ' ' H	0	54b	0
	55a	Investments—land, buildings, and	,	' '			
	_	equipment basis	55a	0			
	b	Less accumulated depreciation (attach schedule)	55b	0	0	55c	0
	56	Investments—other (attach schedule) .			1,804,401	56	1,705,024
	57a	Land, buildings, and equipment basis	57a	1,565,756			
	b	Less accumulated depreciation (attach schedule)	57b	838,960	740,068	57c	726,796
	58	Other assets, including program-related in (describe	vestme	ents			
		(describe F)	169,759	58	238,386	
	59	Total assets (must equal line 74) Add line	s 45 th	rough 58	8,814,460	59	9,156,777
	60	Accounts payable and accrued expenses			204,377	60	266,741
	61	Grants payable			5,047,759	61	5,015,014
	62	Deferred revenue		[0	62	0
Ŷ	63	Loans from officers, directors, trustees, an					
.		schedule)		•	0	63	0
\;	64a b	Tax-exempt bond liabilities (attach schedu Mortgages and other notes payable (attach		ŀ	0	64a 64b	0
	65	Other liabilities (describe	ischeu	ule)	0	65	0
	66	Total liabilities Add lines 60 through 65			5,252,136	66	5,281,755
	Orga	anizations that follow SFAS 117, check here 67 through 69 and lines 73 and 74	► ▼ a	nd complete lines			
Š	67	Unrestricted			2,529,530	67	2,864,038
Balances	68	Temporarily restricted		-	732,794	68	710,984
B.	69	Permanently restricted			300,000	69	300,000
Fund	Orga	anizations that do not follow SFAS 117, chec complete lines 70 through 74					
5	70	Capital stock, trust principal, or current fui			70		
sets	71	Paid-in or capital surplus, or land, building	, and ed	quipment fund		71	
Ass	72	Retained earnings, endowment, accumulate	me, or other funds .		72		
Net 4	73	Total net assets or fund balances Add line through 72 (Column (A) must equal line 19	-				
		line 21)	3,562,324	73	3,875,022		
	74	Total liabilities and net assets / fund balances	s Add line	es 66 and 73 • •	8,814,460	74	9,156,777 Form 990 (2006)

Pari	t IV-A Reconciliation of Reve	nue per Audited Finai	ncial Sta	tements V	Vith Reven	ue per	Return (See
	Total revenue, gains, and other supp	ort per audited financial sta	tements			а	8,895,559
ь	A mounts included on line a but not o	•					
1	Net unrealized gains on investments		Ь1		-25,560		
2	Donated services and use of facilitie		b2		0	1	
3	Recoveries of prior year grants .		b3		0	1	
4	Other (specify)						
			b 4		0		
	Add lines b1 through b4					ь	-25,560
C	Subtract line b from line a					C	8,921,119
d	A mounts included on Part I, line 12,		1	İ			
1	Investment expenses not included o	n Part I, line	d1		0		
2	Other (specify)		-				
2	Other (specify)		d2		2,490,545		
	Add lines d1 and d2		- L			4	-25,560
e	Total revenue (Part I, line 12) Add l					-	11,411,664
•	d					e	11,111,001
Part	t IV-B Reconciliation of Expe		ncial St	atements	With Expe	nses pe	r Return
а	Total expenses and losses per audit	ed financial statements .				а	8,582,861
b	A mounts included on line a but not o	n Part I, line 17					
1	Donated services and use of facilitie	s	b1		0		
2	Prior year adjustments reported on F	art I, line			0	1	
	20		b2				
3	Losses reported on Part I, line		ьз		0		
4	Other (specify)					1	
•	Other (specify)		b4		0		
	Add lines b1 through b4		-	'		ь	0
c	Subtract line b from line a					c	8,582,861
d	Amounts included on Part I, line 17,	but not on line a:					
1	Investment expenses not included o				0		
	6b	·····	d1				
2	Other (specify) 😼						
			_ d2		2,490,545		
	Add lines d1 and d2					d	2,490,545
e	Total expenses (Part I, line 17) Add						11,073,406
Dow	d		[]-			e	
Pail	director, trustee, or key en instructions.)						
		(B) Title and average hours	(C) Co	mpensation	(D) Contribi employee bend		(E) Expense
	(A) Name and address	per week devoted to position			deferred com	pensation	account and other allowances
S 0 0 1	dditional Data Table				plans	5	
Jee A	dultional Data Fable						
		1	1		1		

art V-A Current Officers, Director	rs, Trustees, and Ke	y Employees (cont	inued)		Yes	No
5a Enter the total number of officers, directo	ors, and trustees permitted	to vote on organizatio	n business at board			
meetings						
b Are any officers, directors, trustees, or k	ey employees listed in Foi	rm 990, Part V - A , or hi	ghest compensated			
employees listed in Schedule A, Part I, o	r highest compensated pr	ofessional and other inc	lependent			
contractors listed in Schedule A , Part II-	-A or II-B, related to each	other through family o	· business			
relationships? If "Yes," attach a stateme	nt that identifies the indivi	iduals and explains the	relationship(s) 📆 .	75b	Yes	
c Do any officers, directors, trustees, or ke						
employees listed in Schedule A, Part I, o						
contractors listed in Schedule A, Part II-			·			
tax exempt or taxable, that are related to				75c		No
organization"	-			750		"
If "Yes," attach a statement that include:	s the information describe	d in the instructions				
d Does the organization have a written con	flict of interest policy? .			75d	Yes	
art V-B Former Officers, Directo				satio	n or C	ther
Benefits (If any former off	icer, director, trustee,	or key employee re	ceived compensation	or oth	ner bei	nefits
(described below) during th			amount of compens	ation	or oth	er
benefits in the appropriate of	column. See the instruc	ctions.)	(D) Contributions to			
(A) Name and address	(B) Loans and Advances	(C) Compensation	employee benefit plans		ense acc	
(A) Hame and dadiess	(b) Louris and Advances	(If not paid enter -0-)	and deferred compensation plans	oth	er allowa	ances
			piano			
art VI Other Information (See the	instructions.)	•			Yes	No
5 Did the organization make a change in its activitie	s or methods of conducting activ	vities? If "Yes," attach a				
detailed statement of each change				76		No
Were any changes made in the organizing	or governing documents	but not reported to the	IRS?	77		No
If "Yes," attach a conformed copy of the		put mot reported to the				
Ba Did the organization have unrelated business gros		ung the week severed by this	ratum 3	78a		No
						NO
b If "Yes," has it filed a tax return on Form				78b		
Was there a liquidation, dissolution, termination, o	_	•				
a statement				79		No
Da Is the organization related (other than by associat			• •			
governing bodies, trustees, officers, etc , to any o	· -			80a	Yes	
b If "Yes," enter the name of the organizati	on Fund for the Arts Pr	operties Foundation Inc	:			
	and check wh	ether it is 🔽 exempt o	or nonexempt			
La Enter direct or indirect political expendit			0			
b Did the organization file Form 1120-POL f				81b		No.

Dar	t VI Other Information (continued)		Yes	No
			res	140
82a	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?	82a	Yes	
ь	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)			
822	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	Yes	
	Did the organization comply with the public inspection requirements for retains and exemption applications?	83b	Yes	
			165	
	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gıfts were not tax deductıble?	84b		
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b		
	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 the prior year			
c	Dues assessments, and similar amounts from members 85c			
	Section 162(e) lobbying and political expenditures	1		
	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e			
	, , , , , , , , , , , , , , , , , , , ,	-		
_	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g		
h	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?	85h		
06	501/2//7) 5	6511		
86	501(c)(7) orgs. Enter a Initiation fees and capital contributions included on line 12 86a			
b	Gross receipts, included on line 12, for public use of club facilities 86b			
87	501(c)(12) orgs. Enter a Gross income from members or shareholders 87a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
88a	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	88a		No
b	At any time during the year, did the organization directly or indirectly own a controlled entity within the meaning of section 512(b)(13)? If yes complete Part XI	88b		No
	504(1/2)	990		NO
89a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under			
	section 4911 • 0 , section 4912 • 0 , section 4955 • 0			
ь	501(c)(3) and $501(c)(4)$ orgs. 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	89b		No
c	Enter A mount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Enter Amount of tax on line 89c, above, reimbursed by the organization • 0			
	All organizations. At any time during the tax year was the organization a party to a prohibited tax shelter			
_	transaction?			
		89e		No
f	All organizations. Did the organization acquire direct or indirect interest in any applicable insurance contract?			
		89f		Νo
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time			
	during the year?			
		89g		No
90a	List the states with which a copy of this return is filed 🕨 KY			
b	Number of employees employed in the pay period that includes March 12, 2006 (See instructions)			12
91a	The books are in care of 🛌 Monica Beckmann Telephone no 🛌 (502)	582-0	122	
	623 West Main St Located at Louisville, KY ZIP + 4 Louisville, KY			
L				
D	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial		Yes	Νο
	account)?	91b		Νο
	If "Yes," enter the name of the foreign country >			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and			
	Financial Accounts			

Section 4947(a)(1) nonexempt charit and enter the amount of tax-exemp	_					•
t VIII Analysis of Income-P					F 92	
: Enter gross amounts unless otherw			business income		ction 512, 513, or 514	(E)
		(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	Related or exempt functio income
Program service revenue a						
b						
c d						
e						
f Medicare/Medicaid payments .						
g Fees and contracts from governm	_					
Membership dues and assessmen Interest on savings and temporary cash ii			0	14	113,643	
Dividends and interest from secur				1	113,013	
Net rental income or (loss) from re	eal estate					
a debt-financed property						
b non debt-financed property						
Net rental income or (loss) from personal						
O ther investment income Gain or (loss) from sales of assets other			0	18	43,804	
Gain or (loss) from sales of assets other to Net income or (loss) from special	·			10	43,004	
Gross profit or (loss) from sales o						
Other revenue a						
ь						
с						
d						
e						
Subtotal (add columns (B), (D), ar	, ,,		0)	157,447	
Total (add line 104, columns (B), (., , , , ,				· · · • <u> </u>	157,4
Line 105 plus line 1e, Part I, should						
rt VIII Relationship of Act No. Explain how each activity for whof the organization's exempt put	hich income is report	ted ın column	(E) of Part VII c	ontributed im		
rt IX Information Regardin	ng Taxable Subs	idiaries a	nd Disregard	ed Entities	(See the instr	uctions.)
(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
	9/6					
	%	+				
	%	1				
Int X Information Regarding			ath Davasal	Damadit Ca	ntracts (See th	• •

L06	Did the reporting organization make ar the Code? if "Yes," complete the sche	·	defined in section	512(b)(13)	of Yes	No
	(A) Name and address of each controlled entity	(B) Employer Identification Number	(C) Descriptio transfe		(D) Amount of tran	sfer
	Totals					
					Yes	No
07	Did the reporting organization receive the Code? if "Yes," complete the sche		y as defined in sec	tion 512(b)((13) of	
	(A) Name and address of each controlled entity	(B) Employer Identification Number	(C) Description transfe		(D) Amount of tran	sfer
	Totals					
8	Did the organization have a binding wr		, 2006 covering th	e interests,	rents,	No
eas	Under penalties of perjury, I declare that I and belief, it is true, correct, and complete		panying schedules and is based on all informa 2008	statements, ar tion of which p	rents,	nowledge
eas gn	Under penalties of perjury, I declare that I and belief, it is true, correct, and complete Signature of officer	nestion 107 above? have examined this return, including accom-	panying schedules and is based on all informa	statements, ar tion of which p	rents,	nowledge
eas gn ere	Under penalties of perjury, I declare that I and belief, it is true, correct, and complete Signature of officer Diane Cornwell CFO Type or print name and title Preparer's signature	nestion 107 above? have examined this return, including accom-	panying schedules and is based on all informa 2008	statements, ar tion of which p i-05-14 Preparer's	rents,	nowledge edge
eas gn ere	Under penalties of perjury, I declare that I and belief, it is true, correct, and complete Signature of officer Diane Cornwell CFO Type or print name and title Preparer's signature Firm's name (or yours if self-employed),	have examined this return, including accomine Declaration of preparer (other than officer)	panying schedules and is based on all information 2008 Date Check if self-	statements, ar tion of which p i-05-14 Preparer's	nd to the best of my know	nowledge edge

DLN: 93490135024008

SCHEDULE A (Form 990 or 990EZ)

Department of the Internal Revenue Service

Organization Exempt Under Section 501(c)(3) (Except Private Foundation) and Section 501(e), 501(f), 501(k),

501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information—(See separate instructions.) ▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ 2006

OMB No 1545-0047

Name of the organization FUND FOR THE ARTS INC				Employer identifica	ntion number
OND FOR THE ARTS INC				61-0479626	
Part I Compensation of the Five				ers, Directors, a	nd Trustees
(See page 2 of the instructio (a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensa		(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Monica Beckmann	G				
623 West Main Street Louisville, KY 40202	Controller 50	61	,111	8,455	1,140
Barbara S Smith					
623 West Main Street	Campaign Officer	138,239	,239	11,172	1,440
Louisville, KY 40202	50		<i>'</i>	,	,
Jeanne Curtis					
623 West Main Street	New Business Develop	85	5,527	4,794	1,080
Louisville, KY 40202	40			.,,, -	
Total number of other employees paid over \$50,000	0				
	Five Highest Paid Indepe ictions. List each one (wheth				
(a) Name and address of each independent of	ontractor paid more than \$50,0	00 (b) Type	ofservice	(c) Compensation
Diane Cornwell					
Box 446		CFO-Outs	ourced		61,140
Crestwood, KY 40014					
Total number of others receiving over \$50,00 professional services	00 for	0			
Part III-B Compensation of the	Five Highest Paid Indepe	ndent Contra	actors	for Other Servi	ices
(List each contractor who	performed services other t enter "None". See page 2 fo	han professioi	nal ser		
(a) Name and address of each independent of				ofservice	(c) Compensation
None					
Total number of other contractors receiving o	over				

\$50,000 for other services

Par	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, include 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 ► \$ 6,368 (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B)	1	Yes	
	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.)			
а	Sale, exchange, or leasing property?	2a		Νo
ь	Lending of money or other extension of credit?	2b		Νo
c	Furnishing of goods, services, or facilities?	2c	Yes	
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	Yes	
e	Transfer of any part of its income or assets?	2e		Νo
За	Did the organization make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation			
	of how the organization determines that recipients qualify to receive payments) $^{*}\!$	3a	Yes	
Ь	Did the organization have a section 403(b) annuity plan for its employees?	3b	Yes	
С	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment , historic land areas or structures? If "Yes" attach a detailed statement	3с		Νo
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d		Νo
4a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g If "No," complete lines 4f and 4g	4a	Yes	
b	Did the organization make any taxable distributions under section 4966?	4b		Νo
c	Did the organization make a distribution to a donor, donor advisor, or related person?	4c		Νo
d	Enter the total number of donor advised funds owned at the end of the tax year			
e	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year			
f	Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts			
g	Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year			

Pa	art I	N Reason for Non-Private	Foundation Status	(See pages 4 th	rough 7 of the	instructions.)	
cert	ify th	nat the organization is not a private four	ndation because it is (P	lease check only C	NE applicable bo	эх)		
5	Г	A church, convention of churches, or	association of churches	Section 170(b)(1)(A)(ı)			
6	Г	A school Section 170(b)(1)(A)(ii) (A	Also complete Part V)					
7	Γ	A hospital or a cooperative hospital s	service organization Sec	tion 170(b)(1)(A)	(111)			
8	Γ	A federal, state, or local government	or governmental unit Se	ection 170(b)(1)(A)(v)			
9	Γ	A medical research organization oper	rated in conjunction with	a hospital Section	170(b)(1)(A)(ıı	ı) Enter the ho	spital's name, city	
		and state 🕨						
10	Γ	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	굣	An organization that normally receive	es a substantial part of it	s support from a g	overnmental unit	or from the ge	neral public	
		Section 170(b)(1)(A)(vi) (Also comp	lete the Support Schedu	le ın Part IV-A)				
11b	Γ	A community trust Section 170(b)(1)(A)(vı) (Also complete	the Support Sched	lule in Part IV-A)		
12	Γ	An organization that normally receive	es (1) more than 331/3	% of its support fro	m contributions,	membership fe	ees, and gross	
		receipts from activities related to its	charitable, etc , function	ns—subject to certa	aın exceptions, a	nd (2) no more	than 331/3% of	
		its support from gross investment inc	ome and unrelated busi	ness taxable ıncom	ne (less section !	511 tax) from b	ousinesses	
		acquired by the organization after Jur	ne 30, 1975 See sectioi	n 509(a)(2) (Also	complete the Su	pport Schedule	in Part IV-A)	
13	Γ	An organization that is not controlled requirements of section 509(a)(3) C		•		,	se meets the	
		requirements of section 309(a)(3) C	neck the box that descri	ibes the type of suf	pporting organiza	ition		
		┌ Type I ┌ Type II ┌ Typ	e III - Functionally Inte	grated Γ T	ype III - Other			
		Provide the following informa	ation about the supporte	d organizations. (s	see page 7 of the	instructions.)		
				(c)	(b)		T	
			(b)	Type of	Is the sup	ported		
		(a)	Employer	organization (described in	organization li		(e) Amount of	
1	lame((s) of supported organization(s)	ident if icat ion	lines 5 t hrough	supporting org governing do		support?	
			number	12 above or	governing do	cuments	_	
				IRC section)	Yes	No		
Tota						<u> </u>	<u> </u>	
14	_	An organization organized and operat	ed to test for public safe	ity Section 509(a)	(4) (See page 7	of the instruct	ions)	
	,	Ingamental operation		-, (u)	· · · · · · · · · · · · · · · · · · ·		·-·- /	

Schedule A (For	m 990 or 990-EZ) 2006	Page 4
	Support Schedule (Complete only if you checked a box on line 10, 11, or 12) Use cash	_
Note: You may u	se the worksheet in the instructions for converting from the accrual to the cash method of accounting.	

Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2004	(c) 2003	(d) 2	2002	(e) Total
15	Gifts, grants, and contributions received (Do not include unusual grants See line 28)	8,303,307	7,297,214	7,368,334		7,588,940	30,557,795
16	Membership fees received	0	0	0		0	0
17	Gross receipts from admissions, merchandise						
	sold or services performed, or furnishing of	٥	0	0		0	0
	facilities in any activity that is related to the	Ĭ	ď	0		O	Ĭ
18	organization's charitable, etc , purpose Gross income from interest, dividends, amounts						
10	received from payments on securities loans						
	(section 512(a)(5)), rents, royalties, and	139,187	91,314	102,854		126,830	460,185
	unrelated business taxable income (less section	155,107	71,514	102,054		120,030	400,103
	511 taxes) from businesses acquired by the organization after June 30, 1975						
19	Net income from unrelated business activities	_	_	_			
	not included in line 18	0	0	0		0	0
20	Tax revenues levied for the organization's benefit		_	_			
	and either paid to it or expended on its behalf	0	0	0		0	0
21	The value of services or facilities furnished to						
	the organization by a governmental unit without						
	charge Do not include the value of services or	0	0	0		0	o
	facilities generally furnished to the public without charge						
22	Other income Attach a schedule Do not include						
	gaın or (loss) from sale of capıtal assets	10,390	21	410		82	10,903
23	Total of lines 15 through 22	8,452,884	7,388,549	7,471,598		7,715,852	31,028,883
24	Line 23 minus line 17	8,452,884	7,388,549	7,471,598		7,715,852	31,028,883
25	Enter 1% of line 23	84,529	73,885	74,716		77,159	l .
26	Organizations described on lines 10 or 11: a Er	iter 2% of amount	t ın column (e), lın	ne 24 🕨	26a		620,578
Ŀ	, Prepare a list for your records to show the name of	and amount cont	ributed by each pe	erson (other			
	than a governmental unit or publicly supported org	anızatıon) whose	total gifts for 200	2 through			
	2005 exceeded the amount shown in line 26a Do	not file this list w	ith your return. E	nter the total			
	of all these excess amounts			•	26b		3,686,578
_	Total support for section 509(a)(1) test Enter line			•	26c		31,028,883
c	Add Amounts from column (e) for lines 18 _	460,18	5 19 	0			
	22 _		26b	3,686,578	26d		4,157,666
e	Public support (line 26c minus line 26d total)			•	26e		26,871,217
f	Public support percentage (line 26e (numerator) d	ivided by line 26c	(denominator))	<u> </u>	26f		86 6 %
27	Organizations described on line 12: a For amou	ınts ıncluded ın lır	nes 15, 16, and 1	7 that were recei	ved from	a "dısqu	ıalıfıed person,"
	prepare a list for your records to show the name of	, and total amount	ts received in eac	h year from, each	n "dısqua	lified per	rson "
	Do not file this list with your return. Enter the sun	n of such amounts	for each year				
	(2005) (2004)		(2003)		(2002)		
Ŀ	For any amount included in line 17 that was receiv	ed from each pers	on (other than "d	ısqualıfıed persoı	ns"), pre	pare a lıs	t for your
	records to show the name of, and amount received	for each year, tha	it was more than t	the larger of (1) t	he amou	nt on line	25 for the year
	or (2) \$5,000 (Include in the list organizations de	scribed in lines 5	through 11b, as	well as ındıvıdual	s) Do n o	ot file th	is list with your
	return. After computing the difference between the	amount received	and the larger am	nount described i	n (1) or	(2) , ente	r the sum of
	these differences (the excess amounts) for each y	ear					
	(2005) (2004)		(2003)		(2002)		
c	Add Amounts from column (e) for lines 15		16				
	17 20		21		>	27c	
c	Add Line 27a total	and line 27b tot	al		•	27d	
e	Public support (line 27c total minus line 27d total))			•	27e	
f	Total support for section 509(a)(2) test Enter am			27f] [
ç	Public support percentage (line 27e (numerator) d	ivided by line 27f	(denominator))	<u> </u>	27g	<u> </u>	
ŀ	Investment income percentage (line 18, column (e	e) (numerator) div	ided by line 27f (denominator)) 🕨	27h		
28	Unusual Grants: For an organization described in li	ne 10, 11, or 12 t	hat received any	unusual grants d	urıng 20	02 throu	gh 2005,
	prepare a list for your records to show, for each ye	ar, the name of th	e contributor, the	date and amount	of the g	rant, 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

Pa	(To be completed ONLY by schools that checked the box on line 6 in Part IV)			
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,		Yes	No
	other governing instrument, or in a resolution of its governing body?	29		
30	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?	30		
31	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?	31		
	If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)			
32	Does the organization maintain the following	-		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
ŀ	Records documenting that scholarships and other financial assistance are awarded on racially nondiscriminatory			
	basis?	32b	i	İ
	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			
`	with student admissions, programs, and scholarships?	 32c		ĺ
	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
•	Gooples of an inaterial assa by the organization of on its behalf to some continuations	324	l	
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)			
33	Does the organization discriminate by race in any way with respect to	-		
ā	Students' rights or privileges?	33a		
ŀ	Admissions policies?	33b		
(Employment of faculty or administrative staff?	33c		
	Scholarships or other financial assistance?	33d		
•	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
ŀ	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)			
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
ŀ	Has the organization's right to such aid ever been revoked or suspended?	34b		1
	If you answered "Yes" to either 34a or b, please explain using an attached statement			
35	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	35		l

i Total lobbying expenditures (Add lines **c** through **h.**)

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

Pa	rt VI-A	Lobbying Expenditu (To be completed ONL						tructio	ns.)	<u> </u>
Che	ck ⊫ a 「	if the organization belong						ımıted	control	" provisions apply
		Limits on Lo	bbying Expend	ditures			(a A ffiliate	-	. .	(b) To be completed for all electing
		(The term "expenditures		•			tota	als		organizations
36	Total lobb	bying expenditures to influe	nce public opinion	(grassroots lobb	yıng)	36				
37	Total lobb	bying expenditures to influe	nce a legislative bo	ody (direct lobby	ing)	37				
38	Total lobb	bying expenditures (add line	s 36 and 37)			38				
39	Otherexe	empt purpose expenditures				39				
40	Total exe	mpt purpose expenditures (add lines 38 and 3	9)		40				
41	Lobbying	nontaxable amount Entert	he amount from the	e following table-	_					
	If the am	ount on line 40 is—	The lobbying nont	axable amount	is—					
	Not over \$5	500,000	20% of the amount of	on line 40						
	Over \$500,	000 but not over \$1,000,000	\$100,000 plus 15% o	f the excess over \$	500,000					
	Over \$1,00	0,000 but not over \$1,500,000	\$175,000 plus 10% o	f the excess over \$	1,000,000	41				
	Over \$1,50	0,000 but not over \$17,000,000	\$225,000 plus 5% of	the excess over \$1,	,500,000					
	Over \$17,0		\$1,000,000							
42	Grassroo	ts nontaxable amount (ente	r 25% of line 41)			42				
43	Subtract	line 42 from line 36 Enter -	0- if line 42 is moi	re than line 36		43				
		line 41 from line 38 Enter -				44				
•	Cubilact		0 11 11110 12 10 11101	o than the so		F:-				
	Caution:	If there is an amount on eithe	er line 43 or line 44.	vou must file Foi	rm 4720.					
	- Cuutionii		l-Year Averagi	•		501(h)			
		(Some organizations that i						e colun	nns bel	low
		See the	nstructions for line	es 45 through 50	on page 13 of	the ins	tructions)			
				Lo	bbying Expendit	ures D	uring 4-Yea	r Avera	aging P	Period
		year (or		(a)	(b)		(c)		(d)	(e)
	fiscal ye	ar beginning in) 🕨		2006	2005		2004	2	003	Total
45	Lobbying	nontaxable amount								
46	Lobbying	ceiling amount (150% of li	ne 45(e))			+				
47	Total lob	bying expenditures								
48	Grassroo	ots nontaxable amount								
49	Grassroo	ots ceiling amount (150% o	f line 48(e))							
			- \-11							
	_	ots lobbying expenditures								
Рa	rt VI-B	Lobbying Activity by (For reporting only by				۸۱/۶۵	o nago 1'	2 of th	o incti	ructions \ 🚾
Duri	ng the vea	r, did the organization atter	organizations the npt to influence nat	tional, state or l	piece rait VI- ocal legislation.	ıncludi	ng anv			ructions.) 🖼
		uence public opinion on a le					<i>3</i> ,	Yes	No	A mount
а	Volunte	ers						Yes		
b	Paid sta	ff or management (Include o	ompensation in ex	penses reported	l on lines c throu	ıgh h.)		Yes		
c	Media ad	dvertisements							Νo	
d	Mailings	to members, legislators, or	the public						Νo	
e		ions, or published or broadc							Νo	
f		o other organizations for lob							Νo	
g		ontact with legislators, their		•	-			Yes		6,368
h	Dallias	demonstrations seminars (conventions space	has lastures a	ranu athar maa			1	Nol	

6,368

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 13 of the instructions.)

		g organization to a no	ncharitable exempt organization	of		Yes	No
(i)	Cash				51a(i)		Νo
	O ther assets				a(ii)		Νo
_	r transactions					ļ	
			narıtable exempt organızatıon		b(i)		Νo
	Purchases of assets		· · · · · · · · · · · · · · · · · · ·		b(ii)		Νo
	Rental of facilities, ed		sets		b(iii)		Νo
	Reimbursement arrar	-			b(iv)		Νο
	Loans or loan guaran				b(v)		No
			r fundraising solicitations		b(vi)		No
			er assets, or paid employees lete the following schedule Colu				No
transa	action or sharing arran		oorting organization If the organ imn (d) the value of the goods, of			e in a	ny
(a) ine no	(b) A mount involved	Name of nonch	(c) arıtable exempt organizatıon	Description of transfers, tra		and s	harır
				arrangem	ents		
				_			
				_			
				_			
				_			
				_			
				_			
				_			
				_			
				+			
				+			
				+			
Ic the	organization directly	or indirectly offiliated	I with, or related to, one or more	tov evernt ergonizations			
			nan section 501(c)(3)) or in sect		v	·	굣
	es," complete the follow		ian section 501(c)(5)) or in sect	1011 527	- , ,	es	Į.
, II Ie		wing scriedule					
	(a) Name of organiza	ation	(b) Type of organization	(c) Description of re	lationshin		
	Nume of organiza		Type of organization	Description of te	- Ideloliship		
				İ			

Additional Data

Software ID: 06000173

Software Version: v1.00

EIN: 61-0479626

Name: FUND FOR THE ARTS INC

Form 990, Part II, Line 43 - Other expenses not covered above (itemize):

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
a Financial Services Fees	43a	5,168	0	0	5,168
b Campaign Events	43b	11,088	0	0	11,088
c Miscellaneous	43c	15,417	3,264	3,535	8,618
d Data Processing	43d	43,176	10,950	6,476	25,750
e Campaign Printing and Marketing	43e	55,104	0	0	55,104
f Arts Showcase	43f	30,681	30,681	0	0
g Electronic Marketing	43g	22,527	0	0	22,527
h Publications - Bravo	43h	29,892	29,892	0	0
i Campaign Performers	43i	2,965	0	0	2,965
j Insurance	43j	22,394	5,679	3,359	13,356
k Dues and Subscriptions	43k	3,386	838	576	1,972
I Campaign Incentives	431	70,723	0	0	70,723
m Whittenberg Scholarship Program	43m	5,926	5,926	0	0
n "NeXt" Leadership Development Program	43n	5,754	5,754	0	0
• Transportation	43o	25,814	6,817	2,578	16,419
p Contract Labor	43p	115,700	35,700	30,900	49,100

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Mr Benjamin Richmond 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Mr Robert P Adelberg 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Mr John H Hawkins Jr 623 West Main Street Louisville, KY 40202	Treasurer 2	0	0	0
Ms Carol W Hebel 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Mr Edward E Manassah 623 West Main Street Louisville, KY 40202	CoChair Allocations Committees 2	0	0	0
Mr David K Karem 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Mr Herbert J Schardein Jr 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Mr Steven E Trager 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Ms Mary S Moseley 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Mr Tonii Rizzo 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0- .)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Ms Joanna Travis 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Mr Bryant R Hanson 5 623 West Main Street Louisville, KY 40202	Board Member O	0	0	0
Mr Ronald J Murphy 623 West Main Street Louisville, KY 40202	2007 Campaign Chair 3	0	0	0
Mr Robert W Rounsavall III 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Mr P Richard Anderson Jr 623 West Main Street Louisville, KY 40202	Chairman 2	0	0	0
Mr Carl M Thomas 623 West Main Street Louisville, KY 40202	Chair Compensation Committee 2	0	0	0
Mrs Joan Whittenberg 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Mrs Martha Dunbar Hall 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Mr Audwin Helton 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Ms Thelma B Ferguson 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

·			-	
(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Mr Leonard V Hardin 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Mr James R Allen 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Mr Robert G Bader 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Mr Wesley Beckner 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Ms Joan A Coleman 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Mr Arthur L Gleason 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Mr Mark F Wheeler 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Mr Kevin Boyle 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Mr James S Goldberg 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Ms Lynn Pendergrass 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Ms Norma Oberst 623 West Main Street Louisville, KY 40202	CoChair Allocations Committees 2	0	0	0
Mr Thomas P Monahan 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Mr Eddy C Roberts Jr 📆 623 West Main Street Louisville, KY 40202	Board Member O	0	0	0
Mr C Edward Glasscock 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Mr James Clay Smith 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Mr J Stephen Barger 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Mr David H Brooks 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Mr Bill Lamb 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Mr Frank B Hower III 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Mr Philip R McHugh 623 West Main Street Louisville, KY 40202	2008 Campaign Chair 2	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Mr Owsley Brown II 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Mr Morton Boyd Jr 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Dr Susan Galandiuk 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Mr Craig D Grant 623 West Main Street Louisville, KY 40202	CoChair Allocations Committees 2	0	0	0
Ms Marlene M Grissom 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Mr Rick K Guillaume 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Mr Pedro Bryant 623 West Main Street Louisville, KY 40202	Board Member 0	0	0	0
Mr David P Calzi 623 West Main Street Louisville, KY 40202	Board Member 2	0	0	0
Mr Douglass C Farnsley 5 623 West Main Street Louisville, KY 40202	Board Member 0	0	0	0
Mr Michael Crutcher 623 West Main Street Louisville, KY 40202	Board Member 0	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Dr Stephen Daeschner 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Mr William R Gernert 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Ms Diane Cornwell 5 623 West Main Street Louisville, KY 40202	Contract CFO 20	60,000	0	1,140
Mr Allan Cowen 2 623 West Main Street Louisville, KY 40202	Exec Director/CEO 60	260,621	55,203	15,312
Mr Sam Corbett 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Mr Sean O'Leary 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Mr Dennis Heishman 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Mr Harold Butler 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Mr Robert L Shircliff 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Mr Jonathan D Blum 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Mr Jonathan D Goldberg 623 West Main Street Louisville, KY 40202	Secretary 1	0	0	0
Mr David Klein 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0
Mr Charles F Clephas 623 West Main Street Louisville, KY 40202	Board Member 1	0	0	0

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TY 2006 Cash Grants Paid Schedule

Name: FUND FOR THE ARTS INC

EIN: 61-0479626

Software ID: 06000173

Class of Activity	Recipient's name	Address	Amount	Relationship
Charitable	WL Lyons Brown Theatre and Fifth Third Conference Center	623 West Main St Louisville, KY 40202	244,940	Affiliated Entity
Charitable	Walden Theatre	1123 Payne Street Louisville, KY 40204	58,045	Member Group
Charitable	Actors Theatre of Louisville Add'l Grant	316 West Main Louisville, KY 40202	45,000	Member Group
Charitable	School Grants	Various Louisville, KY 40202	91,819	None- Community Grants
Charitable Sectiona 501(c)(3)	Actors Theatre of Louisville	316 West Main Lousiville, KY 40202	1,420,044	Member Group
Charitable	Various Community Grants and Special Projects	Various Louisville, KY 40202	27,828	None - Community Grants Program
Charitable	West Louisville Performing Arts Academy	623 West Main Louisville, KY 40202	75,092	Member Group
Charitable	Louisville Youth Orchestra	4121 Shelbyville Road Louisville, KY 40207	75,120	Member Group

Recipient's name	Address	Amount	Relationship
Louisville Visual Art Association	3005 River Road Louisville, KY 40202	78,530	Member Group
Music Theatre Louisville	323 W Broadway Louisville, KY 40202	109,460	Member Group
Louisville Ballet	315 East Main Street Louisville, KY 40202	914,766	Member Group
Stage One Louisville's Professional Theatre for Young Audiences	323 W Broadway Louisville, KY 40202	411,519	Member Group
Music Box	14600 Woodbluff Trail Louisville, KY 40245	5,000	None - Community Grant
Arts Council of Southern Indiana	820 E Market St New Albany, IN 47150	5,000	None - Community Grant
Kentucky Museum of Art and Craft	715 West Main St Louisville, KY 40202	156,000	Member Group
Kentucky Opera Association	323 West Broadway Louisville, KY 40202	664,485	Member Group
	Louisville Visual Art Association Music Theatre Louisville Louisville Ballet Stage One Louisville's Professional Theatre for Young Audiences Music Box Arts Council of Southern Indiana Kentucky Museum of Art and Craft	Association Music Theatre Louisville Louisville Ballet Louisville Ballet Stage One Louisville's Professional Theatre for Young Audiences Music Box Arts Council of Southern Indiana Kentucky Museum of Art and Craft Jacob Ry 40202 323 W Broadway Louisville, KY 40202 323 W Broadway Louisville, KY 40202 324 W Broadway Louisville, KY 40202 325 W Broadway Louisville, KY 40202 326 W Broadway Louisville, KY 40202 327 W Broadway Louisville, KY 40202 328 W Broadway Louisville, KY 40202 329 W Broadway Louisville, KY 40202 321 W Broadway Louisville, KY 40202 323 W Broadway Louisville, KY 40202 323 W Broadway Louisville, KY 40202 323 W Broadway Louisville, KY 40202 323 W Broadway Louisville, KY 40202 323 W Broadway Louisville, KY 40202	Association 3005 River Road Louisville, KY 40202 323 W Broadway Louisville, KY 40202 315 East Main Street Louisville, KY 40202 323 W Broadway Louisville, KY 40202 315 East Main Street Louisville, KY 40202 323 W Broadway Louisville, KY 40202 323 W Broadway Louisville, KY 40202 324 W Broadway Louisville, KY 40202 325 W Broadway Louisville, KY 40202 326 W Broadway Louisville, KY 40202 327 W Broadway Louisville, KY 40202 328 W Broadway Louisville, KY 40202 329 W Broadway Louisville, KY 40202 321 W Broadway Louisville, KY 40202 323 W Broadway Louisville, KY 40202 323 W Broadway Louisville, KY 40202 323 W Broadway Louisville, KY 40202 323 W Broadway Louisville, KY 40202 323 W Broadway Louisville, KY 40202 323 W Broadway Louisville, KY 40202 323 W Broadway Louisville, KY 40202 324 W Broadway Louisville, KY 40202 325 W Broadway Louisville, KY 40202 326 W Broadway Louisville, KY 40202 327 W Broadway Louisville, KY 40202 328 W Broadway Louisville, KY 40202 329 W Broadway Louisville, KY 40202

Class of Activity	Recipient's name	Address	Amount	Relationship
Charitable	Kentucky Shakespeare Festival	1387 S 4th St Louisville, KY 40208	114,429	Member Group
Charitable	Louisville Bach Society	4607 Hanford Lane Louisville, KY 40207	46,627	Member Group
Charitable	Louisville Orchestra	323 West Broadway Louisville, KY 40202	2,453,305	Member Group
Charitable	Louisville Theatrical Association	624 West Main St Louisville, KY 40202	62,083	Member Group
Charitable	Louisville Youth Choir	3105 Lexington Road Louisville, KY 40206	38,138	Member Group
Charitable	Kentucky Center for the Arts	501 West Main Louisville, KY 40202	170,000	None
Charitable	Paul Ogle Center	4201 Grant Line Road New Albany, IN 47150	10,400	None - Community Grant
Charitable	Bunbury Theatre	PO Box 20223 Louisville, KY 40250	15,000	None - Community Grant

Class of Activity	Recipient's name	Address	Amount	Relationship
Charitable	Louisville Youth ChoirAdd'l Grant	3105 Lexington Road Louisville, KY 40206	10,000	Member Group
Charitable	Blue Apple Players	PO Box 4261 Louisville, KY 40204	9,300	None-Community Grant

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TY 2006 Compensation Explanation

Name: FUND FOR THE ARTS INC

EIN: 61-0479626

Software ID: 06000173

Person Name	Explanation
Mr Bryant R Hanson	
Mr Eddy C Roberts Jr	
Mr Douglass C Farnsley	
Ms Diane Cornwell	Amount reported is part of Contract Labor totals on Part II. The amounts are also shown as payments to independent contractor on Schedule A. Amount in Column E represents cost of parking provided.
Mr Allan Cow en	Benefits and Expenses Allow ances include contributions to retirement plans including unvested deferred compensation plan, health, life and disability insurance, car allow ance, parking and cell phone

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TY 2006 Depreciation and Depletion Schedule

Name: FUND FOR THE ARTS INC

EIN: 61-0479626

Software ID: 06000173

Asset	Amount
Office Equipment	3,371

TY 2006 Gain/Loss from Sale of Public Securities Schedule

Name: FUND FOR THE ARTS INC

EIN: 61-0479626

Software ID: 06000173

Software Version: v1.00

Gross Sales Price: 2,076,894

Basis: 2,033,090

Sales Expenses: 0

Total (net): 43,804

TY 2006 Investments - Other Schedule

Name: FUND FOR THE ARTS INC

EIN: 61-0479626

Software ID: 06000173

Description	Book Value	Cost/FMV
Mutual Funds	95,267	F
Short Term Bonds	25,000	F
Money Market Accounts	760,052	F
Government Bonds	479,538	F
Certificates of Deposit	345,167	F

TY 2006 Land etc. Schedule

Name: FUND FOR THE ARTS INC

EIN: 61-0479626

Software ID: 06000173

Category/Item	Cost/Other Basis	Accumulated Depreciation	Book Value
Furniture and Fixtures	277,012	213,265	63,747
Automobile	34,638	10,581	24,057
Building and Improvements	1,254,106	615,114	638,992

TY 2006 Non Cash Grants Paid Schedule

Name: FUND FOR THE ARTS INC

EIN: 61-0479626

Software ID: 06000173

Item No.	1	
Class of Activity	Charitable Section 501(c)(3)	
Donee's Name	Fund for the Arts Properties Foundation Inc ArtSpace	
Donee's Address	623 W Main Louisville, KY 40202	
Amount (FMV)	2150000	
Relationship	Affiliated Entity	
Description	ARTSPACE	
Book Value	2150000	
How Book Value is Determined?	? Appraisal	
How FMV is Determined?	Appraisal	
Date of Gift	2006-12	

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TY 2006 Other Assets Schedule

Name: FUND FOR THE ARTS INC

EIN: 61-0479626

Software ID: 06000173

Description	Beginning of Year Amount	End of Year Amount
Other	169,759	238,386

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TY 2006 Other Changes in Net Assets Schedule

Name: FUND FOR THE ARTS INC

EIN: 61-0479626

Software ID: 06000173

Description	Amount		
Unrealized Losses	-25,560		

TY 2006 Other Expenses Not Included Schedule

Name: FUND FOR THE ARTS INC

EIN: 61-0479626

Software ID: 06000173

Description	Amount		
Partnership Gifts	2,490,545		

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TY 2006 Other Notes/Loans Receivable Short Schedule

Name: FUND FOR THE ARTS INC

EIN: 61-0479626

Software ID: 06000173

Category/Name	Amount
Fund for the Arts Properties Foundation Inc	80,000
Fund for the Arts Properties Foundation Inc	190,000

TY 2006 Other Revenues Not Included Schedule

Name: FUND FOR THE ARTS INC

EIN: 61-0479626

Software ID: 06000173

Description	Amount		
Partnership Gifts	2,490,545		

TY 2006 Relationship Schedule

Name: FUND FOR THE ARTS INC

EIN: 61-0479626

Software ID: 06000173

Person Name / Business Name	Title or Role	Person Name 2 / Business Name 2	Title or Role 2	Relationship
Edw ard E Manassah	Board Member	Robert Adelberg	Board Member	Mr Adelberg provided professional services to Mr Manassah
Michael Crutcher	Board Member	Ow sley Brown II	Board Member	Mr Crutcher serves as Vice Chairman of Brown-Forman Corporation Mr Brown serves as Chairman of Brown-Forman Corporation
Jonathan D Goldberg	Secretary	James Goldberg	Board Member	Mr Jonathan Goldberg and Mr James Goldberg are brothers

TY 2006 Non Electing Public Charities Statement

Name: FUND FOR THE ARTS INC

EIN: 61-0479626

Software ID: 06000173

Software Version: v1.00

Statement: The Fund for the Arts supported the ongoing contact with the

Governor's and Louisville Mayor's offices regarding the need for additional funding to support the Arts organizatins in Metro

Louisville.

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TY 2006 Other Income Schedule

Name: FUND FOR THE ARTS INC

EIN: 61-0479626

Software ID: 06000173

Description	2003	2002	2001	2000	Total
Miscellaneous	10,390	21	410	82	10,903

TY 2006 Scholarship Award Statement

Name: FUND FOR THE ARTS INC

EIN: 61-0479626

Software ID: 06000173

Software Version: v1.00

Statement: Whittenberg Young Artist Scholarships - Enables gifted students

with limited financial support to pursue advanced study in the performing arts. Applicants attend auditions and are judged by a panel of experts. Black Achievers Arts Scholarship Program -- Offered through the Chestnut Street YMCA and is targeted at enhancing academic, personal and career development of African-American youth by providing specialized, culturally based programs that foster the interactions of youth and adult role models. Applications are reviewed by a committee composed of independent college professors. Scholastic Arts Awards - Honors young people who have dedicated themselves to the visual arts. This is co-sponsored with Jefferson County Public Schools. All works submitted are reviewed for technical proficiency, originality and emergence of a personal style or vision.

TY 2006 Self Dealing Statement

Name: FUND FOR THE ARTS INC

EIN: 61-0479626

Software ID: 06000173

Line Number	Explanation
2c	The organization purchases some goods and services in the ordinary course of business from companies where members of the Board also hold Officer or Director positoins. These services include banking services, investment management, health insurance and other insurance. All purchases are at arm's length and are periodically reviewed for reasonableness.

Diane Cornwell

*** 990 Online Filers: Please fax completed and signed form to 866-699-3916

Form 8453-E0	Exempt Organ	ization Decl Electroni		Signature	for	OMB No 1545-1879
	For calendar year 2006, or ta			6/30/2007	i	2006
Department of the Treasury	For use with F	orms 990, 990-EZ,		DL, and 8868		
Internat Revenue Service Name of exempt organization	7	► See instructi	ons on back.		Employee	
FUND FOR THE ART					61	identification number 0479626
	Return and Return Info	ormation (Whole	Dollars Only)			1 0475020
you check the box on was blank, then leave	return for which you are u line 1a, 2a, 3a, 4a, or 5a l line 1b, 2b, 3b, 4b, or 5b er -0- on the applicable li	below and the amo , whichever is app	ount on that line: licable, blank (th:	for the return for at is, do not ent	which yo er -0-), Bi	ou are filing this form
1a Form 990 check h 2a Form 990-EZ chec 3a Form 1120-POL c 4a Form 990-PF chec 5a Form 8868 check	ck here ▶ □ b Tota heck here ▶ □ b T kk here ▶ □ b Tax b	evenue, if any (For il revenue, if any (i Fotal tax (Form 11) lased on investment e due (Form 8868.	Form 990-EZ, line 20-POL, line 22) tincome (Form 990		2 3 5) . 4	b \$11,411,664 bb bb bb
Part II Declarat	ion of Officer	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Financial Agent a institutions involving inquiries and res If a copy of this in executed the	Id the financial institution to it 1-888-353-4537 no later the yed in the processing of the cive issues related to the pi return is being filed with a si electronic disclosure con PF (as specifically identified	han 2 business days e electronic paymer ayment itate agency(les) reg isent contained wi	prior to the paym it of taxes to rece ulating chanties a thin this return	ent (settlement) d ive confidential if s part of the IRS allowing disclosi	ate. I also nformation Fed/State	authorize the financia necessary to answe orogram. I certify tha
organization's 2006 electrue, correct, and compelectronic return (conorganization's return to	ury, I declare that I am an antronic return and accompar plete. I further declare that sent to allow my intermed the IRS and to receive from refund offset, (c) the reason	nying schedules and the amount in Part late service provide the IRS (a) an ackno	I statements and the land is above is the arear transmitter, or owledgement of re-	to the best of my nount shown on electronic return ceipt or reason fo	knowledg the copy originato or rejection	e and belief, they are of the organization's r (ERO) to send the of the transmission.
Sign	axe Corner	/ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	5-14-08	Diane Com	vell, CFO	
Here Signature o	f officer	D	ate	Title		
Part III Declarat	on of Electronic Retu	rn Originator (El	RO) and Paid F	Preparer (see in	nstruction	ns)
of my knowledge. If I are the data on the return. I forms and information to IRS e-file Providers of Ex the above organization's	ewed the above organization only a collector, I am not The organization officer will be filed with the IRS, and cempt Organization Filings. Is return and accompanying This Paid Preparer declaration	responsible for revi I have signed this fi I have followed all of If I am also the Paid schedules and state	ewing the return a orm before I subnother requirements Preparer, under perments, and to the	and only declare the start in the return. I was an Publication 4 senalties of perjure best of my know	hat this fo fill give the 206, Infon y I declare viedge and	orm accurately reflects a officer a copy of al mation for Authonized that I have examined
590%		Date	Check if	Check	ERO's	SSN or PTIN

Preparer's signature
Preparer's
Superactive
Firm's pame (or yours if self-employed), address, and ZIP code

if self-

employed \square

EIN

Phone no.