DLN: 93493135021673

Department of the Treasury

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

Open to Public ▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspection A For the 2011 calendar year, or tax year beginning 07-01-2011 and ending 06-30-2012 D Employer identification number B Check if applicable FUND FOR THE ARTS INC Address change 61-0479626 Doing Business As E Telephone number Name change (502) 582-0100 Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite **G** Gross receipts \$ 8,063,827 623 West Main Street Terminated City or town, state or country, and ZIP + 4 Louisville, KY 40202 Amended return Application pending Name and address of principal officer $\mathbf{H(a)}$ Is this a group return for Barbara Sexton Smith affiliates? 623 West Main Street Louisville, KY 40202 H(b) Are all affiliates included? If "No," attach a list (see instructions) **▽** 501(c)(3) **▽** 501(c) () ◀ (insert no) ☐ 4947(a)(1) or ☐ 527 Tax-exempt status Group exemption number 🕨 H(c) **Website:** ► www fundforthearts com K Form of organization
✓ Corporation
☐ Trust
☐ Association
☐ Other ► M State of legal domicile KY L Year of formation 1949 Summary Part I Briefly describe the organization's mission or most significant activities Vision Statement Together through the Arts we create a great American city Mission Statement. To maximize the impact of the Arts on economic development, education and the quality of life for everyone by generating resources, inspiring excellence, and Activities & Governance creating community connections 2 Check this box 🔭 if the organization discontinued its operations or disposed of more than 25% of its net assets ${f 3}$ Number of voting members of the governing body (Part VI, line 1a) . . 50 Number of independent voting members of the governing body (Part VI, line 1b) . 4 48 Total number of individuals employed in calendar year 2011 (Part V, line 2a) . 5 17 6 3,000 Total number of volunteers (estimate if necessary) . **7a** Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 b Net unrelated business taxable income from Form 990-T, line 34 7b 0 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . . 7,092,246 7,981,661 0 Program service revenue (Part VIII, line 2g) . 0 34,957 13,227 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 26,457 18,576 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 7,153,660 8.013.464 5,684,357 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . 4,732,028 13 14 Benefits paid to or for members (Part IX, column (A), line 4) . 0 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 15 Expenses 1,230,756 678,041 5-10) Professional fundraising fees (Part IX, column (A), line 11e) . . . 0 0 16a b Total fundraising expenses (Part IX, column (D), line 25) \blacktriangleright 740,169 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 602,464 570,520 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 6,565,248 6,932,918 19 Revenue less expenses Subtract line 18 from line 12 . 588,412 1,080,546 t Assets or | nd Balances | **Beginning of Current End of Year** Year 9,032,782 8.245.801 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) 4,238,623 3.944.852 5,087,930 22 Net assets or fund balances Subtract line 21 from line 20 $\,$. 4,007,178 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. 2013-05-15 Signature of officer Sign Here Diane Cornwell CFO Type or print name and title Preparer's taxpayer identification number (see instructions) Date Check if

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

Preparer's sıgnature

Firm's name (or yours if self-employed), address, and ZIP + 4

Paid

Preparer's

Use Only

EIN ▶

Phone no

employed 🕨 🔽

Form	990 (2011) Pa
Par	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission
	nission of the Fund for the Arts is to maximize the impact of the Arts on economic development, education and the quality of life for one by generating resources, inspiring excellence and creating community connections
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	If "Yes," describe these new services on Schedule O Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported
4a	(Code) (Expenses \$ 3,929,893 including grants of \$ 3,888,788) (Revenue \$ 0) The Fund for the Arts is one of the largest direct funders for each of 14 tax-exempt "Cultural Partner" organizations which together provide a significant portion the arts experiences available in the Metro Louisville community. Awards are made through an annual "allocation process" which includes review by an Allocation Committee composed of Board members, members of "NeXti" (a group of young professionals focusing on community building through the arts) and Fund sta Information reviewed as part of the process includes a summary of each organization's accomplishments, challenges, operating plans and audited financial statements
4b	(Code) (Expenses \$ 1,442,265 including grants of \$ 1,413,562) (Revenue \$ 0)
	The Fund works closely with various community organizations and individuals to accept, award and monitor "partnership contributions" which are donor directed through the Fund to specific Fund for the Arts' Cultural Partners as well as other community arts organizations. This program provides additional funding in suppose the arts community. The Fund expanded this approach through the implementation of a technology-based platform, power2give, which allows any qualifying of to post arts-related projects for funding. Through matching gifts and various communication strategies, approximately 70 organizations participated and received grants through power2give.
	(Code) (Expenses \$ 432,574 including grants of \$ 373,117) (Revenue \$ 0)
	The Fund sponsors the EVERY CHILD Arts Education Initiative which includes the Teacher Arts Grants program "TAG" which enables teachers to request funding allow their students to attend arts events or supplement their classroom with residency arts programming often with a math/history/science curriculum focus - provided 11,000 Arts experiences through 97 projects in 72 schools, "5X5" initiative where the goal is for every child to have an arts experience during each of first 5 years of school - provided 43,000 Arts experiences through 314 projects in 60 schools, "School's Out = Art's In" program develped in conjunction with Louisville Metro Partks to provide arts based activities during out-of-school time such as summer and spring break - provided 725 arts experiences in 14 comm centers, and "Hear the Music" developed for middle school students where hearing screening and hearing loss prevention education are combined with an experience with a performance by professional musicians - 6 presentations to 2 Jefferson County Public Middle Schools where 290 students were screened with further evaluation recommended for 21 students
	(Code) (Expenses \$ 168,029 including grants of \$ 8,890) (Revenue \$ 0)
	Other programs conducted and grants made include direct ongoing support for "Cultural Partners", Arts Showcase, support of ArtSpace, NeXt group activities an miscellaneous community arts grants
4d	Other program services (Describe in Schedule O) (Expenses \$ 168,029 including grants of \$ 8,890) (Revenue \$ 0)
 4е	Total program service expenses▶\$ 5,972,761

art TV	Check	list of	Required	Schedules
	CIICCN	1136 01	IXCUUII CU	Scricadics

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		Νo
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt{2}$	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		Νo
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Νo
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV.	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F:	orm 990	(2011)

Form	990 (2011)			Page 5
Pa	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter - 0 - if not applicable			
	1a 12			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1		
	1b 0	_		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this		1.00	
h	return			
		2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities account)?	4a		No
b	If "Yes," enter the name of the foreign country ▶			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
En	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
5a h	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5b		
·	These to fine 3a of 3b, and the organization meronin 6880-17	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		No
b	organization solicit any contributions that were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a 7b		No
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	-		
	file Form 8282?	7 c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a			
_	Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a		
10	, , , , , , , , , , , , , , , , , , , ,	9b		
10 a	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders	4		
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state	13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by			
c	the states in which the organization is licensed to issue qualified health plans Enter the aggregate amount of reserves on hand	1		
·	13c	_		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
h	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		Ī

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	ection A. Governing Body and Management						
			Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax						
	year						
b	Enter the number of voting members included in line 1a, above, who are independent						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes				
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	Yes				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was	4	100	No			
5	filed? Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No			
6	Did the organization have members or stockholders?	6		Νo			
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following						
а	The governing body?	8a	Yes				
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes				
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O							
Se	ection B. Policies (This Section B requests information about policies not required by the Internal						
Re	venue Code.)			1			
			Yes	No			
	Did the organization have local chapters, branches, or affiliates?	10a		No			
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b					
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes				
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990						
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes				
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes				
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes				
13	Did the organization have a written whistleblower policy?	13	Yes				
14	Did the organization have a written document retention and destruction policy?	14	Yes				
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						
а	The organization's CEO, Executive Director, or top management official	15a	Yes				
b	Other officers or key employees of the organization	15b	Yes				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	16-		N.a			
L	taxable entity during the year?	16a		No			
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b					
Se	ection C. Disclosure						
	List the States with which a copy of this Form 990 is required to be filed▶KY						

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply

- 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization Monica Beckmann

623 West Main St Louisville, KY 40202 (502) 582-0122

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the orga	nızatıon nor any re	elated o	rgan	ızatı	ons	compe	ensat	ed any current or fo	ormer officer, direc	tor, or trustee
(A) Name and Title	(B) A verage hours per week (describe	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and
	hours for related organizations in Schedule O)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		,	related organizations
See Additional Data Table										

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

	(A) Name and Title	(B) Average hours per week (describe hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)		am co	(F) Estimated amount of othe compensation from the organization an related		
		for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		MISC	or	relate rganiza		
See A	dditional Data Table													
								Ļ						
1b c	Sub-Total	to Part VII. Sec			•	•		<u> </u>						
d	Total (add lines 1b and 1c) .			•	•	•		>	737,248	3	o o		37,537	
2	Total number of individuals (inc \$100,000 of reportable compen					ted	above) who	received more th	nan	•			
												Yes	No	
3	Did the organization list any for on line 1a? <i>If</i> "Yes," complete Sc.									sated employee	3	Yes		
4	For any individual listed on line organization and related organiz										4	Yes		
5	Did any person listed on line 1a services rendered to the organiz								-	or individual for	5	103	No	
Se	ection B. Independent Con	tractors												
1	Complete this table for your five \$100,000 of compensation fron or within the organization's tax y	highest comper n the organizatio												
		(A) me and business ad	dress						Des	(B) scription of services	,	(C) Compen		
											+			
_	Tabal assaults - C - L - L - L - L						LI.		4-1					
	Total number of independent cont \$100,000 of compensation from			ot lir	nited	to t	tnose	ııste	a above) who rece	eived more than				

Form 99			(D					Page 9
Part \	/1111	Statement o	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
## ## ## ## ## ## ## ## ## ## ## ## ##	1a	Federated cam	paigns 1a	0				
Contributions, gifts, grants and other similar amounts	Ь	Membership du	ies 1b					
ું. He	С	Fundraising ev	ents 1 c	0				
<u>≅</u> ,≅	d		zations 1d					
ĕ Ē	е	Government grant						
utio er:	f	All other contribution similar amounts no	ons, gifts, grants, and 1f ot included above	7,759,948				
ē₽	g		ibutions included in					
<u> </u>	h	lines 1a-1f \$ _	s 1a-1f	▶	7,981,661			
	┞"	Total: Add illie.	314 11	Business Code	.,,			
Program Service Revenue	2a			Busiliess Code				
e. Re	Ь							
ъ. Н	c							
ž h	d	-	_					
Ø ⊊	e							
្នាធនា	f	All other progra	am service revenue					
Š	g	Total. Add lines	s 2a-2f		0			
	3		ome (including dividen					
			ar amounts)		13,227	6,251	0	6,976
	4	Income from inves	stment of tax-exempt bond	proceeds 🕨	0	0	0	0
	5	Royalties		▶	0	0	0	0
	6-	Cross route	(ı) Real 66,396	(II) Personal				
	6a b	Gross rents Less rental	50,363	0				
		expenses Rental income	16,033					
	c	or (loss)			16.022		0	16.022
	d	Net rental inco	me or (loss) (i) Securities	► (II) Other	16,033	0	0	16,033
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(II) Other				
	b	Less cost or other basis and sales expenses	0					
	c d	Gain or (loss) Net gain or (los						
ů.	8a		rom fundraising					
Other Revenue			os reported on line 1c) ne 18					
e E	ь	Less direct ex	penses b					
Õ	С		(loss) from fundraising	events 🛏 🗍				
	9a		rom gaming activities ne 19 a					
	b c		penses b (loss) from gaming acti					
	10a	Gross sales of returns and allo						
	b c		oods sold b (loss) from sales of inv	entory ►				
		Miscellaneou		Business Code				
	11a							
	b							
	С							
	d	All other reven			2,543	2,543	0	0
	е	Total. Add lines	s 11a-11d		2,543			
	12	Total revenue.	See Instructions .	▶	8,013,464	8,794	0	23,009

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

	heck if Schedule O contains a response to any question in this Part IX	<u> </u>		• • • • • • • • • • • • • • • • • • •	
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	5,684,357	5,684,357		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	0	0		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0	0		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	183,577	55,074	18,358	110,145
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0	0	0	0
7	Other salaries and wages	381,985	73,168	67,443	241,374
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	30,115	6,405	4,367	19,343
9	Other employee benefits	40,170	6,616	7,576	25,978
10	Payroll taxes	42,194	9,888	6,034	26,272
11	Fees for services (non-employees)				
а	Management	54,500	12,500	35,000	7,000
b	Legal	2,818	0	2,818	0
c	Accounting	19,050	0	19,050	0
d	Lobbying	0	0	0	0
e	Professional fundraising See Part IV, line 17	0			0
f	Investment management fees	0	0	0	0
g	Other	15,836	2,907	2,640	10,289
12	Advertising and promotion	4,450	4,450	0	0
13	Office expenses	115,791	22,657	19,355	73,779
14	Information technology	58,527	12,759	11,588	34,180
15	Royalties	0	0	0	0
16	Occupancy	75,536	16,478	14,914	44,144
17	Travel	37,569	7,533	5,540	24,496
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings	0	0	0	0
20	Interest	0	0	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	3,863	842	765	2,256
23	Insurance	19,199	4,185	3,802	11,212
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	Arts Showcase/Events and Performers	34,902	29,445	0	5,457
b	Campaign Incentives	38,216	0	0	38,216
c	Printing and Marketing	58,024	17,216	0	40,808
d	power2 give fees	23,328	0	0	23,328
e					
f	All other expenses	8,911	6,281	738	1,892
25	Total functional expenses. Add lines 1 through 24f	6,932,918	5,972,761	219,988	740,169
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation		-		rm 990 (2011)

Part X **Balance Sheet** (A) (B) Beginning of year End of year ol 0 1 1 696.398 386.979 2 Savings and temporary cash investments 3 4,498,141 4,406,662 1.452 4 4 400 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 0 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 0 Schedule L 6 28,134 7 258,775 0 8 0 19,176 18,417 9 9 Prepaid expenses and deferred charges 1.883.415 Land, buildings, and equipment cost or other basis Complete 10a Part VI of Schedule D 10a 10b 1,124,477 791,629 b Less accumulated depreciation 10c 758,938 2,210,871 3,202,611 11 11 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 15 15 8,245,801 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 9,032,782 427,069 81,385 17 17 Accounts payable and accrued expenses . 18 3,807,385 18 3.859.698 19 4,169 19 3,769 20 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L \ldots . \ldots . \ldots 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 25 D 26 4,238,623 26 3,944,852 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 3,064,868 4,099,019 Unrestricted net assets 642,310 28 688,911 28 Temporarily restricted net assets Fund 29 300,000 29 300.000 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34. ö 30 Capital stock or trust principal, or current funds 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 33 Total net assets or fund balances 4.007.178 33 5.087.930 34 Total liabilities and net assets/fund balances 8.245.801 9.032.782 34

Ра	Check if Schedule O contains a response to any question in this Part XI			.┏	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		8,0	13,464
2	Total expenses (must equal Part IX, column (A), line 25)	2			932,918
3	Revenue less expenses Subtract line 2 from line 1	3		1,0	80,546
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) \cdot .	4		4,0	07,178
5	Other changes in net assets or fund balances (explain in Schedule O)	5			206
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		5,0	87,930
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII			୮	
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain its Schedule O		,	Ś	
			2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were on a separate basis, consolidated basis, or both	issued			
	▼ Separate basis		ı		
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	ie	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b		

OMB No 1545-0047

Inspection

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Public Charity Status and Public Support

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Name of the organization FUND FOR THE ARTS INC **Employer identification number** 61-0479626

Pai	τI	Reas	on for Pu	blic Charity Sta	tus (All org	ganızatıons	s must com	plete this p	art.) See ır	structions			
The o	rganı			e foundation becaus									
1	Γ	A churc	ch, conventi	on of churches, or a	ssociation of	fchurches :	section 170(b)(1)(A)(i).					
2	Γ	A scho	ol described	in section 170(b)(1	L)(A)(ii). (At	tach Sched	ule E)						
3	\sqcap	A hosp	ital or a coo	perative hospital se	rvice organiz	zatıon descr	ıbed ın sectio	n 170(b)(1)	(A)(iii).				
4	Γ			n organization opera ty, and state	ted in conjun	ction with a	hospital des	cribed in sec	tion 170(b)(1)(A)(iii). E	nter the		
5 6 7 8	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)												
9	Γ	receipt its sup	s from activ port from gr	at normally receives ities related to its e oss investment inco janization after June	xempt functions me and unrel	ons—subjec lated busine	t to certain e ess taxable in	xceptions, a come (less	ind (2) no mo section 511	re than 331/	/3% of		
10	Γ	An orga	n organization organized and operated exclusively to test for public safety Seesection 509(a)(4).										
11	Γ	one or the box	more public	ganized and operated by supported organiz bes the type of supp b Type I	ations descr porting organ	ibed in sect ization and	ion 509(a)(1) or section s 11e throu	509(a)(2) S gh 11h	ee section 5 0			
e f g	Γ	other the section If the ocheck the Since A	nan foundatı 1509(a)(2) rganızatıon this box	ox, I certify that the on managers and ot received a written d	her than one etermination	or more pub	blicly support	ed organizat	e II or Type	ed in section	1 509(a)(1) or		
			.	rectly or indirectly c	ontrols, eith	er alone or t	together with	persons des	cribed in (ii)		Yes No		
h		and (III) (ii) a fa (iii) a 3) below, the imily membe 35% control	governing body of the er of a person descri led entity of a persong information about	ne the suppor bed in (i) abo n described i	rted organız ove? ın (ı) or (ıı) a	ation? above?		,	11g(11g(11g((i) (ii)		
"		riovide	tile lollowii	ig illiorillation about	the supporte	eu organizat	LIOII(5)						
(i) Namo suppo organiz		ne of (ii) orted EIN		(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you not organizat col (i) of suppor	ıon ın your	(vi) Is th organizat col (i) org in the U	e Ion In anized	(vii) A mount of support?		
				(see instructions))	Yes	No	Yes	Yes No		No			
Total													

instructions

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify

	under Part III. If the	e organization	fails to qualify u	nder the tests l	listed below, ple	ease cor	<u>mplete</u>	Part III.)
	ection A. Public Support	1	1		Т		<u> </u>	
cale	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 20	011	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	9,734,06	6 8,424,529	7,644,171	7,092,246	7	,981,661	40,876,673
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf		0 0	0	0			0
3	The value of services or facilities furnished by a governmental unit to the organization without charge		0 0	0	0			0
4	Total. Add lines 1 through 3	9,734,06	6 8,424,529	7,644,171	7,092,246	7	,981,661	40,876,673
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							4,391,969
6	Public Support. Subtract line 5							26 404 704
	from line 4							36,484,704
	ection B. Total Support		1					
Cale	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 20	11	(f) Total
7	A mounts from line 4	9,734,066	8,424,529	7,644,171	7,092,246	7,	981,661	40,876,673
	Gross income from interest,							
	dividends, payments received on securities loans, rents, royalties and income from similar sources	147,854	124,333	110,776	105,270		79,623	567,856
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0			0
	Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets	4,416	1,000	0	0		2,121	7,537
	Total support (Add lines 7 through 10)	as ats (Sas Inc	tructions)			1		41,452,066
12	Gross receipts from related activity					12		
13	First Five Years If the Form 990 is check this box and stop here ection C. Computation of Pul			third, fourth, or fi	ifth tax year as a !	501(c)(3) organi:	zation, F
<u> </u>	Public Support Percentage for 201			11 column (f))		14		88 017 %
- · 15	Public Support Percentage for 201	-		(1)		15		90 054 %
	33 1/3% support test—2011. If the	•	•	on line 12 and l	ina 14 is 33 1/20/		check t	
b	and stop here. The organization qua 33 1/3% support test—2010. If the box and stop here. The organizatio 10%-facts-and-circumstances test is 10% or more, and if the organization Part IV how the organization medorganization	alifies as a public organization did n qualifies as a p — 2011. If the org tion meets the "f	ly supported orgal not check the box ublicly supported anization did not c facts and circumst	nization (on line 13 or 16 organization :heck a box on lin ances" test, chec	a, and line 15 is 3 ie 13, 16a, or 16b ck this box and st	33 1/3% of and line op here.	or more, : 14 Explain	check this
b 18	10%-facts-and-circumstances test 15 is 10% or more, and if the organ Explain in Part IV how the organiza supported organization Private Foundation If the organizationstructions	nization meets th tion meets the "f	e "facts and cırcu facts and cırcumst	mstances" test, o ances" test The	check this box and organization qual	d stop he Ifies as a	re. publicly	′ ▶⊏

Schedule A (Form 990 or 990-EZ) 2011 Page 3 Part III Support Schedule for Organizations Described in IRC 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 13 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f)) 15 15 Public support percentage from 2010 Schedule A, Part III, line 15 16 16 Section D. Computation of Investment Income Percentage

Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))

19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

33 1/3% support tests-2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Investment income percentage from 2010 Schedule A, Part III, line 17

17

18

17

18

▶[

Part IV	Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).
	Facts And Circumstances Test
	Explanation
Miscellaneous	Income

Schedule A (Form 990 or 990-EZ) 2011

DLN: 93493135021673

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

	me of the organization ND FOR THE ARTS INC	Simpson's occidentate inseractions.	Employer identification number
101	AD FOR THE ARTS INC		61-0479626
Pa	organizations Maintaining Donor Acorganization answered "Yes" to Form 99		unds or Accounts. Complete if the
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advi- funds are the organization's property, subject to the	5	or advised Yes No
6	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit	efit of the donor or donor advisor, or for ar	ny other purpose Yes No
Pa	rt II Conservation Easements. Complete		o Form 990, Part IV, line 7.
1 2	Purpose(s) of conservation easements held by the or Preservation of land for public use (e.g., recreating Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualic easement on the last day of the tax year	on or pleasure) Preservation of an Preservation of a c	historically importantly land area certified historic structure of a conservation
	casement on the last day of the tax year]	Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified his	toric structure included in (a)	2c
d	Number of conservation easements included in (c) ac	cquired after 8/17/06	2d
3	Number of conservation easements modified, transfe	ء rred, released, extinguished, or terminate!	d by the organization during
	the taxable year ►	· · · · · ·	, .
4	Number of states where property subject to conserva	ation easement is located ►	<u> </u>
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?		lling of violations, and Yes No
6	Staff and volunteer hours devoted to monitoring, insp	pecting and enforcing conservation easem	ents during the year ▶
7	Amount of expenses incurred in monitoring, inspecti	ng, and enforcing conservation easements	during the year
	▶ \$		
8	Does each conservation easement reported on line 2 170(h)(4)(B)(I) and 170(h)(4)(B)(II)?	(d) above satisfy the requirements of sec	tion Yes No
9	In Part XIV, describe how the organization reports co balance sheet, and include, if applicable, the text of t the organization's accounting for conservation easen	he footnote to the organization's financial	
Par	t III Organizations Maintaining Collectio Complete if the organization answered "	ns of Art, Historical Treasures,	or Other Similar Assets.
1a	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fin	116, not to report in its revenue stateme for public exhibition, education or researc	ch in furtherance of public service,
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research in	
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		► \$
2	If the organization received or held works of art, histofollowing amounts required to be reported under SFA		r financial gain, provide the
а	Revenues included in Form 990. Part VIII. line 1		▶- \$

b Assets included in Form 990, Part X

Part	411 Organizations Maintaining Co	ollections of Art	t, His	torio	cal Tr	easur	es, or Ot	her	<u> Similar Asse</u>	ts (cc	<u>ntınued)</u>
3	Using the organization's accession and other items (check all that apply)	er records, check an	y of th	ne foll	_		_		e of its collection	1	
а	Public exhibition		d	Γ	Loan	rexch	ange progra	ms			
b	Scholarly research		e	\sqcap	Other						
c	Preservation for future generations										
4	Provide a description of the organization's c	ollections and expla	ain hov	w they	furthe	r the or	raanization's	S 6 Y 6	emnt nurnose in		
	Part XIV										
5	During the year, did the organization solicit assets to be sold to raise funds rather than									Yes	□ No
Par	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an ar	jements. Compl	ete ıf	the o	organi	zatıon					,
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?						r other asse	ts n		Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	V and complete the	follow	ıng ta	ble		_			_	
							-	-	Amou	nt	
C	Beginning balance						<u> </u>	1c			
d	Additions during the year						<u> </u>	Ld			
е	Distributions during the year						-	Le			
f	Ending balance							1f			
2a	Did the organization include an amount on F	orm 990, Part X, lın	e 21?						Γ.	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	V									
Pai	rt V Endowment Funds. Complete										
	Danisa a fara a halana	(a)Current Year 6,212,331	(b)	Prior Y		(c) Two	5,039,511	(d)	Three Years Back (e	Four Y	ears Back
1a	Beginning of year balance	6,212,331		5,.	349,245		5,039,511		6,339,193		
Ь	Contributions	140.066		4	174.000				006.753		
C	Investment earnings or losses	140,966			174,990		636,892		-896,752		
d	Grants or scholarships	277,990			281,930		303,828		379,588		
е	Other expenditures for facilities and programs	U			0		0		0		
f	Administrative expenses	25,729			29,974		23,330		23,342		
g	End of year balance	6,049,578		6,2	212,331		5,349,245		5,039,511		
2	Provide the estimated percentage of the year	ar end balance held	as								
а	Board designated or quasi-endowment 🕨	1 2 %									
b	Permanent endowment ► 988%										
c	Term endowment ► 0 %										
За	Are there endowment funds not in the posse	ssion of the organiz	ation	that a	re held	and ac	dministered	for t	:he		
	organization by									Yes	No
	(i) unrelated organizations			•				•	3a(i)	Yes	
_	(ii) related organizations								3a(ii)	 	No
	If "Yes" to 3a(II), are the related organization	•						•	3b		
4	Describe in Part XIV the intended uses of the					0					
Раг	t VI Land, Buildings, and Equipme	ent. See Form 95	90, Pa								
	Description of property				Cost or s (invest		(b) Cost or of basis (othe		(c) Accumulated depreciation	(d) B	ook value
1a l	Land					0		0			0
b i	Buildings		•			0	1,517	,875	809,168		708,707
c l	Leasehold improvements					0		0	0		0
d i	Equipment					0	332	,740	293,052		39,688
	Other	<u></u>				0	32	,800	22,257		10,543
Tota	I. Add lines 1a-1e <i>(Column (d) should equal F</i>	orm 990, Part X, colu	mn (B)), line	10(c).)				▶		758,938
	•	· · · · · · · · · · · · · · · · · · ·	<u> </u>						Schedule D (F	orm 9	

Part VIII Investments—Other Securities. See F	orm 990, Part X, line 12	2.	
(a) Description of security or category	(b) Book value		d of valuation
(including name of security)	(B)Book Value	Cost or end-of	-year market value
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
		+	
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See	Form 990, Part X, line	13.	
			d of valuation
(a) Description of investment type	(b) Book value		- year market value
			,
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
	e 15.		
Part IX Other Assets. See Form 990, Part X, line			(b) Book value
			(b) Book value
Part IX Other Assets. See Form 990, Part X, line			(b) Book value
Part IX Other Assets. See Form 990, Part X, line			(b) Book value
Part IX Other Assets. See Form 990, Part X, line			(b) Book value
Part IX Other Assets. See Form 990, Part X, line			(b) Book value
Part IX Other Assets. See Form 990, Part X, line			(b) Book value
Part IX Other Assets. See Form 990, Part X, line			(b) Book value
Part IX Other Assets. See Form 990, Part X, line			(b) Book value
Part IX Other Assets. See Form 990, Part X, line			(b) Book value
Part IX Other Assets. See Form 990, Part X, line			(b) Book value
Part IX Other Assets. See Form 990, Part X, line			(b) Book value
Part IX Other Assets. See Form 990, Part X, line			(b) Book value
Part IX Other Assets. See Form 990, Part X, line			(b) Book value
Part IX Other Assets. See Form 990, Part X, line			(b) Book value
Part IX Other Assets. See Form 990, Part X, line			(b) Book value
Part IX Other Assets. See Form 990, Part X, line			(b) Book value
Part IX Other Assets. See Form 990, Part X, line			(b) Book value
Part IX Other Assets. See Form 990, Part X, line			(b) Book value
Part IX Other Assets. See Form 990, Part X, line	tion		(b) Book value
Part IX Other Assets. See Form 990, Part X, line (a) Description (b) Should equal Form 990, Part X, col.(B) line 15	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X,	5.)		(b) Book value
Part IX Other Assets. See Form 990, Part X, line (a) Description (b) Should equal Form 990, Part X, col.(B) line 15	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X,	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of Liability	5.) , line 25.		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of Liability	5.) , line 25.		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of Liability	5.) , line 25.		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of Liability	5.) , line 25.		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of Liability	5.) , line 25.		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of Liability	5.) , line 25.		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of Liability	5.) , line 25.		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of Liability	5.) , line 25.		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of Liability	5.) , line 25.		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of Liability	5.) , line 25.		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of Liability	5.) , line 25.		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of Liability	5.) , line 25.		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of Liability	5.) , line 25.		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of Liability	5.) , line 25.		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of Liability	5.) , line 25.		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of Liability	5.) , line 25.		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of Liability	5.) , line 25.		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of Liability	5.) , line 25.		(b) Book value

Total revenue (Form 990, Part VIII, column (A), line 12)

8,013,464

2	Total expenses (Form 990, Part IX, column (A), line 25)	2	6,932,91
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	1,080,54
4	Net unrealized gains (losses) on investments	4	20
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	20
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	1,080,75
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Re	eturn
1	Total revenue, gains, and other support per audited financial statements	1	6,986,91
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d 0		
e	Add lines 2a through 2d	2e	134,28
3	Subtract line 2e from line 1	3	6,852,62
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 0		
b	Other (Describe in Part XIV)		
C	Add lines 4a and 4b	4c	1,160,83
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	8,013,46
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial statements	1	5,906,16
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments	1	
c	Other losses	1	
d	Other (Describe in Part XIV) 2d 0	1	
e	Add lines 2a through 2d	2e	134,07
3	Subtract line 2e from line 1	3	5,772,08
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 0		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	1,160,83
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	6,932,91
	* VIV. Complemental Information		

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
SchD_P05_S00_L04		The purpose of the Bingham Endowment (balance \$5,975,295) is to provide funds to the Fund for the Arts for its mission of supporting the arts community of Metro Louisville. The purpose of the Whittenberg Endowment (balance \$74,283) is to provide funding for a scholarship to assist pre-college age students in pursuing advanced studies in the arts, towards a career in the performing arts.
SchD_P10_S00_L02		FIN 48 (ASC 740) Footnote "The Fund evaluates the recognition and measurement of uncertain income tax positions using a 'more-likely-than-not' approach and has determined that no material adjustment for income tax uncertainties or unrecognized tax benefits is required "
SchD_P12_S00_L04b	Schedule D, Part XII, Line 4b	Partnership Gifts of \$1,160,835
SchD_P13_S00_L04b	Schedule D, Part XIII, Line 4b	Partnership Grants of \$1,160,835

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DLN: 93493135021673 OMB No 1545-0047

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

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Schedule I

(Form 990)

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. ► Attach to Form 990

Employer identification number FUND FOR THE ARTS INC 61-0479626 **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use (a) Name and address of **(b)** EIN (c) IRC Code (d) A mount of cash (f) Method of (g) Description of (h) Purpose of grant (e) A mount of nonorganization section valuation non-cash assistance or assistance grant cash or government ıf applıcable assistance (book, FMV, appraisal, other) See Additional Data Table Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 37

П	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990,	Part IV. li	ne 22
	Use Schedule I-1 (Form 990) if additional space is needed.		

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
SchI_P01_S00_L02	Schedule I, Part I, Line 2	Fund for the Arts awards the most significant portion of its grants to preselected "Cultural Partner" organizations which adhere to stated requirements for continued qualification. Each organization is part of an annual "allocation process" which includes a review by an Allocation Committee comprised of Board members, "NeXti" members (a group of young professionals in a 2 year-long program focusing on community building through the arts) and Fund staff. Information reviewed includes a summary of the organization's accomplishments, challenges, operating plans and audited financial statements. Grants made under the "partnership grant" program are only made to qualifying Section 501(c)(3) organizations with periodic reporting required where restrictions may apply. Many of these grants are also made to the "Cultural Partner" organizations. Grants made pursuant to the EVERY CHILD Education Initiative (which includes Teacher Arts Grants, 5X5 Initiative, Hear the Music, School's Out = Art's In, etc.) are made to qualifying schools or Section 501(c)(3) organizations for the delivery of arts experiences. Monitoring is done through contact with the arts groups providing the experiences and follow-up with teachers. All other grants (including those made through power2give) are made based on specific requests and are made only to other Section 501(c)(3) organizations. Appropriate follow-up, if any, is determined based on the size of the grant, purpose and knowledge of the organization.
	·	Calcadala T (Farma 200) 2011

Software ID: 11000129

Software Version: v1.00

EIN: 61-0479626

Name: FUND FOR THE ARTS INC

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Actors Theatre of Louisville316 West Main Louisville, KY 40202	61- 0645030	501(c)(3)	1,358,317				General Support and power2give projects
Kentucky Museum of Art and Craft 715 West Main Louisville, KY 40202	61- 0985312	501(c)(3)	158,502				General Support and power2give projects

(a) Name and address of organization	(b) EIN	(c) IRC Code section	(d) A mount of cash grant	(e) A mount of non-cash	(f) Method of valuation	(g) Description of	(h) Purpose of grant
or government		ıf applıcable		assistance	(book, FMV, appraisal, other)	non-cash assistance	or assistance
Kentucky Opera Association323 West Broadway Suite 601 Louisville, KY 40202	61- 6013111	501(c)(3)	637,167		2(8.)		General Support, rent subsidy and power2give projects
Kentucky Shakespeare323 West Broadway Suite 401 Louisville, KY 40202	61- 6036654	1 5011(2)(3)	190,483				General Support, rent subsidy and power2give projects

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Louisville Ballet 315 East Main Louisville, KY 40202	61- 6033779	501(c)(3)	671,358				General Support and power2give projects
Louisville Orchestra323 West Broadway Louisville, KY 40202	61- 6000384	501(c)(3)	333,980				General Support, rent subsidy and power2 give projects

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Louisville Theatrical Association620 West Main Louisville, KY 40202	61- 6000383	1 501(6)(3)	62,153				General Support (Education)
Louisville Visual Art Association609 West Main Louisville, KY 40202	61- 0492348	501(6)(3)	86,826				General Support (CFAC and Open Doors) and power2 give

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Louisville Youth Choir3105 Lexington Road Louisville, KY 40206	61- 6058143	501(c)(3)	67,563				General Support, scholarships and power2give projects
Louisville Youth OrchestraPO Box 997 Louisville, KY 40201	61- 0597184	501(c)(3)	114,353				General Support, scholarships and power2give projects

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
StageOne Family Theatre323 West Broadway Louisville, KY 40202	61- 0466715	501(c)(3)	711,927				General Support, rent subsidy and power2 give projects
Walden Theatre 1123 Payne Street Louisville, KY 40204	61- 0902722	501(c)(3)	84,568				General Support and power2 give projects

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
West Louisville Perfoming Arts Academy623 West Main Louisville, KY 40202	61- 1181511	501(c)(3)	84,942				General Support, rent subsidy and power2 give projects
FFTA Properties Inc623 West Main Louisville, KY 40202	31- 1497554	1 501(6)(3)	165,541				General Support and Property Renovations

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Kentucky Opera 323 West Broadway Suite 601 Louisville, KY 40202	61- 6013111	501(c)(3)	20,000				Special Arts Event
The Kentucky Center5 Riverfront Plaza Louisville, KY 40202	31- 0999046		70,054				School's Out = Art's In, Partnership Grants

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Ogle CenterPO Box 845 Jeffersonville,IN 47131	31- 0988988	I 501(c)(3)	10,000				General Support
Arts Council of So Indiana820 East Market Street New Albany, IN 47150	35- 1383333	1 501(6)(3)	41,582				power2 give

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Blue Apple Players PO Box 4261 Louisville, KY 40204	61- 1103965	501(c)(3)	22,454				power2give
Bunbury Theatre 604 S Third St Louisville, KY 40202	61- 1105681	501(c)(3)	7,082				power2give projects

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Choral Arts Society 7428 Woodhill Valley Road Louisville, KY 40241	80- 0447166	501(c)(3)	12,012				power2give projects
Clarksville Little Theatre301 E Montgomery Ave Clarksville,IN 47129	35- 0656770	501(c)(3)	6,160				power2give projects

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Crane House The Asian Institute 1244 South Third Street Louisville, KY 40203	61- 1107169	501(c)(3)	5,694				power2give projects
Jefferson Community and Technical College Fdn109 East Broadway Louisville, KY	23- 7035648	501(c)(3)	12,890				power2 give projects

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Kentucky Guild of Artists and CraftsmenPO Box 291 Berea, KY 40403	61- 1332928	501(c)(3)	16,544				power2give projects
Kentucky School of Art at Spaulding 845 South Third Street Louisville, KY 40203	27- 2232797	501(c)(3)	5,118				power2give projects

(a) Name and	(b) EIN	(c) IRC Code	(d) A mount of	` '	(f) Method of	(g) Description	(h) Purpose of
address of organization or government		section if applicable	cash grant	non-cash assistance	valuation (book, FMV, appraisal,	of non-cash assistance	grant or assistance
					other)		
Looking for Lilith Theatre Company 312 Crescent Avenue Louisville, KY 40206	30- 0135891	501(c)(3)	9,251				power2give projects
Louisville Chorus 6303 Fern Valley Pass Louisville, KY 40228	31- 0929701	501(c)(3)	6,257				power2give projects

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
or government					other)	assistance	
Savage Rose Classical Theatre 1124 Ash Street Louisville, KY 40217	94- 3454588	501(c)(3)	6,107				power2give projects
Shelby County Community Theatre 801 West Main Shelbyville, KY 40065	31- 0916464	501(c)(3)	16,528				power2give projects

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section If applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
This I Believe Inc 2424 Frankfort Ave Louisville, KY 40206	68- 0597809	501(c)(3)	5,073				power2give projects
Voces Novae1009 Burning Springs Drive Louisville, KY 40223	61- 1248337	501(c)(3)	5,035				power2give projects

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Cultural Partners Supporting Organization323 W Broadway Louisville, KY 40202	26- 0320992	501(c)(3)	213,207				General Support
Jefferson County Public Schools3332 Newburg Road Louisville, KY 40218	61- 6001316	Gov	357,630				EVERY CHILD Education Initiative including Teacher Arts Grants and 5X5

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Louisville Metro Parks - Community Centers527 W Jefferson Louisville, KY 40202	20- 4372292	Gov	17,019				School's Out + Art's In
Bullitt County Schools1040 Hwy 44 East Shepherdsville, KY 40165	61- 6001357	Gov	10,670				Teacher Arts Grants

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Greater Clark County Schools2112 Utica- Sellersburg Road Jeffersonville, IN 47130	35- 1151414	Gov	14,664				Teacher Arts Grants

DLN: 93493135021673

OMB No 1545-0047

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990,

> Part IV, question 23. ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization

FUND FOR THE ARTS INC

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Employer identification number

61-0479626

Pa	rt I Questions Regarding Compensatio	n				
	_				Yes	No
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part II					
	First-class or charter travel	Γ	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	Г	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the oreimbursement orprovision of all the expenses described.			1b		
2	Did the organization require substantiation prior to officers, directors, trustees, and the CEO/Executiv			2		
3	Indicate which, if any, of the following the organizat organization's CEO/Executive Director Check all t		y			
	Compensation committee		Written employment contract			
	Independent compensation consultant		Compensation survey or study			
	Form 990 of other organizations	<u> </u>	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, or a related organization	. Part VII	, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	l paymen	t?	4a	Yes	
b	Participate in, or receive payment from, a suppleme	ental non	qualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-b	pased co	mpensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and p	rovide th	e applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only m	ust comp	olete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A compensation contingent on the revenues of	, line 1a,	did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		No
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A compensation contingent on the net earnings of	, line 1a,	did the organization pay or accrue any			
а	The organization?			6a		No
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes,"			7		No
8	Were any amounts reported in Form 990, Part VII, subject to the initial contract exception described in Part III			8		No
9	If "Yes" to line 8, did the organization also follow th section 53 4958-6(c)?	ne rebutta	able presumption procedure described in Regulations	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

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

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

(A) Name		(ii) Damus 9 (iii) Other		(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported in prior		
		(i) Base compensation	incentive compensation	reportable compensation	compensation			Form 990 or Form 990-EZ	
(1) Ms Barbara Sexton Smith	(I) (II)	158,907 0	0	0	7,664 0	5,910 0	172,481 0	0	
(2) Mr Allan Cowen	(ı) (ıı)	77,541 0	263,363 0	171,537 0	4,163 0	19,800 0	536,404 0	112,006 0	

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Identifier	Return Reference	Explanation
	,	The Fund for the Arts' Compensation Committee includes a Chairman, the Fund for the Arts' Board Chair, the Chair of the Finance Committee and the Chair of the Campaign Members of the committee review a summary of the accomplishments for the year and compensation data developed from the review of other Form 990's Recommendations related to CEO and other executive compensation are discussed and voted on by the Compensation Committee in an executive session Meeting minutes are recorded Recommendations are then taken to the organization's Executive Committee and/or full Board for final review and approval
		The former CEO, Allan Cowen retired from the Fund for the Arts effective April 30, 2011 Pursuant to a contract/agreement, Mr Cowen received a severance benefit equal to \$242,406 payable in installments (Part II, Column B(III)) Based on the terms of the existing employment agreement, the Fund also agreed to continue to provide an equivalent amount of family medical coverage until the earlier of a specified time/event (Part II, Columns B(III) and D) In 1987, The Fund for the Arts established a nonqualified deferred compensation arrangement for the benefit of the Fund's former CEO, Allan Cowen No amount was contributed/allocated during calendar year 2011 An amount totaling \$263,296 (Part II, Column B(II)), representing contributions/applicable earnings to one of the plans during the prior 20+ years was distributed pursuant to the deferred compensation contractual agreement

Schedule J (Form 990) 2011

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DLN: 93493135021673

Transactions with Interested Persons

Schedule L (Form 990 or 990-EZ)

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

Open to Public **Inspection**

Department of the Treasury Internal Revenue Service

Employer identification number Name of the organization FUND FOR THE ARTS INC **Excess Benefit Transactions** (section 501(c)(3) and section 501 (c)(4) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (c) (a) Name of disqualified person 1 (b) Description of transaction Corrected? Yes No 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Part II Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a (f) (b) Loan to (g)Written (e) In Approved or from the (a) Name of interested person and (c)Original default? by board or (d)Balance due agreement? organization? principal amount purpose committee? Τо From Yes No Yes No Yes No Part III Grants or Assistance Benefitting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (b) Relationship between interested person (a) Name of interested person (c) A mount of grant or type of assistance and the organization

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	(e) Sharing o organization's revenues?	
	organization	cransaction		Yes	No
(1) Ms Deborah L Moessner	Board Member	24,725	Compensation of Family Member		No
(2) Ms Marlene M Grissom	Board Member	19,713	Compensation of Family Member		No

Supplemental Information Part V

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier Return Reference Explanation

Schedule L (Form 990 or 990-EZ) 2011

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DLN: 93493135021673

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

Name of the organization FUND FOR THE ARTS INC	Employer identific	cation number
	61-0479626	

ldentifier	Return Reference	Explanation
F990_P03_S00_L02	Form 990, Part III, Line 2	During the year, the Fund implemented a technology-based fundraising platform, power2give, which allows any qualifying charity to post arts-related projects for funding. Through matching gifts and various communication strategies, approximately 70 organizations participated and recieved grants through power2give.

ldentifier	Return Reference	Explanation
F990_P06_S0A_L01a	Form 990, Part VI, Section A, Line 1a	Delegation of Authority - Pursuant to the Bylaws, the Board elected an Executive Committee of 24 members. Under the Bylaws, when the Board is not in session, the Executive Committee has and may exercise all the authority of the Board with various stated exceptions. (a) elect or appoint Directors, (b) elect or appoint officers, (c) approve any annual allocation among Assisted Organizations of funds raised in the annual fund-rasising campaigns or otherwise controlled and distributable by the Fund, (d) amend or restate the Articles, (g) adopt a plan of merger or consolidation with another corporation, (h) authorize the sale, lease, exchange or mortgage of all, or substantially all, of the property and assets of the Fund, (i) authorize the voluntary dissolution of the Fund, or adopt a plan for the distribution of the assets of the Fund, (j) amend, alter or repeal any resolution of the Board

ldentifier	Return Reference	Explanation
F990_P06_S0A_L02	Form 990, Part VI, Section A, Line 2	Did any officer, director, trustee or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee? - Board Secretary, Jonathan D. Goldberg and Board Member, James Goldberg - family relationship, Board Member, James S. Welch, Jr. and Board Member, Rusty Cheuvront, Jr business relationship, Board Member, Owsley Brown II and Board Member, John Gill Holland, Jr family relationship, Vice Chairman/Board Member, Carl M. Thomas and CFO, Diane Cornwell - business relationship

ldentifier	Return Reference	Explanation
F990_P06_S0A_L03	VI, Section A, Line 3	Did the organization delegate control over the management duties customarily performed by or under the direct supervision of officer, directors or trustees, or key employees to a management company or other person? - The Chief Financial Officer position is contracted to Diane Cornwell, an independent contractor. She was paid \$65,900 of reportable compensation and provided parking to oversee the complete financial function including the annual allocation process with a dual reporting relationship to the Fund Board and CEO.

ldentifier	Return Reference	Explanation
F990_P06_S0B_L11b	Form 990, Part VI, Section B, Line 11b	Description of the process for reviewing the organization's Form 990. A committee consisting of the organization's Board Chair, CEO, Chair of Finance Committee, Chair of Compensation Committee and at least two members of the Finance Committee are provided a draft of the Form 990 for review prior to its finalization. A copy of the finalized return is electronically provided to all voting Board members prior to being filed with the IRS.

ldentifier	Return Reference	Explanation
F990_P06_S0B_L12c	Form 990, Part VI, Section B, Line 12c	Conflict of Interest (COI) Policy/Enforcement Annually, the Fund for the Arts provides a copy of its COI Policy to all directors and officers. Directors and officers are required to read and comply with the policy which requires, at a minimum, annual disclosure of outside activities and relationships which could give rise to a potential conflict. This is then used by the organization's management in its ongoing monitoring of potential conflicts. In addition, the COI Policy requires that a director or officer provide full disclosure of any conflict or perceived conflict as defined in the policy and recuse themselves from participation in the decision-making or vote regarding the affected transaction.

ldentifier	Return Reference	Explanation
F990_P06_S0B_L15	Form 990, Part VI, Section B, Line 15	Process for determining compensation of top management official, other officers or key employees Each year, the Fund for the Arts Compensation Committee reviews the compensation arrangements for the CEO They also review the CEO's recommendations regarding compensation for other key employees and the contract CFO The Committee then presents their recommendations to the organization's Executive Committee or Board for final approval. The Compensation Committee is comprised primarily of independent members, uses comparability data and contemporaneously documents the deliberation and recommendations. The compensation arrangements are approved in advance for the upcoming fiscal year period of July 1 thru June 30. The Compensation Committee meeting was held on June 27, 2011 to review compensation arranagements for the period July 1, 2011 thru June 30, 2012. Recommendations were presented to the Board for approval at a meeting on June 28, 2011.

Identifier	Return Reference	Explanation
F990_P06_S0C_L19		Public Availabilityi of Information - The Conflict of Interest Policy and the most current audited financial statements are available on the Fund for the Arts' website. Articles of Incorporation are on file with the KY Secretary of State

Identifier	Return Reference	Explanation
F990_P11_S00_L05	Form 990, Part XI, Line 5	Unrealized gain/loss recorded for book purposes

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DLN: 93493135021673

OMB No 1545-0047

2011

Open to Public Inspection

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization FUND FOR THE ARTS INC						Employer i 61-04796		ication number		
Part I Identification of Disregarded Entities (C	omplete	ıf the organization	answered "Yes" on	n Form 990, Pa	rt I					
(a) Name, address, and EIN of disregarded entity			(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets		ts Direct controlling entity			
Part II Identification of Related Tax-Exempt Or or more related tax-exempt organizations du			the organization ar	nswered "Yes"	on F	Form 990, F	Part I	V, line 34 because	t had	one
(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section		(e) Public charity s (if section 50 (3))		(f) Direct controlling entity	Section (13) co	(g) n 512(b) ontrolled nization
									Yes	No
(1) FFTA Properties Inc 623 West Main Louisville, KY 40202 31-1497554	BrownThea Ctr/Ballet E	ntre/ArtsSpace/Conf Bldg	кү	501(c)(3)			9	N/A		No
For Privacy Act and Paperwork Reduction Act Notice, see the Ins	t ruct ions	for Form 990.	Cat No 5013	5 Y				Schedule R (Fo	rm 990)	2011

Part III	Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990,	Part IV,	line 34
	because it had one or more related organizations treated as a partnership during the tax year.)		

	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total Income	(g) Share of end-of- year assets	(h Disprop allocat	rtionate ions?	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gener mana partr	al or ging ner?	(k) Percentage ownership
						Yes	No		Yes	No	
											-
										, and the second	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end-of-year assets	(h) Percentage ownership

(4)

(5)

(6)

Schedule K (1 01111 990) 2011				۲	age 3
Part V Transactions With Related Organizations (Complete if the organization answered "Y	'es" on Form 990, Pa	rt IV, line 34, 35, 3	5A, or 36.)		
Note. Complete line 1 if any entity is listed in Parts II, III or IV				Yes	No.
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related org	janizations listed in Part	s II-IV?			
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity			1a		No
b Gift, grant, or capital contribution to related organization(s)			1b	Yes	5
c Gift, grant, or capital contribution from related organization(s)			10		No
d Loans or loan guarantees to or for related organization(s)			1d		No
e Loans or loan guarantees by related organization(s)			1e	:	No
f Sale of assets to related organization(s)			1f		No
g Purchase of assets from related organization(s)			1 g		No
h Exchange of assets with related organization(s)			1h	1	No
i Lease of facilities, equipment, or other assets to related organization(s)			1i	-	No
j Lease of facilities, equipment, or other assets from related organization(s)			1 <u>j</u>		No
k Performance of services or membership or fundraising solicitations for related organization(s)			1k		No
I Performance of services or membership or fundraising solicitations by related organization(s)			11		No
m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			1n	n	No
n Sharing of paid employees with related organization(s)			1n	1	No
• Reimbursement paid to related organization(s) for expenses			10	+	No
p Reimbursement paid by related organization(s) for expenses			1 p		No
q Other transfer of cash or property to related organization(s)			19		No
r Other transfer of cash or property from related organization(s)			1r		No
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line	, including covered relat	nonships and transact	ıon thresholds		
(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determ involve		mount
(1) FFTA Properties Inc	b	165,541	Cash Paid/Pledges		
(2)					
(3)					

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate alloc	ations?	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man	j) eral or aging tner?	(k) Percentage ownership
] 311/	Yes	No			Yes	No		Yes	No	1

Schedule R (Form 990) 2011

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

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Schedule R (Form 990) 2011

Additional Data

Software ID: 11000129

Software Version: v1.00

EIN: 61-0479626

Name: FUND FOR THE ARTS INC

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services

(Code) (Expenses \$ 168,029 including grants of \$ 8,890) (Revenue \$ 0)

Other programs conducted and grants made include direct ongoing support for "Cultural Partners", Arts Showcase, support of ArtSpace, NeXt group activities and miscellaneous community arts grants Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) Average hours per		tion (that a		/)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation	
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations	
Mr Terry W Tyler Board Member	5	Х						0	0	0	
Mr Gregory Heitzman 2013 Campaign Chair	1 0	Х						0	0	0	
Ms Deborah L Moessner Board Member	25	Х						0	0	0	
Mr Arthur L Gleason Board Member	25	Х						0	0	0	
Mr Thomas P Monahan Board Member	25	Х						0	0	0	
Mr Robert P Adelberg Board Member	25	Х						0	0	0	
Mr P Richard Anderson Jr Chair of Nominating Committee	5	Х						0	0	0	
Ms Norma Oberst CoChair Allocations Committees	1	Х						0	0	0	
Mr Owsley Brown II Board Member	1	Х						0	0	0	
Mr Steven E Trager Board Member	10	Х						0	0	0	
Mr Benjamin Richmond Board Member	1	Х						0	0	0	
Mr C Edward Glasscock Board Member	25	Х						0	0	0	
Mrs Martha Dunbar Hall Board Member	1	Х						0	0	0	
Mr Jonathan D Goldberg Secretary	25	Х		х				0	0	0	
Mr Bill Lamb Board Member	1	Х						0	0	0	
Mr Frank B Hower III Board Member	25	Х						0	0	0	
Mr Tonii Rizzo Board Member	1	Х						0	0	0	
Mr James R Allen Vice Chair	5	Х		х				0	0	0	
Mr Sam Corbett Board Member	2 0	Х						0	0	0	
Mr Mark F Wheeler 2014 Campaign Chair	5	Х						0	0	0	
Mr John N Voyles Board Member	25	Х						0	0	0	
Dr Shirley Willihnganz Board Member	25	Х						0	0	0	
Mr William Hollander Board Member	5	Х						0	0	0	
Ms Angela Leet Board Member	1 5	Х						0	0	0	
Mr James Clay Smith Board Member	25	Х						0	0	0	

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) Average hours per		tion that a		y)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation	
	week	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations	
Mr Dennis Heishman Board Member	25	х						0	0	0	
Dr Susan Galandiuk Board Member	25	×						0	0	0	
Mr J Stephen Barger Board Member	1 0	Х						0	0	0	
Mr Jonathan D Blum Board Member	5	Х						0	0	0	
Mr John H Hawkins Jr Board Member	5	Х						0	0	0	
Mr Carl M Thomas Vice Board Chair and Chair Compensation Committee	1 0	х						0	0	0	
Mr Harold Butler Treasurer and Co-Chair Allocations Committee	2 0	х		х				0	0	0	
Mr James S Goldberg Board Member	1	Х						0	0	0	
Mrs Joan Whittenberg Board Member	25	Х						0	0	0	
Ms Marlene M Grissom Board Member	1	х						0	0	0	
Mr Rick K Guillaume Board Member	25	Х						0	0	0	
Mr David P Calzi Board Chair	3 0	х		х				0	0	0	
Mr J Daniel Rivers Board Member	5	х						0	0	0	
Mr Rusty Cheuvront Board Member	5	Х						0	0	0	
Mr Arnold Garson Board Member	25	Х						0	0	0	
Mr Jeffrey A McKenzie Allocations Co-Chair	2 0	Х						0	0	0	
Dr Anthony L Newberry PhD Board Member	1	Х						0	0	0	
Mr Thomas T Noland Jr Board Member	5	Х						0	0	0	
Mr Joseph A Pusaterı 2012 Campaıgn Chaır	8	Х						0	0	0	
Ms Mary Pat Regan Board Member	1	Х						0	0	0	
Mr James S Welch Jr Board Member	5	Х						0	0	0	
Ms Melissa A Wasson Howell Board Member	5	Х						0	0	0	
Ms Tracy Williams Board Member	1	Х						0	0	0	
Mr John Gill Holland Jr Board Member	25	Х						0	0	0	
Mr Hoyt W Almond Board Member	25	х						0	0	0	

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours		that a			II		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
Mr Paul Costel Board Member	25	Х						0	0	0
Mr Paul G Fultz Board Member	5	Х						0	0	0
Mr Tom Partridge Board Member	5	Х						0	0	0
Mr James A Hillebrand Board Member	25	Х						0	0	0
Mr DeVone Holt Board Member	2 5	Х						0	0	0
Ms Tawana Edwards Board Member	25	Х						0	0	0
Mr Greg Miller Board Member	25	Х						0	0	0
Mr Douglas R Sharps Board Member	25	Х						0	0	0
Mr William B Yarmuth Board Member	1	Х						0	0	0
Ms Barbara Sexton Smith President and Chief Executive Office	60	Х		х				158,907	0	13,574
Ms Diane Cornwell Chief Financial Officer (Indep Contractor)	40				х			65,900	0	0
Mr Allan Cowen Former CEO (See Schedule J Detail)	0						х	512,441	0	23,963