Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047 20**20**

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

06/30/2021 For the 2020 calendar year, or tax year beginning 07/01/2020 and ending D Employer identification number C Name of organization FUND FOR THE ARTS INC Check if applicable: 61-0479626 Doing business as Address change Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Room/suite Name change 502-582-0100 Initial return 623 W Main City or town, state or province, country, and ZIP or foreign postal code Final return/terminated G Gross receipts \$ 11,831,441 Louisville, KY 40202 Amended return H(a) Is this a group return for subordinates? Yes No F Name and address of principal officer: Christen Boone Application pending H(b) Are all subordinates included? Tes No 623 W Main, Louisville, KY 40202 If "No," attach a list. See instructions) < (insert no.) 4947(a)(1) or 527 501(c) (Tax-exempt status: √ 501(c)(3) H(c) Group exemption number ▶ Website: ▶ fundforthearts.org M State of legal domicile: L Year of formation: Summary Part I Briefly describe the organization's mission or most significant activities: Vision Statement: We envision a Greater Louisville in which the arts enrich the lives of everyone in our community, in every neighborhood, every day. Mission Statement: To Activities & Governance (Continued on Schedule O, Statement 1) Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 35 Number of voting members of the governing body (Part VI, line 1a) 4 35 Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2020 (Part V, line 2a) 5 17 6 4,000 Total number of volunteers (estimate if necessary) 7a 0 Total unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990-T, Part I, line 11 0 **Prior Year Current Year** 6,075,343 9,278,523 Contributions and grants (Part VIII, line 1h) . . . 8 Revenue 9,379 Program service revenue (Part VIII, line 2g) 14,326 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 55,665 100,347 10 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 14,774 21,103 11 9,409,352 6,160,108 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 5,107,786 3,999,027 13 Benefits paid to or for members (Part IX, column (A), line 4) 0 0 14 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1,298,130 1,099,137 15 0 Professional fundraising fees (Part IX, column (A), line 11e) 16a Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,189,354 1,058,990 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 7,595,270 6,157,154 18 Revenue less expenses. Subtract line 18 from line 12 -1,435,162 3,252,198 19 Beginning of Current Year **End of Year** 10,378,092 7,505,695 20 Total assets (Part X, line 16) 972,827 21 Total liabilities (Part X, line 26) . . . 919,003 Net assets or fund balances. Subtract line 21 from line 20 9,405,265 22 6,586,692 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. Date Sign Signature of officer Here Janie Martin, CFO/COO Type or print name and title Date Print/Type preparer's name Preparer's signature Check if **Paid** self-employed Preparer Firm's EIN ▶ Firm's name **Use Only** Phone no. Firm's address ▶ May the IRS discuss this return with the preparer shown above? See instructions ☐ Yes ☐ No

Part I	0 (2020)				Page 2
	TO STATE OF THE PARTY OF THE PA	ent of Program Service		- W- D- 4 W	
1		e the organization's miss		n this Part III	
	Action Company of the	AND THE RESERVE TO THE PROPERTY OF THE PROPERT		elopment, education and the quality of	life for everyone by
				nections. Vision Statement: We envision	
				, in every neighborhood, every day.	
2	prior Form 990			g the year which were not listed on	the . ☐ Yes ☑ No
3	Annual III Interpretation and a constitution			ges in how it conducts, any progr	rom
3	services?	ibe these changes on Sc	* * * * * * * * * * * *		. ☐ Yes ☑ No
4				ch of its three largest program servi	ices as measured by
	expenses. Sec	ction 501(c)(3) and 501(c		to report the amount of grants and	
	(Code:) (Expenses \$	5.031.211 including grants of \$	3,999,027) (Revenue \$	9,409,352)
				t 500 schools, community arts organiz	
	("Arts Partners	") across the region and o	directly offers a range of commun	ity arts services designed to advocate	for and extend the
				2021, the Fund continued focus on th	
				25". The strategic plan adopted the five	
				, Promotion and Equity, Diversity & In	
				erving 2.1 million people with arts prog	
				S- Arts, cultural and creativity are fully ore art, for more people, in more place:	
				58 arts and culture venues/organization	
				ccess and participation for low-income	
				e the overall health and well-being of p	
41-		Schedule O, Statement 2)			
4b	(Code:) (Revenue \$)
40	(Code:) (Revenue \$)
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4D	(Code:) (Revenue \$)
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) (Expenses \$	including grants of \$)
4c	(Code:) (Expenses \$) (Expenses \$	including grants of \$		
4c	(Code:) (Expenses \$	including grants of \$including grants of \$		

Form **8868**

(Rev. January 2020)

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

▶ File a separate application for each return.
 ▶ Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

filing of this	ling of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.								
	6-Month Extension of Time. Only sub								
All corporat	ions required to file an income tax return oth	er than Forr	m 990-T (including 1120	-C filers), partnersh	nips, I	REMICs, and trusts			
must use Fo	orm 7004 to request an extension of time to f	ile income t	ax returns.	VII. MILES CO. V					
Type or	Name of exempt organization or other filer, see it			Taxpayer identificat	ion nu	mber (TIN)			
print	FUND FOR THE ARTS INC			61	-0479	526			
File by the	Number, street, and room or suite no. If a P.O. b	oox, see instru	uctions.						
due date for	623 W Main								
filing your return. See	City, town or post office, state, and ZIP code. For	or a foreign a	ddress, see instructions.						
instructions.	Louisville, KY, 40202	₩.							
			1			0 1			
Enter the R	eturn Code for the return that this application	is for (file a	separate application to	r each return) .		[0]1			
Application	on	Return	Application			Return			
Is For		Code	Is For			Code			
Form 990	or Form 990-EZ	01	Form 990-T (corporation	on)		07			
Form 990-	BL	02	Form 1041-A			08			
Form 4720) (individual)	03	Form 4720 (other than	individual)		09			
Form 990-		04	Form 5227			10			
	T (sec. 401(a) or 408(a) trust)	05	Form 6069			11			
	T (trust other than above)	06	Form 8870			12			
If the orgaIf this is for the who	e No. ► 502-582-0100 anization does not have an office or place of lor a Group Return, enter the organization's follogroup, check this box ► □ . If the names and TINs of all members the extensions.	business in our digit Gro f it is for par	the United States, chec up Exemption Number (GEN)	• •	▶□ If this is			
1 I receive the €	the organization named above. The extension is for the organization's return for: ▶ ☐ calendar year 20 or ▶ ☑ tax year beginning 07/01, 2020 _, and ending 06/30, 2021								
3a If th	change in accounting period is application is for Forms 990-BL, 990-PF, nonrefundable credits. See instructions.	990-T, 472	20, or 6069, enter the te	entative tax, less	3a				
	nis application is for Forms 990-PF, 990-T,	4720 02 9	SOGO enter any refunda	able credite and	Ja	<u> </u>			
esti	mated tax payments made. Include any prior	year overpa	ayment allowed as a cre	dit.	3b	\$			
usir	ance due. Subtract line 3b from line 3a. In ng EFTPS (Electronic Federal Tax Payment Sy	ystem). See	instructions.		3с	T			
Caution: If v	you are going to make an electronic funds withdray	val (direct del	oit) with this Form 8868, se	e Form 8453-EO and	Form	8879-EO for payment			
instructions.		5,000							

Cat. No. 27916D

Part l	V Checklist of Required Schedules			
			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	V	
2	Is the organization required to complete Schedule B, Schedule of Contributors See instructions?	2	'	
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		V
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? If "Yes," complete Schedule C, Part II	_4	•	
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		V
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_		v
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	<u></u>	v
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		v
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, 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		v
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10	V	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	~	
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		,
С	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		V
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		~
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	~	
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	v	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	v	
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 and XII is optional	12b		V
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	<u> </u>	+
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, Parts I and IV.	14b		,
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		~
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		,
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 See instructions	17		<u>, </u>
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		~
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		,
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	<u> </u>	~
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b	<u> </u>	1
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	,	

Part	Checklist of Required Schedules (continued)			
		r	Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	~	
23	Did the organization answer "Yes" to Part VII, Section A, line 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	~	
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 lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		,
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	-	
C	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		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) 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		~
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		v
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		v
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		V
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, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		,
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		~
C	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		v
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		~
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		V
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		~
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		~
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? If "Yes," complete Schedule R, Part I	33		v
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	~	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	\vdash	~
b	If "Yes" to line 35a, 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		
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		v
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		V
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	38	V	
Part	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V	, .		
			Yes	No
1a b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 60 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	1		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	10	v	

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 17			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	~	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a_		~
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O .	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		~
b	If "Yes," enter the name of the foreign country ▶	N -0		`
-	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	32.30		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		V
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	đđ		V
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
va	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		~
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or	AL.		
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	A 10	a Na Sa	
а	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	7	<u> </u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	70	•	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7.		,
_	required to file Form 8282?	7c	3.5	
d	If "Yes," indicate the number of Forms 8282 filed during the year			,
9	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		~
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g		<u> </u>
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	79 7h		
h		1.67	17,	. :
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
^	Sponsoring organizations maintaining donor advised funds.	A-11		
9	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
a	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		-
10	Section 501(c)(7) organizations. Enter:	7 7 7 .	-15	***
10	Initiation fees and capital contributions included on Part VIII, line 12	(hiji)		٠.
a b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	7	7	v ·
11	Section 501(c)(12) organizations. Enter:		(<u>)</u>)	
''a	Gross income from members or shareholders	4.50		
_	Gross income from other sources (Do not net amounts due or paid to other sources	\$ 2.7		1.44
b	against amounts due or received from them.)			.7.
12a	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 12b	8,16	14.50	ē
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
_	Note: See the instructions for additional information the organization must report on Schedule O.	2.0- c	14.4	
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans	100	50	
С	Enter the amount of reserves on hand		1.45	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		V
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
,	excess parachute payment(s) during the year?	15		1
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		~
	If "Yes," complete Form 4720, Schedule O.			

Form 99	90 (2020)				1	Page 6			
Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change	s on S	Schedule O. (See in	struc	tions.			
	Check if Schedule O contains a response or note to any line in this Part VI					V			
Secti	on A. Governing Body and Management								
			ı	Service and	Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	35						
	If there are material differences in voting rights among members of the governing body, or								
	if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.								
b	Enter the number of voting members included on line 1a, above, who are independent .	1b	35						
2	Did any officer, director, trustee, or key employee have a family relationship or a business any other officer, director, trustee, or key employee?	elatio	onship with	2	1				
3	Did the organization delegate control over management duties customarily performed by or supervision of officers, directors, trustees, or key employees to a management company or or			3		_			
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?									
5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5									
6	Did the organization have members or stockholders?			6		~			
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		~			
b	Are any governance decisions of the organization reserved to (or subject to approva stockholders, or persons other than the governing body?			7b		~			
8	Did the organization contemporaneously document the meetings held or written actions un the year by the following:	derta	ken during						
а	The governing body?			8a	>				
b									
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot the organization's mailing address? If "Yes," provide the names and addresses on Schedule		reached at	9		~			
Secti	on B. Policies (This Section B requests information about policies not required by th		ernal Reven	ue C	ode.)				
539					Yes	No			
10a	Did the organization have local chapters, branches, or affiliates?			10a		~			
b	If "Yes," did the organization have written policies and procedures governing the activities o affiliates, and branches to ensure their operations are consistent with the organization's exem			10b					
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before	ore fili	ng the form?	11a	~				
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.								
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	V				
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			12b	~				
С	Did the organization regularly and consistently monitor and enforce compliance with the particle in Schedule O how this was done	oolicy 	? If "Yes,"	12c	~				
13	Did the organization have a written whistleblower policy?			13	~				
14	Did the organization have a written document retention and destruction policy?			14	~				
15	Did the process for determining compensation of the following persons include a review a independent persons, comparability data, and contemporaneous substantiation of the deliberation								
а	The organization's CEO, Executive Director, or top management official			15a	~				
b	Other officers or key employees of the organization			15b	~				
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).								
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or simil with a taxable entity during the year?			16a		V			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization								
	participation in joint venture arrangements under applicable federal tax law, and take steps to organization's exempt status with respect to such arrangements?	o saf	eguard the	16b					
Secti	on C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed ► KY								
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable			(Sec	tion 5	501(c)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that v Own website Another's website Upon request Other (explain on So	hedu	ile O)						
19	Describe on Schedule O whether (and if so, how) the organization made its governing docu and financial statements available to the public during the tax year.	ımen	ts, conflict o	finter	est p	olicy,			
20	State the name, address, and telephone number of the person who possesses the organization	n's b	ooks and red	cords	>				
	Monica Beckmann, (502)582-0122								

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

Check if Schedule O contains a response or note to any line in this Part VII

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. 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, and 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. See instructions for the order in which to list the persons above.

☐ Check this box if neither the organization no	r any relate	d org	aniz	atio	n c	ompe	nsa	ted any current	officer, director,	or trustee.
				- 55.	C)					
(A)	(B)				ition			(D)	(E)	(F)
Name and title	Average					e than o		Reportable	Reportable	Estimated amount
	hours per week		officer and a director/trustee)					compensation from the	compensation from related	of other compensation
	(list any	Indi or c	Inst	Officer	<u>₹</u>	Hig	Former	organization	organizations	from the
	hours for related	Individual trustee or director	Institutional trustee	cer	Key employee	Highest co	mer	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and related organizations
	organizations	tor tal	ona		흥	8 6				Telated Organizations
	below	uste	#		8	per				
	dotted line)	8	stee			Highest compensated employee				
					_	8	-			
Christen Boone	60.00							400 000		
President/CEO	1.00			~				193,750	0	8,850
JP Davis	60.00	1			١,					
Sr VP Development	0.00		-		~			150,445	0	11,679
Janie Martin	60.00								_	
CFO/COO	10.00			~				79,998	0	6,948
Barry Allen	0.50									
Board Member	0.00	-			-		-	0	0	0
James Allen	0.50								_	_
Board Member	0.00	~		-	_		-	0	0	0
Neville Blakemore	0.50									
Board Member	0.00	~	-	-	-		-	0	0	0
Campbell Brown	2.00								_	
Campaign Chair		~	-		-		-	0	0	0
Kristen Byrd	0.50								_	
Chair Investment Committee	0.00	~	-		-	-	-	0	0	0
Julia Carstanjen	0.50								_	
Board Member	0.00	~	-		\vdash		-	0	0	0
Carolle Jones Clay	0.50									
Chair Governance & Nominating	0.00	~	-		_			0	0	0
Sarah Davasher-Wisdom	0.50								_	
Board Member	0.00	~	-	-	-		₩	0	0	0
Charlie Farnsley	0.50							0		190
Board Member	0.00	~	-				_	0	0	0
Erica Fields	0.50									
Board Member	0.00	~	-	-	-	_	-	0	0	0
Ed Glasscock	0.50							March 1		Total Control
Board Member	0.00	~						0	0	0

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

	1	1			C)					
					ition				-	
(A)	(B)	(do not check more than one						(D)	(E)	(F)
Name and title	Average hours	box, unless person is both an officer and a director/trustee)						Reportable compensation	Reportable compensation	Estimated amount of other
	per week			_			<u> </u>	from the	from related	compensation
	(list any	Individual trustee or director	Institutional	Officer	Key employee	Highest compensated employee	Former	organization	organizations	from the
	hours for related	rec /idu	tric	ĕ	em		ner	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and related organizations
	organizations	현학	onal		oloy	a S				,
	below dotted line)	uste	trustee		8	per				
	dotted line)	ď	stee			sate				
Jon Goldberg	0.50			_						
Board Member	0.00	1						0	0	0
Jerilan Greene	0.50	<u> </u>		_			-	0		
Board Member	0.00	1						0	0	0
Greg Greenwood	1.00	_	_	_				0	0	
Chair Finance Committee	0.00	1						0	0	0
Ja Hillebrand	2.00	×						0	0	- 0
Chair of the Board	0.00	1						0	0	0
Mo McKnight Howe	0.50	•						0		
Board Member	0.00	1						0	0	0
Todd Klimek	0.50						_	•		
Board Member	0.00	1						0	0	0
Mark Kull	0.50									
Board Member	0.00	1						0	0	0
Gladys Lopez	0.50							-		
Board Member	0.00	1						0	0	0
Todd Lowe	0.50	1910)								
Past Board Chair	0.00	1						0	0	0
Brent McKim	0.50									
Board Member	0.00	1						0	0	0
Sabeen Nasim	0.50									
Board Member	0.00	~						0	0	0
Victoria Russell	0.50									
Chair Compensation Committee	0.00	~						0	0	0
Scott Schaftlein	0.50									
Board Member	0.00	~						0	0	0
Linda Schuster	0.50									
Co-Chair Community Impact Committee	0.00	V						0	0	0

Part	VII Section A. Officers, Directors, 1	rustees,	Key	Em	plo	yee	s, an	d F	lighest Compe	nsated Emplo	yees (contir	nued)
					(0	C)							
	(A)	(B)				ition			(D)	(E)		(F)	
	Name and title	Average					than o		Reportable	Reportable	Estim	ated am	ount
		hours					or/trust		compensation from the	compensation from related		of other opensati	ion
		per week (list any	or o	Ins	₽	.ĕ	em	Fo	organization	organizations		rom the	
		hours for	Individual or director	₹	Officer	Key employee	ploy	Former	(W-2/1099-MISC)	(W-2/1099-MISC)		nization	
		related organizations	ual t	iona		old.	8 6	,			related	organiz	ations
		below	Individual trustee or director	를		yee	npe						
		dotted line)	ee	Institutional trustee			Highest compensated employee						
							8						
Carl T		0.50											
	Member	0.00	~			-			0	0			0
	hompson	0.50	~							0			0
	Member	0.00	-			-			0	0			0
Joe Ve		0.50	~						0	0			0
	Member	0.50	•			\vdash			0	0			
	Beth Warner Member	0.00	~						0	0			0
_	Vheeler	0.50											
	Member	0.00	~						0	0			0
Terry	COLUMN WORKS	0.50											
	Member	0.00	~						0	0			0
-	Jackson	1.00											
	Member		~						0	0			0
Charle	s Ritter	1.00											
Board	Member		V						0	0			0
Kelly \	Vatson	0.50											
Co-Ch	air Community Impact	0.00	~						0	0			0
David	Wombwell	1.00											
Board	Member		~						0	0			0
		ļ	-						1,000				
							l			_			
1b	Subtotal			•	•	•	• •		424,193	0		2	27,477
C	Total from continuation sheets to Part			•	•	•			404 400				7 477
d	Total (add lines 1b and 1c)							2)	424,193	0 than \$100,000			27,477
2	reportable compensation from the organi		ו נט נו	1056	3 115	lea	above	3) W	no received mor	e man \$100,000	Oi		
-	reportable compensation from the organ	Zation										Yes	No
3	Did the organization list any former	officer dire	ector	tri	ıeta	ا م	(AV A	mn	lovee or highes	t compensated			
3	employee on line 1a? If "Yes," complete										3	2 20200000	~
4	For any individual listed on line 1a, is the										\$1858A100		
•	organization and related organizations												
	individual										4	~	
5	Did any person listed on line 1a receive of	r accrue c	ompe	nsa	tion	fro	m any	un/	related organiza	tion or individua			
	for services rendered to the organization	? If "Yes," o	comp	lete	Scl	hed	ule J i	for s	such person .		5		~
Secti	on B. Independent Contractors												
1	Complete this table for your five high	nest comp	ensat	ed	ind	epe	ndent	CC	ontractors that i	eceived more	than \$	100,0	00 of
	compensation from the organization. Rep	ort comper	rsatio	n fo	r the	e ca	lenda	r ye	ear ending with or	within the organ	nizatior	ı's tax	year.
	(A)								(B) Description of sen		(C		
-	Name and business add	iress						-	Description of ser	vices	Comper	sation	
None								-					
								\vdash					
								\vdash					
-								+					
2	Total number of independent contractor	ors (includi	na h	ut r	not	limi	ted to) th	nose listed above	e) who			
2	received more than \$100,000 of compens							. u	n	·, ·····			

Part	VIII	Statement of Rec Check if Schedule			enon	see or note to an	y line in this Pa	ort VIII		
		Check ii Schedule	0 00	ilianis a re	spor	ise of flote to all	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
S S	1a	Federated campaig	ns .		1a	0	12 mg 2 46 mg			
unt	b	Membership dues			1b	0				
Contributions, Gifts, Grants and Other Similar Amounts	С	Fundraising events			1c	0				
Contributions, Gifts, Grants and Other Similar Amounts	d	Related organization			1d	0				
S, E	е	Government grants			1e	193,513				
Sign	f	All other contribution								
the th		and similar amounts no			1f	9,085,010				
	g	Noncash contribution			1g	\$ 0				
a G	h	Total. Add lines 1a-					9,278,523			
						Business Code				
8	2a	NeXt Program				611430	7,800	7,800	0	0
Program Service Revenue	b								11	
gram Ser Revenue	С									
ran ev	d									
. go	е									
₫	f	All other program se					1,579	1,579	0	0
	g	Total. Add lines 2a-					9,379			
	3	Investment income other similar amoun					2,227,701	2,227,701	0	o
	4	Income from investr					0	0	0	0
	5				8		0	0	0	0
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		(i) Rea		(ii) Personal	151,510,250,46			
	6a	Gross rents	6a	7	1,182	0				
	b	Less: rental expenses	6b	5	0,079	0				
	C	Rental income or (loss)			1,103	0				
	d	Net rental income o	r (loss				21,103	21,103	0	0
	7a	Gross amount from		(i) Securit	ies	(ii) Other				
		sales of assets		24	4,656	0		ea Wall este ob	and the state of t	
•		other than inventory	7a							
Revenue	D	Less: cost or other basis and sales expenses .	7b	2 27	2,010	o				
èVe	С	Gain or (loss)	7c		7,354	0				AR NEW STREET
	d	Net gain or (loss)				▶	-2,127,354	-2,127,354	0	0
Other	8a	Gross income from	m fu	ndraising						
ō		events (not including		0						
		of contributions re								
		1c). See Part IV, line			8a	1				
	b	Less: direct expens			8b					
		Net income or (loss)			g eve	nts ▶				
	9a	Gross income 1 activities. See Part			9a					ang a wantari
	h	Less: direct expens			9b					
		Net income or (loss)			-	es >				
		Gross sales of in								
		returns and allowan			10a					
	b	Less: cost of goods	sold		10b			All free property and		
	С	Net income or (loss)) from	sales of ir	vento	ory ▶				Remonitor State and State
ns	A00-11 Mark					Business Code			100000000000000000000000000000000000000	
Miscellaneous Revenue	11a									
scellaned Revenue	b									
Rev	0	All other revenue					-			
ž	d	All other revenue Total. Add lines 11a	 a_11^			▶	0			
	12	Total revenue. See					9,409,352	130,829	0	0
							.1.5.1052			<u> </u>

Part IX Statement of Functional Expenses

ection 501(c)(3) and 501(c)(l) organizations must complete all colum	nns. All other organizations must complete column (A).
------------------------------	--	--

	Check if Schedule O contains a response	or note to any line	in this Part IX .		🗆
	t include amounts reported on lines 6b, 7b, , 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 domestic organizations and domestic governments. See Part IV, line 21 .	3,969,027	3,969,027		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	30,000	30,000		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
•	trustees, and key employees	292,526	120,213	69,750	102,563
c	Compensation not included above to disqualified	272/020	120/210		
6	persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)			0	
7	Other salaries and wages	665,211	228,043	118,274	318,894
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	68,446	24,675	10,629	33,142
10	Payroll taxes	72,954	27,134	14,405	31,415
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
C	Accounting	114,052	0	114,052	0
d	Lobbying [
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) .	101,494	67,526	4,800	29,168
12	Advertising and promotion				
13	Office expenses				
14	Information technology	130,442	53,098	15,791	61,553
15	Royalties	13,620	0	0	13,620
16	Occupancy	84,612	31,747	16,502	36,363
17	Travel	9,171	3,603	1,441	4,127
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	8,000	1,801	4,325	1,874
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .			2 222	0.407
23	Insurance	21,527	8,457	3,383	9,687
24	Other expenses, Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
	O. D. San	400.000	400.000		0
a	Cultural Pass	102,908	102,908	0	
b	DeVos Capacity Building	150,000	150,000 102,439	0	0 32,111
c d	Events & Performances, Arts Showcase and AITA	134,550 54,426	43,547	573	10,306
e	Printing & Marketing	134,188	66,993	19,937	47,258
25	All other expenses Total functional expenses. Add lines 1 through 24e	6,157,154	5,031,211	393,862	732,081
26	Joint costs. Complete this line only if the	0,107,104	3,031,211	373,002	102,001
	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Par	tX		🗆
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		1	
	2	Savings and temporary cash investments	1,147,646	2	1,368,685
	3	Pledges and grants receivable, net	4,217,686	3	4,919,481
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B).	45.7	6	Section 1
S	7	Notes and loans receivable, net	191,812	7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges	20,881	9	63,582
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 2,115,853			
	b	Less: accumulated depreciation 10b 1,589,639	594,618	10c	526,214
	11	Investments—publicly traded securities	1,333,052		3,500,130
	12	Investments—other securities. See Part IV, line 11	1,000,002	12	0,000,100
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	7,505,695	16	10,378,092
	17	Accounts payable and accrued expenses	145,203	17	162,543
	18	Grants payable	565,300	18	745,733
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
abi		controlled entity or family member of any of these persons		22	
Ë	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 D	208,500	25	64,551
	26	Total liabilities. Add lines 17 through 25	919,003	26	972,827
seo		Organizations that follow FASB ASC 958, check here ▶ ✓ and complete lines 27, 28, 32, and 33.	ing and a second		inger var en
a	27	Net assets without donor restrictions	4,161,688	27	5,512,622
Ba	28	Net assets with donor restrictions	2,425,004		3,892,643
Net Assets or Fund Balance		Organizations that do not follow FASB ASC 958, check here ▶ □			
2	20	and complete lines 29 through 33.		29	
ts	29	Capital stock or trust principal, or current funds		30	
SSe	30	Retained earnings, endowment, accumulated income, or other funds		31	
Ä	31	Total net assets or fund balances	4 504 400	32	0.405.245
Net	32 33	Total liabilities and net assets/fund balances	6,586,692		9,405,265
_	00	Total liabilities and het assets/fully baldiffes	7,505,695	33	10,378,092

_	4	•
Page	1	4

Form 98	90 (2020)			ı u	90
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		•		~
1	Total revenue (must equal Part VIII, column (A), line 12)			9,40	9,352
2	Total expenses (must equal Part IX, column (A), line 25)			6,15	7,154
3	Revenue less expenses. Subtract line 2 from line 1			3,25	2,198
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))			6,58	6,692
5	Net unrealized gains (losses) on investments			-3	9,724
6	Donated services and use of facilities			10	6,321
7	Investment expenses				0
8	Prior period adjustments				0
9	Other changes in net assets or fund balances (explain on Schedule O)			-50	0,222
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))			9,40	5,26 5
Part	XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII				
		688	5995	Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other	_			
	If the organization changed its method of accounting from a prior year or checked "Other," explain	ın			
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	distribution.	~
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled	or			
	reviewed on a separate basis, consolidated basis, or both:				
200	Separate basis Consolidated basis Both consolidated and separate basis			~	1999
b	Were the organization's financial statements audited by an independent accountant?	5500	2b	rigilis.	Michael
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on	a			
	separate basis, consolidated basis, or both:				
	✓ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight		2c	7	
	the audit, review, or compilation of its financial statements and selection of an independent accountant? .	1.0000.00	10		
	If the organization changed either its oversight process or selection process during the tax year, explain of	on			
	Schedule O.	ho			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	ile .	3a		"
	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		a		_
a	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits.	3	3b		
	Toquirou addit of addito, oxplain willy on contodulo o and decembe any stope taiton to and age duent addito i			990	(2020)
			. 0111		12020

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

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.

► Attach to Form 990 or Form 990-EZ.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Name	of the organization					Employer identification	number
FUN	UND FOR THE ARTS INC 61-0479626						79626
Pai	tl Reason for Public Cha	rity Status. (All	l organizations mus	t comple	ete this p	oart.) See instruction	ons.
The o	organization is not a private founda	ition because it i	s: (For lines 1 through	12, chec	k only or	ne box.)	
1	A church, convention of church	hes, or associati	on of churches descri	ibed in se	ection 17	0(b)(1)(A)(i).	
2	A school described in section	170(b)(1)(A)(ii).	(Attach Schedule E (F	orm 990	or 990-E	Z).)	
3	☐ A hospital or a cooperative hos	spital service org	ganization described in	n sectior	170(b)(1	I)(A)(iii).	
4	A medical research organization hospital's name, city, and state		onjunction with a hosp	oital desc	ribed in s	section 170(b)(1)(A)	(iii). Enter the
5	An organization operated for section 170(b)(1)(A)(iv). (Com		college or university	owned o	r operate	ed by a government	al unit described in
6	☐ A federal, state, or local govern	nment or govern	mental unit described	l in secti o	on 170(b)	(1)(A)(v).	
7	An organization that normally described in section 170(b)(1)			port from	a gover	nmental unit or from	n the general public
8	☐ A community trust described in	n section 170(b)	(1)(A)(vi). (Complete I	Part II.)			
9	An agricultural research organi or university or a non-land-gra university:	nt college of agr	iculture (see instructio	ons). Ente	r the nan	ne, city, and state of	the college or
10	An organization that normally receipts from activities related support from gross investment acquired by the organization a	to its exempt full income and uni	nctions, subject to ce related business taxal	rtain exce ble incom	eptions; a ne (less se	and (2) no more than ection 511 tax) from	33 ¹ / ₃ % of its
11	An organization organized and	operated exclus	sively to test for public	c safety.	See sect i	ion 509(a)(4).	
12	An organization organized and						
	of one or more publicly support Check the box in lines 12a thro						
а	Type I. A supporting organ the supported organization supporting organization. You	(s) the power to	regularly appoint or e	lect a ma	jority of t		
b	Type II. A supporting organ control or management of organization(s). You must	the supporting o	rganization vested in	the same			
C	Type III functionally integ its supported organization(ally integrated with,
d	Type III non-functionally in that is not functionally integrequirement (see instructionally integrated).	grated. The orga	nization generally mus	st satisfy	a distribu	ution requirement an	
е	Check this box if the organ functionally integrated, or						e II, Type III
f	Enter the number of supported of	organizations .					
g	Provide the following information	n about the supp	orted organization(s).				
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
				Yes	No		
(A)							
(B)							
(C)							
(D)							
(E)							
				200 AUGUS 2	ZERSOLE AND ESTA		

Part II Support Schedule for Organizations Described in Sections 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 organization fails to qualify under the tests listed below, please complete Part III.)

	on A. Public Support				(1 2 2 4 2)	() 0000	
	dar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	0.744.000	0.005.440	7.45.400	4 075 242	0.070.500	40 (27 022
2	Tax revenues levied for the	8,711,920	8,895,613	7,665,633	6,075,343	9,278,523	40,627,032
2	organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge					Е	
4	Total. Add lines 1 through 3	8,711,920	8,895,613	7,665,633	6,075,343	9,278,523	40,627,032
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)						
6	Public support. Subtract line 5 from line 4	100 000 1000					40,627,032
	on B. Total Support		The colors is a common section and an experience		1111		
	dar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7	Amounts from line 4	8,711,920	8,895,613	7,665,633	6,075,343	9,278,523	40,627,032
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	106,303	115,133	145,107	148,305	2,298,883	2,813,731
9	Net income from unrelated business activities, whether or not the business is regularly carried on		·				
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						43,440,763
12	Gross receipts from related activities, etc			1.1.7.1.7	3 13 3 3 3	12	
13	First 5 years. If the Form 990 is for the				The state of the s		
	organization, check this box and stop he						🕨 📙
_	on C. Computation of Public Suppor			4.4 1 (0)		44	
14	Public support percentage for 2020 (line					14 15	93.52 %
15	Public support percentage from 2019 Sci 331/3% support test—2020. If the organ	nedule A, Part	check the hove				98.4 %
16a	box and stop here. The organization qua						
b	331/3% support test—2019. If the organi						
Б	this box and stop here. The organization						
179	10%-facts-and-circumstances test—2						
174	10% or more, and if the organization metal VI how the organization meets the organization	neets the facts facts-and-circ	-and-circumst umstances tes	ances test, ch st. The organiz	eck this box a ation qualifies	nd stop here. as a publicly	Explain in
b	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organization Part VI how the organization meets the organization	on meets the fa e facts-and-cir	acts-and-circul cumstances te	mstances test, est. The organi	check this bo zation qualifies	x and stop he s as a publicly 	re. Explain supported ▶ □
18	Private foundation. If the organization						
-	instructions		<u> </u>	<u></u>			

	le A (Form 990 or 990-EZ) 2020	5		- F00(-\(0\)			Page 3
Part	Support Schedule for Organiza (Complete only if you checked the				nization failer	to qualify u	oder Part II
	If the organization fails to qualify						idei Faitti.
Secti	on A. Public Support	andor the te	old flored box	ott, piodeo oc	on pioco i airc	,	
	dar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(-)					
2	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						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons .						
b	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						
8 8	Add lines 7a and 7b						
	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6						•
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C 11	Add lines 10a and 10b						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the organization, check this box and stop he			, third, fourth,			
Secti	on C. Computation of Public Suppor						
15 16	Public support percentage for 2020 (line & Public support percentage from 2019 Sch						<u>%</u> %
	on D. Computation of Investment Inc						
17	Investment income percentage for 2020 (line 10c, colun	nn (f), divided l				%
18	investment income percentage from 2019					18	%
19a	331/3% support tests—2020. If the organi 17 is not more than 331/3%, check this box						
b	331/3% support tests – 2019. If the organiz line 18 is not more than 331/3%, check this is	ation did not o	heck a box on	line 14 or line	19a, and line 16	is more than	33½%, and

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

20

Part IV

Supporting Organizations

Section A. All Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	За		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
C	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part Vi what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a_	. 12	
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to		- 13	

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).

anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.

- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in **Part VI**.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

8

9a

9b

9c

10a

10b

Schedu	18 A (Form 990 or 990-Ez) 2020			Page 3
Part	Supporting Organizations (continued)			
44	Line the executed and the executed and the executed by the following page and		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		,	
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?	11a		
h	A family member of a person described in line 11a above?	11b		
	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide	HB		
·	detail in Part VI.	11c	'	!
Secti	on B. Type I Supporting Organizations	1		<u>. </u>
	on burger and organizations	-	Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
•	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	L	
2	Did the organization operate for the benefit of any supported organization other than the supported] ,		
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.			
Cash		2		<u> </u>
Secu	on C. Type II Supporting Organizations		Yes	No
4	Many a majority of the avantization of disectors by twistons during the toy year also a majority of the disectors		105	NO
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1	.	İ
Secti	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax		•	i .
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			l
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		<u> </u>
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have			
	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	٠,		•
Section	on E. Type III Functionally Integrated Supporting Organizations	3	<u> </u>	L
1	Check the box next to the method that the organization used to satisfy the integral Part Test during the year (see i	inetru	ction	e)
' a	The organization satisfied the Activities Test. Complete line 2 below.	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	J.,O.	~/.
b	☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity	(see in	struc	tions).
2	Activities Test. Answer lines 2a and 2b below.	•	Yes	
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
-	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	'	1	
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a	<u> </u>	
b	Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in	١		
_	these activities but for the organization's involvement.	2b	 	
3	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i>	1		
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI .	20		
h	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	3a	 	
b	of its supported organizations? If "Vos" describe in Part VI the role played by the organization in this regard	26		

Part				
1	Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ	j tru izat	st on Nov. 20, 1970 (<i>explai</i> ions must complete Sectio	ns A through E.
Sect	ion AAdjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5_		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
88	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8_		
Sect	ion B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
C	Fair market value of other non-exempt-use assets	10		
d	Total (add lines 1a, 1b, and 1c)	1đ		
е	Discount claimed for blockage or other factors (explain in detail in Part VI):	10		
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
- 5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	tion C—Distributable Amount	•		Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	1,348.	
4	Enter greater of line 2 or line 3,	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function (see instructions).	_	integrated Type III support	ing organization

Part	Type III Non-Functionally Integrated 509(a)(3) Supporting Organi	zations (continued	<u>) </u>	
Sect	ion D-Distributions			С	urrent Year
1	Amounts paid to supported organizations to accomplish			1	
2	Amounts paid to perform activity that directly furthers exe	empt purposes of suppo			
	organizations, in excess of income from activity			2	400
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga		3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required			5	
<u>6</u>	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.	le the appropriation to use		7	
8	Distributions to attentive supported organizations to whic (provide details in Part VI). See instructions.	in the organization is res	•	В	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			0	
-10	Ente o amount divided by line o amount		(ii)		(iii)
Sect	ion E—Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2020		istributable ount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020 (reasonable cause required—explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2020		er a company		
а	From 2015				
b	From 2016				
С	From 2017		·		
d	From 2018				
e	From 2019	And The Control of			
f	Total of lines 3a through 3e				
9	Applied to underdistributions of prior years			_	·
<u>h</u>	Applied to 2020 distributable amount				
<u> </u>	Carryover from 2015 not applied (see instructions)				· · · · · · · · · · · · · · · · · · ·
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from Section D, line 7: \$				
	Applied to underdistributions of prior years				<u> </u>
<u>a</u> b	Applied to underdistributions of prior years Applied to 2020 distributable amount				
	Remainder, Subtract lines 4a and 4b from line 4.			<u> </u>	
	Remaining underdistributions for years prior to 2020, if				
5	any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions.			,	·
6	Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j and 4c.				<u>-</u> .
8	Breakdown of line 7:				
а	Excess from 2016				
b	Excess from 2017				
С	Excess from 2018				
d	Excess from 2019				
е	Excess from 2020				

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
•	
•	

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- · Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.

• Se	ection 501(c)(3) organizations	that have NOT filed Form 5768 (election	n under section 501	(h)): Complete	e Part II-B. Do r	not complete Part II-	Α.
	organization answered "Yes See separate instructions), t	," on Form 990, Part IV, line 5 (Proxy hen	/ Tax) (See separate	instruction	s) or Form 990	-EZ, Part V, line 35	c (Proxy
• Se	ection 501(c)(4), (5), or (6) orga	anizations: Complete Part III.					
Name	of organization				Employer ider	ntification number	
FUND	FOR THE ARTS INC					61-0479626	
Part	I-A Complete if the	e organization is exempt und	er section 501(d	c) or is a s	ection 527 o	organization.	
1	Provide a description of definition of "political car	the organization's direct and in	direct political car	mpaign act	ivities in Part	IV. (See instruct	ions for
2		y expenditures (See instructions)			> \$		
3		cal campaign activities (See instru					
Part		e organization is exempt und					
1		excise tax incurred by the organiza			> \$		
2		excise tax incurred by organization					
3		ed a section 4955 tax, did it file Fo	The state of the s			Yes	No
4a	Was a correction made?					🗌 Yes	☐ No
b	If "Yes," describe in Part	100 C C C C C C C C C C C C C C C C C C				·	
Part	I-C Complete if the	e organization is exempt und	er section 501(d	c), except	section 501	(c)(3).	
1		ly expended by the filing organiz					
0		filing organization's funds contrib			Ψ		
2		vities					
3		expenditures. Add lines 1 and 2					
4		file Form 1120-POL for this year				Yes	No
5	Enter the names, address	ses and employer identification nu	mber (EIN) of all se	ection 527 p	olitical organi	zations to which t	he filing
		ents. For each organization listed,					
		entributions received that were pro					
	as a separate segregated	fund or a political action committe	e (PAC). If addition	ial space is	needed, provi	de information in F	art IV.
	(a) Name	(b) Address	(c) EIN		nt paid from	(e) Amount of pol	
					ganization's one, enter -0	contributions received promptly and directions of the contributions are contributed as a contribution of the contributions are contributions.	
					•	delivered to a sep	
						political organiza If none, enter -	
2.2							
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							

_	
Page	4

SCH	edule C (Form 990 or 990-EZ) 2020					1 ago 🖴
Pa	rt II-A Complete if the organization section 501(h)).	is exempt	under section 50	01(c)(3) and file	d Form 5768 (ele	ection under
Α	Check ► ☐ if the filing organization belongs address, EIN, expenses, and shape of the control o				liated group memb	er's name,
R	Check Filing organization checke					
	Limits on Lobby				(a) Filing	(b) Affiliated
	(The term "expenditures" mea)	organization's totals	group totals
1	a Total lobbying expenditures to influence p	ublic opinion	(grassroots lobbyi	ng)		
	b Total lobbying expenditures to influence a	legislative be	ody (direct lobbying	g)		
	c Total lobbying expenditures (add lines 1a					
	d Other exempt purpose expenditures					
	e Total exempt purpose expenditures (add I					
	f Lobbying nontaxable amount. Enter the columns.	e amount f	rom the following	j table in both		
	If the amount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amoun	t is:	7	
	Not over \$500,000	20% of the ar	nount on line 1e.			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	s 15% of the excess	over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000		10% of the excess			
	Over \$1,500,000 but not over \$17,000,000		s 5% of the excess o	ver \$1,500,000.		
	Over \$17,000,000	\$1,000,000.				
	g Grassroots nontaxable amount (enter 25%	•				
	h Subtract line 1g from line 1a. If zero or les					
	 Subtract line 1f from line 1c. If zero or less If there is an amount other than zero or 	-	th or line 11 did		file Form 4720	
	reporting section 4911 tax for this year?		· · · · · ·	-		Yes No
	(Some organizations that made a sect	ion 501(h) el	Period Under Sec ection do not hav ructions for lines	e to complete all	of the five colum	ns below.
	Lobbying E	xpenditures	During 4-Year Av	eraging Period	T	
	Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
2	ta Lobbying nontaxable amount					
	b Lobbying ceiling amount (150% of line 2a, column (e))					
	c Total lobbying expenditures					
	d Grassroots nontaxable amount					
	e Grassroots celling amount (150% of line 2d, column (e))					
	f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2020

	(election under section 501(h)).				(h)	
	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed iption of the lobbying activity.	Yes	No	А	(b) moun	t
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?		~			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		~			
С	Media advertisements?		~			
d	Mailings to members, legislators, or the public?		~			
е	Publications, or published or broadcast statements?		~			
f	Grants to other organizations for lobbying purposes?		~			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		~			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		~			
i ·	Other activities?	1	A22611			3,590
J	Total. Add lines 1c through 1i	A SAME			2	3,590
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	essillo	/			
b	If "Yes," enter the amount of any tax incurred under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		King Angle	8.04		
	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	2)(5)	or se	ction		(855)
	501(c)(6).	٠,(٥), ١	JI 30	Otion		
	55 (UNIT)				Yes	No
1 2 3	Were substantially all (90% or more) dues received nondeductible by members?			1 2 3		
Part	III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" C answered "Yes."	c)(5), ()R (b)	or se Part	ction III-A,	line 3	3, is
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid).					
а	Current year		2a			
b	Carryover from last year		2b			
С	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of					
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobble and political expenditure next year?		MACE.	1		
5	Taxable amount of lobbying and political expenditures (See instructions)		5			
Part		• •	3			
Provid 2 (See Sched	e the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gr instructions); and Part II-B, line 1. Also, complete this part for any additional information. Iule C, Part II-B, Line 1 - Fund for the Arts utilized the professional services of a government strategist to	advoc	ate fo	r public	fundi	ing
	led to the State and Local governments by the American Rescue Plan Act to support the arts and culture ne Kentucky Legislative Ethics Commission. Funds used for these expenditures were restricted by the d					<u>u</u>

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2020

Open to Public Inspection

Employer identification number Name of the organization 61-0479626 **FUND FOR THE ARTS INC** Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990. Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 2 Aggregate value of contributions to (during year) . 3 Aggregate value of grants from (during year) . . Aggregate value at end of year 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 ☐ Yes ☐ No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used 6 only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose ☐ Yes ☐ No **Conservation Easements.** Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). ☐ Preservation of land for public use (for example, recreation or education) ☐ Preservation of a historically important land area ☐ Preservation of a certified historic structure Protection of natural habitat ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation Held at the End of the Tax Year easement on the last day of the tax year. 2a 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 \$_____ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

Part	Organizations Maintaining	Collections of	Art, Historic	al Treasures	s, or Ot	her Similar A	ssets (continu	ued)
3	Using the organization's acquisition, collection items (check all that apply)		her records, o	check any of the	ne follov	ving that make	significant use	of its
а	☐ Public exhibition		d 🗌 L	oan or exchan	ge progr	ram		
b	☐ Scholarly research		e □ C	ther				
С	☐ Preservation for future generations	3						
4	Provide a description of the organiza XIII.	tion's collections a	and explain h	ow they furthe	r the org	ganization's exe	mpt purpose ir	n Part
5	During the year, did the organization assets to be sold to raise funds rathe] No
Part								
	Complete if the organization 990, Part X, line 21.			* *		<u> </u>		m
1a	Is the organization an agent, trustee included on Form 990, Part X?] No
b	If "Yes," explain the arrangement in F	art XIII and comple	ete the followi	ng table:				
	North Cole And Cole A						Amount	
С	Beginning balance				10			
d	Additions during the year				1d			
е	Distributions during the year				1e			
f	Ending balance				1f			
2a	Did the organization include an amou							」No
	If "Yes," explain the arrangement in F	art XIII. Check here	e if the explan	ation has beer	provide	ed on Part XIII .		
Par		anawarad "Vaa"	on Form Of	O Dort IV lin	0.10			
	Complete if the organization	(a) Current year	(b) Prior yea			(d) Three years bad	ck (e) Four years	book
4	Designing of year belones							
1a	Beginning of year balance	7,603,190	7,743		769,215	7,573,82	DAY.	4,695
b	Contributions	32,052	5	000	0		0	0
С	Net investment earnings, gains, and	0.440.474				F00.01	-,	0.004
	losses	2,169,671			379,079	582,35		8,324
d	Grants or scholarships	370,197	370	951	369,953	354,67	35	4,784
е	Other expenditures for facilities and							0
	programs	30,147	24	0 071	35,062	32,29	0 2	4,409
f	End of year balance		7,586		743,279	7,769,21	and the second s	3,826
9 2	Provide the estimated percentage of						15 7,57	3,020
a	Board designated or quasi-endowme		u balance (iii) 1 %	e ig, coluiiii (ajj Helu i	as.		
b			70					
C	Term endowment ► 1.1 %	8.9 %						
·	The percentages on lines 2a, 2b, and		nn%					
2-				n that are hald	and ad	ministered for t	ho	
3a	Are there endowment funds not in the organization by:	e possession of th	e organizatio	n that are held	and ad	ministered for t	Yes	No
	(i) Unrelated organizations						3a(i) 🗸	
	(ii) Related organizations						3a(ii)	V
b	If "Yes" on line 3a(ii), are the related of	vaanizatione lieted	as required o	n Schedule R	,		3b	_
4	Describe in Part XIII the intended use						OD	
Part			il 3 chaowine	in lanas.				
ı aı	Complete if the organization		on Form 99	0 Part IV lin	e 11a	See Form 990	Part X line	10.
	Description of property	(a) Cost or ot		Cost or other basis		Accumulated	(d) Book value	
	Description of property	(investme		(other)		epreciation	(a) Dook value	-13
1a	Land		0	0				0
b	Buildings	140	0	1,665,250	VALUE AND DESCRIPTION OF THE	1,185,502	47	9,748
c	Leasehold improvements	•	0	0		0		0
d	Equipment		0	450,603	_	404,137	4	6,466
e	Other		0	430,003		0		0
	Add lines 1a through 1e. (Column (d)	must equal Form 95					52	6,214

Part VII	Investments - Other Securities. Complete if the organization answered "Yes" on Form 990, Part	tily line 11h See I	Form 990 F	Part Y line 12
si les series se		(b) Book value		hod of valuation:
	(a) Description of security or category (including name of security)	(b) Book value		of-year market value
(1) Financial		•		
(2) Closely h	eld equity interests	•		
(3) Other				
(C)				
(D)				
(E)				
(F)				
(G) (H)				TO THE TOTAL PROPERTY.
	mn (b) must equal Form 990, Part X, col. (B) line 12.) . ▶			
Part VIII	Investments—Program Related.			
T die Viii	Complete if the organization answered "Yes" on Form 990, Part	t IV. line 11c. See I	Form 990. F	Part X. line 13.
	(a) Description of investment	(b) Book value	(c) Met	hod of valuation: -of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col. (B) line 13.) . ▶			
Part IX	Other Assets. Complete if the organization answered "Yes" on Form 990, Par	t IV, line 11d. See	Form 990, F	Part X, line 15.
	(a) Description			(b) Book value
(1)				
(2)				1
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	mn (b) must equal Form 990, Part X, col. (B) line 15.)			
Part X	Other Liabilities. Complete if the organization answered "Yes" on Form 990, Parline 25.			990, Part X,
1.	(a) Description of liability			(b) Book value
	ncome taxes			0
	e for Employee Retention Credits			64,551
(3)				•
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colu	mn (b) must equal Form 990, Part X, col. (B) line 25.)		. ▶	64,551
2. Liability fo	r uncertain tax positions. In Part XIII, provide the text of the footnote to the org	anization's financial st	atements that	t reports the
organization	's liability for uncertain tax positions under FASB ASC 740. Check here if the te	ext of the footnote has	been provide	d in Part XIII . 🔟

Part	Reconciliation of Revenue per Audited Financial Statem Complete if the organization answered "Yes" on Form 990,			Return.	
1	Total revenue, gains, and other support per audited financial statements			1	8,893,203
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				0,073,203
a	Net unrealized gains (losses) on investments	2a	-39,724		
b	Donated services and use of facilities	2b	279,010		
c	Recoveries of prior year grants	2c	0		
d	Other (Describe in Part XIII.)		0		
e	Add lines 2a through 2d			2e	239,286
3	Subtract line 2e from line 1		1	3	8,653,917
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			5000	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	0		
b	Other (Describe in Part XIII.)	4b	755,435		
С	Add lines 4a and 4b			4c	755,435
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	12.)		5	9,409,352
Part				r Returi	٦.
	Complete if the organization answered "Yes" on Form 990,	Part I	/, line 12a.		
1	Total expenses and losses per audited financial statements			1	6,329,843
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	r 1			
а	Donated services and use of facilities	2a	172,689		
b	Prior year adjustments	2b	0		
С	Other losses	2c	0		
d	Other (Describe in Part XIII.)	2d	0		
е	Add lines 2a through 2d			2e	172,689
3	Subtract line 2e from line 1	11.		3	6,157,154
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	820			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	0		
b	Other (Describe in Part XIII.)	4b	0		
С 5	Add lines 4a and 4b			4c	0
Part		e 10.)		5	6,157,154
AND THE STATE OF	le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a an	d 4. D	art IV lines 1h and 2h	Port V I	ing 4: Port V line
	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part				
	lule D, Part V, Line 4 - The purpose of the Bingham Endowment (\$9,109,487) is	70	and the second s		
	on of supporting the arts community of Metro Louisville. The purpose of the W				
	plarship to assist pre-college age students in pursuing advanced studies in the				
	se of the Allen Cowen Innovation Fund for the Advancement of the Arts (\$136)				
	istrators in pursuing innovative professional development or educational opp				
	ville arts community. The purpose of the Barbara Sexton Smith Education Enh				
	ves which utilize the arts.			J-L	
Sched	lule D, Part X, Line 2 - The Fund has received a determination letter from the In	ternal	Revenue Service indica	ting that	it is exempt
	ncome taxes under IRC Section 501(c)3 and is classified as an organization th				
requir	ed to file a Return of Organization Exempt from Income Tax (Form 990) with th	e IRS.	The Fund evaluates the	recognit	ion and
measu	rement of uncertain income tax positions using a "more-likely-than-not" appr	oach a	nd has determined that	no mater	ial adjustment for
incom	e tax uncertainties or unrecognized tax benefits is required.				
Sched	ule D, Part XI, Line 4b - Partnership Gifts: \$255,213 Allow for Doubtful Accoun	ts: \$50	0,222		

SCHEDULE

(Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

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

▶ Attach to Form 990.

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OMB No. 1545-0047

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, % □ Employer identification number ✓ Yes 61-0479626 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and ► Go to www.irs.gov/Form990 for the latest information. the selection criteria used to award the grants or assistance?

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. the selection criteria used to award the grants or assistance? Part I General Information on Grants and Assistance FUND FOR THE ARTS INC Part II

	Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	recipient that	received more th	ian \$5,000. Part I	I can be duplica	ted if additional sp	pace is needed.	
1	(a) Name and address of organization or government	(p) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(d) Amount of non- cash assistance (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
Œ	(1) Sch I, Stmt 1							
(2)								
ල								
4								
(2)						- 1		
9								
8								
8)								
6								
(10)								
(11)								
(12)								
ი ო	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table	01(c)(3) and gor anizations liste	vernment organizati d in the line 1 table	tions listed in the li	ine 1 table			63 • • • •

Schedule I (Form 990) 2020

Cat. No. 50055P

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Page 2

Schedule I (Fo	chedule I (Form 990) 2020
Part III	Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1 See Schedule I, Part IV, Statement 2					
2					
8					
4					
5					
9					
7					
Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	the information r	equired in Part I, lin	e 2; Part III, column	(b); and any other additi	onal information.
schedule I, Part I, Line 2 - Fund for the Arts makes grant awards based on competitive grant application processes where grant applicants apply for specific grant awards based on dentified criteria. Grant review committees review the applications according to the specified criteria and make recommendations for the grant awards. Monitoring is done through	t awards based on c pplications accordi	ompetitive grant applic ng to the specified crite	ation processes where ria and make recomme	grant applicants apply for sendations for the grant award	pecific grant awards based on is. Monitoring is done through
equired project/operation completion and impact of funding (i.e. outcome reporting) according to executed grant agreements. Additional specific follow-up, if any, is determined based on he size of grant, purpose and knowledge of the grantee organization.	nding (i.e. outcome r organization.	eporting) according to	executed grant agreen	nents. Additional specific foll	ow-up, if any, is determined based on

Schedule I (Form 990) 2020

Schedule I, Part IV, Statement 1

Form: Schedule I (2020)

EIN: 61-0479626

Page: 1

Part II, Line 1

Description of Grants and Other Assistance to Governments and Organizations in the	e United States
--	-----------------

		Recipient EIN	Amt. of cash grant	Amt. of non cash assi
Name and address	Academy of Music Production	37-1447840	44,845	
	700 West Main Street			
	Louisville, KY 40202			
RC code section	501 (c)3			
Method of valuation				
Desc. of Non-Cash Asst.				
urpose of grant	Sustaining Impact Grant, ArtsMatch, Partnership Grants			
Name and address	Actors Theatre of Louisville	61-0645030	650,682	
	315 West Main Street			
	Louisville, KY 40202			
RC code section	501 (c)3			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	Sustaining Impact Grant, Partnership Grants, Cultural Pass			
Name and address	Americana Community Center	61-1251306	20,000	
	4801 Southside Drive			
	Louisville, KY 40214			
RC code section	501 (c)3			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	Awards in the Arts			
Name and address	Art Work Empowerment	47-2881625	17,275	
	On the Move Art Studio			
	625 High Street			
	Paris, KY 40361			
RC code section	501 (c)3			
Method of valuation				
Desc. of Non-Cash Asst.	A.4.18.4.L			
Purpose of grant	ArtsMatch			
Name and address	Arts Association of Oldham County	61-1350136	11,084	
	104 Main Street			
	LaGrange, KY 40031			
IRC code section	501 (c)3			
Method of valuation Desc. of Non-Cash Asst.				
Purpose of grant	Sustaining Impact Grant			
Name and address	Arts Council of So Indiana	35-1383333	8,150	
	820 East Market Street	05 700000	5,.00	
	New Albany, IN 47150			
IRC code section	501 (c)3			
Method of valuation	551 (5)5			
Desc. of Non-Cash Asst.				
Purpose of grant	Partnership Grants, Cultural Pass			
Name and address	Bernheim Arboretum and Research	61-0444651	6,000	
wiid kuulogo	Isaac W Bernheim Foundation		-,-35	
	2499 Clermont Road			

Schedule I, Part IV, Statem	nent 1		FUND FOR THE ARTS INC
IRC code section	501 (c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Cultural Pass		
Name and address	Boys & Girls Haven	61-0479621	7,500
	2301 Goldsmith Lane		
	Louisville, KY 40218		
IRC code section	501 (c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Art for Kosair Kids		
Name and address	Bunbury Repertory Theatre Comp	61-1105681	5,964
	604 So Third Street		
	Louisville, KY 40202		
IRC code section	501 (c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Sustaining Impact Grant, Partnership Grants		
Name and address	Carnegie Center for Art & History	35-1745767	5,750
	201 East Spring Street		
	New Albany, IN 47150		
IRC code section	501 (c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Cultural Lou Recovery Grant, Cultural Pass		
Name and address	Carnegie Center for Literacy and Learning	61-1185631	20,075
	251 W Second Street		
	Lexington, KY 40507		
IRC code section	501 (c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	ArtsMatch		
Name and address	Center For Nelghborhoods	61-0889003	8,000
	1126 Berry Blvd		
	Suite 300		
	Louisville, KY 40215		
IRC code section	501 (c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	NEA Neighorhood Grant Mural	- MARTY	
Name and address	CLIFH INC Global Economic Diversity Initiative	82-0826620	6,250
	140 NORTH 4TH STREET		
	Louisville, KY 40202		
IRC code section	501 (c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Diversity Equity and Inclusion Training Grant		1
Name and address	Commonwealth Theatre Center	61-0902733	117,827
	1123 Payne Street		
	Louisville, KY 40204		
IRC code section	501 (c)3		
Method of valuation			
Desc. of Non-Cash Asst.			

Schedule I, Part IV, Statem			FUND FOR THE ARTS INC
Purpose of grant	Sustaining Impact Grant, ArtsMatch, Partnership Grants, Teach Grants, 5x5 School Grants, Art for Kosair Kids, Cultural Pass	ner Arts	
Name and address	Crane House The Asia Institute 1244 So Third Street Louisville, KY 40203	61-1107169	7,145
IRC code section	501 (c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Cultural Pass, ArtsMatch	<u></u> .,	·
Name and address	Falls of the Ohio Foundation	31-1214133	6,250
	201 W Riverside Drive		
100 de esetten	Clarksville, IN 47129		
IRC code section Method of valuation	501 (c)3		
Desc. of Non-Cash Asst.			
Purpose of grant	Cultural Pass		
Name and address	FFTA Properties	31-1497554	50,000
Name and address	623 West Main Street	31 Moreon	30,000
	Louisville, KY 40202		
IRC code section	501 (c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Rent Support Grants		
Name and address	Greater Clark County Schools	35-1151414	7,540
	2112 Utica Sellersburg Road		
	Jeffersonville, IN 47130		
IRC code section	Gov		
Method of valuation			
Desc. of Non-Cash Asst.	T. Alban Anta Garanta		
Purpose of grant	Teacher Arts Grants		
Name and address	Heuser Hearing	61-1383955	11,700
	117 E Kentucky Street		
IDO	Louisville, KY 40203		
IRC code section Method of valuation	501 (c)3		
Desc, of Non-Cash Asst.			
Purpose of grant	Art for Kosair Kids		
Name and address	Historic Locust Grove	61-1390403	28,250
Name and address	561 Blankenbaker Lane	01 1000 100	20,200
	Louisville, KY 40207		
IRC code section	501 (c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Cultural Lou Recovery Grant, Cultural Pass	· 	
Name and address	Home of the Innocents	61-0445834	15,000
	1100 E Market Street		
	Louisville, KY 40206		
IRC code section	501 (c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
	Art for Kosair Kids	-	·

Schedule I, Part IV, Staten	nent 1		FUND FOR THE ARTS IN
· · · · · · · · · · · · · · · · · · ·	Van Hoose Education Center 3332 Newburg Road		
IRC code section	Louisville, KY 40218 Gov		
Method of valuation	GOV		
Desc. of Non-Cash Asst.			
Purpose of grant	Scholastic Art Awards, Teacher Art Grants		
Name and address	Jewish Community of Louisville	61-0444765	5,250
	3600 Dutchmans Lane		
	Louisville, KY 40205		
IRC code section	501 (c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Cultural Lou Recovery Grant, Cultural Pass		
Name and address	John C Railey	81-2662556	15,000
	Chefs Cut Pizzeria		
	9901C LaGrange Road		
	Louisville, KY 40223		
IRC code section			
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	COVID Restaurant & Farmer Relief Grant		
Name and address	Josephine Sculpture Park	27-0686281	20,000
	3355 Lawrenceburg Road		
	Frankfort, KY 40601		
IRC code section	501 (c)3		
Method of valuation			
Desc. of Non-Cash Asst.	ArtsMatch		
Purpose of grant			
Name and address	Kentucky Derby Museum	31-1023459	6,250
	704 Central Avenue		
IRC code section	Louisville, KY 40208		
Method of valuation	501 (c)3		
Desc. of Non-Cash Asst.			
Purpose of grant	Cultural Pass		
Name and address	Kentucky Opera	61-0601311	310,409
	323 West Broadway	01-0001511	3 10 ₁ -00
	Suite 601		
	Louisville, KY 40202		
IRC code section	501 (c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Sustaining Impact Grant, Partnership Grants, Rent Support Grants, Cultur	al	
	Pass		
Name and address	Kentucky Performing Arts Foundation	31-0999046	75,000
· · · · · · · · · · · · · · · · · · ·	501 West Main Street		
	Louisville, KY 40202		
IRC code section	Gov		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Cultural Lou Recovery Grant	war Tu	LWT
Name and address	Kentucky Science Center	31-1005850	10,250

, ,			
	727 W Main St		
	Louisville, KY 40202		
RC code section	501 (c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Cultural Pass		
Name and address	Kentucky Shakespeare	61-6036654	126,943
	616 Myrtle Street		
	Louisville, KY 40208		
RC code section	501 (c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Sustaining Impact Grant, Partnership Grants, Teacher Arts Grants, 5x5 School Grants, Rent Support Grant, Cultural Pass		
Name and address	KMAC Museum	61-0985312	109,222
	715 West Main Street		
	Louisville, KY 40256		
IRC code section	501 (c)3		
Method of valuation	, <i>,</i>		
Desc. of Non-Cash Asst.			
Purpose of grant	Sustaining Impact Grant, Partnership Grants, Teacher Arts Grants, 5x5		
- -	School Grants, Cultural Pass		
Name and address	Lafesa Johnson	83-2948225	15,000
	Hip Hop Sweet Shop		
	PO Box 16530		
	Louisville, KY 40203		
IRC code section			
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	COVID Restaurant & Farmer Relief Grant		
Name and address	Looking for Lilith Theatre Com	30-0135891	11,347
	312 Crescent Avenue		
	Louisville, KY 40206		
IRC code section	501 (c)3		
Method of valuation	` '		
Desc, of Non-Cash Asst.			
Purpose of grant	Sustaining Impact Grant, Teacher Arts Grants, 5x5 School Grants, Cultural		
	Pass		
Name and address	Louisville Ballet	61-6033779	363,453
(101110 4114 4441000	315 East Main Street		
	Louisville, KY 40202		
IRC code section	501 (c)3		
Method of valuation	· ·		
Desc. of Non-Cash Asst.			
Purpose of grant	Sustaining Impact Grant, ArtsMatch, Partnership Grants, Teacher Arts		
	Grants, 5x5 School Grants, Art for Kosair Kids, Cultural Pass		
Name and address	Louisville Central Community Center	61-0590743	16,800
	1300 West Muhammad Ali Blvd		. ,
	Louisville, KY 40203		
	=omorma) (11 10=00		
IRC code section	Gov		
	Gov		
IRC code section Method of valuation Desc. of Non-Cash Asst.	Gov		

Schedule I, Part IV, Statem	nent 1		FUND FOR THE ARTS INC
Name and address	Louisville Childrens Film Festival 6019 Innes Trace Road Louisville, KY 40222 501 (c)3	81-5283026	5,250
Method of valuation Desc. of Non-Cash Asst.			
Purpose of grant	Awards in the Arts, Cultural Pass		
Name and address	Louisville Jazz Initiative Inc 1317 Payne Street Louisville, KY 40204	86-3331274	7,580
IRC code section Method of valuation Desc. of Non-Cash Asst.	501 (c)3		
Purpose of grant	ArtsMatch		<u> </u>
Name and address	Louisville Nature Center 3745 Illinois Ave Louisville, KY 40213	61-6036081	6,000
IRC code section Method of valuation Desc. of Non-Cash Asst. Purpose of grant	501 (c)3 Cultural Pass		
		47 5007444	40.700
Name and address	Louisville Story Program 851 S Fourth St Louisville, KY 40203	47-5237414	16,792
IRC code section Method of valuation Desc. of Non-Cash Asst.	501 (c)3		
Purpose of grant	Sustaining Impact Grant		
Name and address	Louisville Visual Art 1538 Lytle Street Louisville, KY 40203	61-0492348	76,940
IRC code section	501 (c)3		
Method of valuation			
Desc. of Non-Cash Asst. Purpose of grant	Sustaining Impact Grant, Partnership Grants, Teacher Arts Grants, 5x5 School Grants, Cultural Pass, Awards in the Arts		
Name and address	Louisville Youth Choir 3105 Lexington Road Louisville, KY 40206	61-6058143	13,770
IRC code section	501 (c)3		
Method of valuation			
Desc. of Non-Cash Asst. Purpose of grant	Sustaining Impact Grant, Partnership Grants, Cultural Pass, Art for Kosair Kids		
Name and address	Louisville Youth Orchestra PO Box 997 Louisville, KY 40202	61-0597184	44,264
IRC code section	501 (c)3		
Method of valuation			
Desc. of Non-Cash Asst.	Custoining Impact Coast Bodoccabia Custo Tanahay Ad Custo		
Purpose of grant	Sustaining Impact Grant, Partnership Grants, Teacher Art Grants		
Name and address	Louisville Zoo 1100 Trevilian Way	31-0971742	6,000

Schedule I, Part IV, Statem	ent 1		FUND FOR THE ARTS INC
ochedule I, naft IV, otatem	Louisville, KY 40205		
IRC code section Method of valuation Desc. of Non-Cash Asst.	Gov		
Purpose of grant	Cultural Pass		
Name and address	Nativity Academy at St Boniface 529 East Liberty Street Louisville, KY 40202	51-0450314	14,900
IRC code section Method of valuation Desc. of Non-Cash Asst.	501 (c)3		
Purpose of grant	Art for Kosair Kids	_ _	
Name and address	Pandora Productions PO Box 4185 Louisville, KY 40204	20-1012066	16,613
IRC code section Method of valuation Desc. of Non-Cash Asst.	501 (c)3		
Purpose of grant	Sustaining Impact Grant, Partnership Grants		<u>.</u>
Name and address	River City Drum Corp 3308 Chauncey Avenue Louisville, KY 40211	55-0820407	8,968
IRC code section	501 (c)3		
Method of valuation			
Desc. of Non-Cash Asst. Purpose of grant	Sustaining Impact Grant, Teacher Arts Grants, 5x5 School Grants, Art for Kosair Kids		
Name and address	Ruckus Inc 310 N Hite Ave No 4 Louisville, KY 40206	84-2553760	8,235
IRC code section Method of valuation Desc. of Non-Cash Asst. Purpose of grant	501 (c)3 ArtsMatch		
Name and address	Sarabande Books 822 E Market Street Louisville, KY 40206	61-1256352	49,928
IRC code section Method of valuation Desc. of Non-Cash Asst.	501 (c)3		
Purpose of grant	Cultural Lou Recovery Grant, ArtsMatch		
Name and address	Six Forks Burger Company LLC 1270 So Preston Street Louisville, KY 40203	84-2494764	15,000
IRC code section Method of valuation Desc. of Non-Cash Asst.			
Purpose of grant	COVID Restaurant & Farmer Relief Grant		

118,310

61-0444823

Name and address

IRC code section

Method of valuation

Speed Art Museum

501 (c)3

2035 So Third Street Louisville, KY 40208

Schedule I, Part IV, Staten Desc. of Non-Cash Asst.	IIGIIC I		FUND FOR THE ARTS INC
Purpose of grant	Sustaining Impact Grant, Partnership Grants, Cultural Pass, ArtsMatch		
Name and address	Squallis Puppeteers PO Box 4987 Louisville, KY 40204	42-1552694	7,874
IRC code section Method of valuation Desc. of Non-Cash Asst.	501 (c)3		
Purpose of grant	Sustaining Impact Grant, Teacher Art Grants, 5x5 School Grants		
Name and address	StageOne Family Theatre 315 West Market Street Suite 25 Louisville, KY 40202	61-0466715	296,140
IRC code section Method of valuation Desc. of Non-Cash Asst.	501 (c)3		
Purpose of grant	Sustaining Impact Grant, Partnership Grants, Teacher Art Grants, 5x5 School Grants, Cultural Pass		
Name and address	Summit Academy 11508 Main St Louisville, KY 40243	61-1214457	8,990
IRC code section Method of valuation Desc. of Non-Cash Asst.	501 (c)3		
Purpose of grant	Art for Kosair Kids		
Name and address	Tameka Barbour Dasha Barbours Southern Bistro 2217 Steier Lane Louisville, KY 40218	46-3245624	15,000
IRC code section Method of valuation Desc. of Non-Cash Asst.			
Purpose of grant	COVID Restaurant & Farmer Relief Grant		
Name and address	The Filson Historical Society 1310 S Third Street Louisville, KY 40208	61-0444690	30,500
IRC code section Method of valuation Desc. of Non-Cash Asst.	501 (c)3		
Purpose of grant	Cultural Lou Recovery Grant, Cultural Pass		
Name and address	The Gentlemens Group LLC 103 W Oak Street Louisville, KY 40203	81-4159041	15,000
IRC code section Method of valuation Desc. of Non-Cash Asst.	501 (c)3		
Purpose of grant Name and address	COVID Restaurant & Farmer Relief Grant The Kentucky Center 501 West Main Street Louisville, KY 40202	31-0999046	17,500
IRC code section Method of valuation Desc. of Non-Cash Asst.	501 (c)3		

Schedule I, Part IV, Statem	nent 1		FUND FOR THE ARTS INC
Purpose of grant	Partnership Grants		
Name and address	The Lou Tate Foundation	61-0961553	10,147
	328 Kenwood Hill Road		
	Louisville, KY 40214		
IRC code section	501 (c)3		
Method of valuation			
Desc. of Non-Cash Asst.	O. (1) In house Oracle Exp. On the I Oracle Oracle Oracle		
Purpose of grant	Sustaining Impact Grant, 5x5 School Grants, Cultural Pass		
Name and address	The Louisville Academy of Music	61-0530107	25,000
	2740 Frankfort Avenue		
	Louisville, KY 40206		
IRC code section	501 (c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Cultural Lou Recovery Grant		
Name and address	The Louisville Orchestra	61-6000384	519,236
	620 West Main Street		
	Suite 600		
	Louisville, KY 40202		
IRC code section	501 (c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Sustaining Impact Grant, Partnership Grants		·
Name and address	The Seafood Lady LLC	47-4930007	15,000
	3201 Fern Valley Suite 113		
	Louisville, KY 40201		
IRC code section	501 (c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	COVID Restaurant & Farmer Relief Grant		
Name and address	Visually Impaired Preschool Services	61-1061973	10,100
	1906 Goldsmith Lane		
	Louisville, KY 40218		
IRC code section	501 (c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Art for Kosair Kids		
Name and address	Voices Amplified LLC	85-3683482	18,842
	473 Bob O Link Drive		
	Lexington, KY 40503		
IRC code section	501 (c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	ArtsMatch		
Name and address	West Louisville Performing Art	61-1181511	62,546
	323 West Broadway	- / - / - / - / -	• •
	Louisville, KY 40202		
IRC code section	501 (c)3		
Method of valuation	· <i>'</i>		
Desc. of Non-Cash Asst.			
Purpose of grant	Sustaining Impact Grants, Partnership Grants, Rent Support Grant		
Name and address	Yew Dell Botanical Gardens	61-1390688	6,250
ivanie anu audress	I OM DOM DUMINICAL GATABLIS	01-1390000	0,200

Schedule I, Part IV, Staten	nent 1		FUND FOR THE ARTS INC
	6220 Old Lagrange Rd		
	Crestwood, KY 40014		
IRC code section	501 (c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	COVID Restaurant & Farmer Relief Grant		
Name and address	Young Authors Greenhouse Inc	82-2878352	25,500
	2509 Portland Avenue		
	Louisville, KY 40212		
IRC code section	501 (c)3		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Cultural Lou recovery Grants, Cultural Pass		

Schedule I, Part IV, Statement 2

FUND FOR THE ARTS INC

Form: Schedule I (2020)

EIN: 61-0479626

Part III

Page: 2

	Description of Grants and Other Assistance to Individuals In the	e United States		
		Number of recipients	Amt. of cash grant	Amt. of non- cash asst.
Type of grant	Black-Owned Restaurant Grant; Most recipients were reported as an organization with a business tax identification.	1	15,000	0
Method of valuation Desc. of Non-Cash Asst.	n/a			
Type of grant Method of valuation Desc. of Non-Cash Asst.	Diversity, Equity & Inclusion Training Grant n/a	1	15,000	0

SCHEDULE J (Form 990)

Compensation Information
For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ► Attach to Form 990.
 ► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

FUND FOR THE ARTS INC

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

61-0479626

Pan	Questions Regarding Compensation			
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel		Yes	No
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a	110001040000	~
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		~
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		~
5	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
а	The organization?	5a	1000	~
b	Any related organization?	5b		~
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
а	The organization?	6a		~
b	Any related organization?	6b	Name and Address of the Address of t	~
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III	7	33000A	~
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		v
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
ð	Regulations section 53.4958-6(c)?	9		

For each individual whose compensation must be reported on 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 aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)—(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. Part II

Note: The Sufficient of Columnist (D)(I)—(III) for each listed intervious intervious announce of the Columnist of the Columni	ol eac	III IIIsted III III III III III III III III III I	M 2 and/or 1009 MIS	Calif. Of 1 Offil 330, 1.	alt VII, Occupativi, III o	2	(a) min (a) min (a)	
		(b) DIEBRUOWII O	אייב מושיטו וטשביאווג	oc compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable	other deferred compensation	benefits		in column (B) reported as deferred on prior Form 990
				compensation				
Christen Boone, President/CEO	(1)	193,750	0	0	0	8,850	202,600	0
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							Sch	Schedule J (Form 990) 2020

Schedule J (Form 990) 2020 Schedule J (Form 990) 2020 Schedule J (Form 990) 2020
ag ag
Schedule J, Part I, Line 3 - The Fund for the Arts' Compensation Committee Includes a Chair, the Fund for the Arts' Board Chair, the Chair, the Chair of the Finance & Audit Committee and the Chair of the Campaign Committee. Members of the committee review of summary of accomplishments for the year and the compensation data developed from the review of other Forms 990. Recommendations related to the CEO and other executive compensation are discussed and voted on by the Compensation Committee in an executive session and meeting minutes are
recorded. Recommendations are then taken to the organization's Executive Committee and/or Board for their final review and approval.
Schedule J (Form 990) 2020

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

2020

Employer Identification number

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

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

61-0479626 **FUND FOR THE ARTS INC** Form 990, Part VI, Section A, Line 2 - Board Member, Martin Pollio and Board Member, Diane Porter, business relationship; Form 990, Part VI, Section B, Line 11b - Description of process for reviewing the organization's Form 990 - A group consisting of the organization's Board Chair, CEO, Chair of the Compensation Committee, Chair of the Finance Committee and at least two other members of the Finance Committee are provided with a draft of the Form 990 for review prior to its finalization. A copy of the finalized return is made available to all voting Board members prior to being filed with the IRS. Form 990, Part VI, Section B, Line 12c - Conflict of Interest (COI) Policy/Enforcement - Annually, the Fund for the Arts, provides a copy of the 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 conflicts or perceived conflicts as defined in the Policy and recuse him/herself from participation in the decision-making or vote regarding the affected transaction. Form 990, Part VI, Section B, Line 15 - Each year the Fund for the Arts' Compensation Committee reviews the compensation arrangements for the CEO. They also review the CEO's recommendation regarding compensation for the Vice Presidents and the CFO. The Committee then presents their recommendations to the organization's Executive Committee or Board for final approval. The Committee is comprised of independent members, uses comparability data and documents the deliberations and recommendations. The compensation arrangements are reviewed/approved prior to changes being implemented. Form 990, Part VI, Section C, Line 19 - 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. The Conflict of Interest Policy and Bylaws are available upon request. Form 990, Part XI, Line 9 - Allowance for Doubtful Accounts

Schedule O, Statement 1

FUND FOR THE ARTS INC

Form: Form 990 (2020)

EIN: 61-0479626

Part I, Line 1

Page: 1

Activity Or Mission Description

Description

maximize the impact of the Arts on economic development, education and the quality of life for everyone by generating resources, inspiring excellence, and creating community connections.

Schedule O, Statement 2

Form: Form 990 (2020)

Page: 2

FUND FOR THE ARTS INC

EIN: 61-0479626 Part III. Line 4a

First Program Service Accomplishments Description

Description

caregivers, and medical professionals; Arts in Aging - provide senior citizens with access to free arts experiences to improve overall health and wellness and reduce feelings of isolation. The Imagine Mural Festival celebrated the life and legacy of Muhammad Ali with 3 murals with cross-disciplinary arts engagement. Culinary Arts - provided relief grants to Black-Owned Restaurants due to COVID 19. CULTIVATION: Greater Louisville is a magnet for artists and creative professionals, where arts and culture organizations and creative industries, both institutional and emerging, are thriving. Initiatives included: Sustaining Impact Grants - operating support to arts organizations that exemplify commitment to the Imagine 2025 priorities of Access, Cultivation, Education, Promotion and Equity, Diversity & Inclusion Partnership Grants - working with donors to fund arts partner organizations; Awards in the Arts - celebrates the extraordinary arts community in the Greater Louisville region and the arts tremendous contribution to the unique cultural landscape and artists themselves, their talent and passion, to create, produce and present transformative and inspiring works of arts, in and for the Louisville community; Awards in the Arts was a virtual event in 2021 due to COVID-19. Professional Development Scholarships - provide artists and arts organizations with access to professional development opportunities that will enhance their professional and organizational growth. De Vos Capacity Building Intensive - provide training and resources led by the De Vos Institute to 24 Arts Partners to build their fundraising, programmatic, and operational capacity. COVID-19 Emergency Relief - In response to COVID-19, provide grants to artists, arts and culture venues, and restaurants to help cover fixed expenses. During FY2021, the Fund awarded grants to 62 artists and 132 organizations. EDUCATION/LEARNING: Every child/individual in the community has the opportunity to experience and participate in the arts through experiences in-school, out-of-school and with their families. Initiatives included: EVERY CHILD Arts Education Initiative (Including Teacher Arts Grants program) enabling teachers to request funding to allow their students to attend arts events or supplement their classroom with residency arts programming often with a math/history/science curriculum, the "5 x 5 Initiative" where the goal is for every child to have an arts experience during each of their first 5 years of school, and "School's Out=Art's In" developed in conjunction with Louisville Metro Parks to provide arts based activities during out-of-school time such as summer and spring breaks; Arts for Kosair Kids - deliver the healing, transforming, inspiring power of the arts to support the health and well-being of special needs youth of the community; Cultural Pass - provide children ages 0 to 21 with free access to arts and cultural organizations during the summer with the goal of reducing summer learning loss. More than \$1.6M invested in Arts in Education/Learning experiences were provided by Arts Partners during FY2021. These experiences were provided in more than 370 different schools and 96 out-of-school locations in 76 counties. PROMOTION: Greater Louisville is recognized nationally and internationally as a leading city of arts and culture attracting talent to live and work and tourists to play and stay. In FY2021, the Fund reached 2.1 million people through its Arts Partners. The Fund maintains a social media presence through Facebook, Twitter and YouTube, promoting all things "arts" in the community. The Fund also produces an electronic newsletter that has nearly 21,000 subscribers. Other initiatives included: Awards in the Arts celebrates the extraordinary arts community in the Greater Louisville region and the arts contribution to the unique cultural landscape and quality of place, Awards in the Arts was virtual in FY21 due to the COVID-19 pandemic; EQUITY, DIVERSITY & INCLUSION: Cultural equity is leading the way to a more equitable, diverse and inclusive community improving the social connectivity and cultural vitality of the region. Arts & Race Equity Task Force -Through our continued commitment to DEI we commissioned the Arts & Race Equity Task Force to guide the organization in its role to advance racial justice and equity across the arts and culture sector and the entire community. The task force's work was so impactful in 2021 that it was elevated to be a committee of the Board of Directors. EDI Initiatives included: Arts for Kosair Kids - deliver the healing, transforming, inspiring power of the arts to support the health and well-being of special needs youth in the community; Cultural Pass - provide children ages 0 to 21 with free access to arts and culture organizations during the summer with the goal of reducing summer learning loss and increasing access and participation for low-income families; Black Artist Fund-support Black artists in their work in a variety of artistic genres. Culinary Arts - provided relief grants to Black-Owned Restaurants due to COVID 19.

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

FUND FOR THE ARTS INC

Part I

Related Organizations and Unrelated Partnerships

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

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

2020

OMB No. 1545-0047

Open to Public Inspection

Employer identification number 61-0479626

(g) Section 512(b)(13) controlled entity? Schedule R (Form 990) 2020 (f)
Direct controlling
entity Yes No 1 Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year. (f)
Direct controlling
entity (e) End-of-year assets Y V (e)
Public charity status
(if section 501(c)(3)) (d) Total income 6 (d) Exempt Code section (c)
Legal domicile (state
or foreign country) 501(c)3 Cat. No. 50135Y (c)
Legal domicile (state
or foreign country) (b) Primary activity ₹ (b) Primary activity ArtSpace & Conference Center For Paperwork Reduction Act Notice, see the Instructions for Form 990. (a) Name, address, and EIN (f applicable) of disregarded entity (a) Name, address, and EIN of related organization (1) FFTA Properties Inc (31-1497554) 623 W Main, Louisville, KY 40202 Part II (2) ල 4 4 9 2 9 Ξ 8 ල 2 E

Page 2		(k) Percentage ownership									۱۷,	(i) Section 512(b)(13) controlled entity?	2							Schedule R (Form 990) 2020
	ne 34		₽								, Part	Section	Yes						:	Form
	art IV, II	(i) General or managing partner?	Yes								orm 990	(h) Percentage ownership								edule R (
	ble as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, streated as a partnership during the tax year.	(i) Code VUBI amount in box 20 of Schedule K-1 (Form 1065)		ļ							d "Yes" on Fo	(g) Share of Peend-of-year assets o								Sch
	ا "Yes" ه	(9) (h) Share of end-of- Disproportionate year assets afocations?	Yes No			_ _ -					answere ar.	Share of total income						:		
	wered	ets Sta									ation ex yea	Share								
	tion ans	(g) Share of end≺ year assets									organizing the t	(e) Type of entity (C corp, S corp, or trust)								
	ganiza year.	of total									e if the	Type o								
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	mplete if i ip during t	(e) Predominant income (related, unrelated, excluded from tax under sections 512—514)									Trust. Co	(d) Direct controlling entity								
	ip. Cc nersh	Predincome income universe excluse tax sections									on or	ile xountry)								
	Partnersh	(d) Direct controlling entity								!	Corporati s treated	(c) Legal domicile (state or foreign country)	ļ							
	as a l	Direct (;							as a									
		(c) Legal domicile (state or foreign country)									Taxable ed organiz	(b) Primary activity						i i i i i i i i i i i i i i i i i i i		
	itions organ			•							ations relate	Æ								
	Identification of Related Organizations Taxable as a Partnership. Complete if the organizabecause it had one or more related organizations treated as a partnership during the tax year.	(b) Primary activity		i			,,,		,	;	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 EN of related organization								
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50	ication ie it ha	nd EIN of ation									ication , becat	(a) and EiN o								
ırm 990) 20	Identif becaus	(a) Name, address, and EIN of related organization									Identia line 34	, address,								
Schedule R (Form 990) 2020	Part III	Name, i		(1)	(2)	69	(4)	(2)	(9)	9	Part IV	Name	(1)	(2)	(3)	(4)	(2)	(9)	3	

Page 3

Schedule R (Form 990) 2020

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. During the tax year, did the organization engage in any of the following transactions with one or more related organization laws, (iii) royalties, (iiii) royalties, (iiiii) royalties, (iiiii) royalties, (iiiii) royalties, (iiiiii) royalties, (iiiiiii) royalties, (iiiiiiiiiiii) royalties, (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii
ith one or more related organizations listed in Parts II–IV?
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Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37. Part VI

(a) Name, address, and EIN of entity	(b) Primary activity	(a) (b) (c) (d) (d) (e) (f) (f) (f) (g) (h) (e) (f) (g) (g) (g) (g) (g) (g) (g) (g) (g) (g	(d) Predominant	(e) Are all partners	(f) Share of	(g) Share of	(h) Disproportionate		General or	(k) Percentage
		(state or foreign country)	income (related, unrelated, excluded from tax under	section 501(c)(3) organizations?	total income	end-of-year assets	allocations?	of Schedule K-1 (Form 1065)	managing partner?	
			sections 512—514)	Yes No	74.		Yes No		Yes No	
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art VII	Supplemental Information Provide additional information for responses to questions on Schedule R. See instructions.				
	Provide additional information for responses to questions on Schedule R. See instructions.				
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