DLN: 93493091003370 OMB No 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Treasury Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 01-01-2019 , and ending 12-31-2019 D Employer identification number B Check if applicable GREATER COLUMBUS ARTS COUNCIL □ Address change 31-0833384 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite 100 EAST BROAD STREET NO 2250 ☐ Amended return ☐ Application pending (614) 224-2606 City or town, state or province, country, and ZIP or foreign postal code COLUMBUS, OH $\,$ 43215 G Gross receipts \$ 12,688,603 Name and address of principal officer H(a) Is this a group return for KAYLA GREEN ☐Yes **☑**No subordinates? 100 EAST BROAD STREET STE 2250 H(b) Are all subordinates COLUMBUS, OH 43215 ☐ Yes ☐No ıncluded? □ 527 **✓** 501(c)(3) 501(c)() **◄** (insert no) 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW GCAC ORG ${f M}$ State of legal domicile L Year of formation 1973 Summary 1 Briefly describe the organization's mission or most significant activities TO SUPPORT AND ADVANCE THE ARTS AND CULTURAL FABRIC OF COLUMBUS Activities & Governance 2 Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . 4 27 4 Number of independent voting members of the governing body (Part VI, line 1b) . Total number of individuals employed in calendar year 2019 (Part V, line 2a) 13 **6** Total number of volunteers (estimate if necessary) 6 298 Total unrelated business revenue from Part VIII, column (C), line 12 0 **b** Net unrelated business taxable income from Form 990-T, line 39 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 7,411,574 10,811,662 Ravenua 1,291,787 1,378,280 9 Program service revenue (Part VIII, line 2g) . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 52,145 94,510 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 61,300 57,373 8,816,806 12,341,825 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 5,701,586 7,448,620 **14** Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 1,366,976 1,479,398 Expenses **16a** Professional fundraising fees (Part IX, column (A), line 11e) . . b Total fundraising expenses (Part IX, column (D), line 25) ▶23,443 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 1,632,273 1,875,158 8,700,835 10,803,176 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12 . 115,971 1,538,649 Net Assets or Fund Balances Beginning of Current Year End of Year 5,313,310 7,097,829 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 1,468,728 1,498,489 22 Net assets or fund balances Subtract line 21 from line 20 . 3,844,582 5,599,340 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 Signature of officer Sign Here KAYLA GREEN DIR OF FINANCE & ADMINISTRATION Type or print name and title Print/Type preparer's name Preparer's signature Check | If 2020-03-27 P00099212 Paid self-employed Firm's name REA & ASSOCIATES INC Firm's EIN ► 34-1310124 Preparer Use Only Firm's address ▶ 941 STEUBENVILLE AVE PO BOX 820 Phone no (740) 432-5658 CAMBRIDGE, OH 437250820 ✓ Yes □ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form 990 (2019)

Form	990 (2019)					Page 2
Pa	statement	of Program Service	e Accomplis	hments		
	Check if Sche	dule O contains a respo	nse or note to	any line in this Part III		🗸
1	Briefly describe the o	organization's mission		·		
	SION TO SUPPORT AN	D ADVANCE THE ARTS	AND CULTURAL	FABRIC OF COLUMBUS	S VISION A THRIVING COLUMBUS	S WHERE THE ARTS
MAI	IER TO ALL OF US					
2	Did the organization	undertake any significa	nt program ser	vices during the year w	hich were not listed on	
	the prior Form 990 o	r 990-EZ?				🗌 Yes 🗹 No
	If "Yes," describe the	ese new services on Sch	nedule O			
3	Did the organization	cease conducting, or m	ake significant	changes in how it cond	ucts, any program	
	services?					🗌 Yes 🗹 No
	If "Yes," describe the	ese changes on Schedul	e O			
4	Section 501(c)(3) an		ns are required	to report the amount	largest program services, as mea of grants and allocations to others	
4a	(Code) (Expenses \$	7,821,518	including grants of \$	7,448,620) (Revenue \$	163,334)
	See Additional Data					
4b	(Code) (Expenses \$	1,160,362	including grants of \$) (Revenue \$	1,190,491)
	See Additional Data					
4c	(Code) (Expenses \$	140,178	ıncludıng grants of \$) (Revenue \$	24,455)
	See Additional Data					
4d	Other program service	ces (Describe in Schedi	ıle O)			
	(Expenses \$	ıncl	udıng grants of	\$) (Revenue \$)
4e	Total program serv	vice expenses ▶	9,122,0	58		

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Part IV 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 " Schedule A	Yes," complete	Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition for public office? If "Yes," complete Schedule C, Part I	-		No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section election in effect during the tax year? If "Yes," complete Schedule C, Part II		Yes	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule</i>			No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which dono to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," com Schedule D,Part 2	nplete		No
7 Did the organization receive or hold a conservation easement, including easements to preserve open specified the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II			No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? It complete Schedule D, Part III	f "Yes," 8		No

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 Yes

9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, 10 Yes permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX,

or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Yes 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 No assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸 11b

Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its No 11c total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 😼 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 Nο 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🔧 11e Yes

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🥦 11f Yes 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete

12b If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🥦 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 14a business, investment, and program service activities outside the United States, or aggregate foreign investments 14b

b Was the organization included in consolidated, independent audited financial statements for the tax year?

14a Did the organization maintain an office, employees, or agents outside of the United States? . . . 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

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to 16 or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

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) Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII.

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . .

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

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

17 18 Yes 19 20a

Yes

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20b

12a

Yes

Nο

No

Nο

Nο

Nο

Nο

No

Nο

Nο

rm :	990 (2019)			Page
Parl	Checklist of Required Schedules (continued)			
			Yes	No
	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	Yes	
	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	Yes	
	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		No
)	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
:	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
ı	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	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		No
	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
	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		No
	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		No
	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)			
1	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No
)	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c	Yes	
	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
	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		No
	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		No
•	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
	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		
	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note. All Form 990 filers are required to complete Schedule O	38	Yes	
ąlı	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
	Enter the number reported in Roy 3 of Form 1096. Enter -0- if not applicable		Yes	No

b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

1b

Yes

1c

Pa	tV Statements Regarding Other IRS Filings and Tax Compliance (continued)			rage 3
	Enter the number of employees reported on Form W-3, Transmittal of Wage and			
Za	Tax Statements, filed for the calendar year ending with or within the year covered by			
	this return		.,	
Ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
Ь	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	4a		No
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?			
D	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
Ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization	6a		No
	solicit any contributions that were not tax deductible as charitable contributions?			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	00		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services	7a	Yes	
a	provided to the payor?	′	163	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file	_ [
	Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			
		7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form			
	1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
Ь	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
Ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			
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			
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			
	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			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in 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		No
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O	16		No

Section C. Disclosure

19

20

List the states with which a copy of this Form 990 is required to be filed▶

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Pai	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "Na 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions Check if Schedule O contains a response or note to any line in this Part VI	o" respo	onse to	lines
Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 27			
	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 in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 27			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? •	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
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	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	•
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	⊋.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
Ь	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	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
Ь	Other officers or key employees of the organization	15b	Yes	
	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 similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

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

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

State the name, address, and telephone number of the person who possesses the organization's books and records ►KAYLA GREEN 100 EAST BROAD STREET STE 2250 COLUMBUS, OH 43215 (614) 221-8704

Form **990** (2019)

☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

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Part VII	Compensation of Officer and Independent Contra		Truste	es,	Key	En	ıploy	ees	, Highest Comp	ensated Employ	/ees,
	Check if Schedule O contains a	response or no	te to an	y line	ın t	this	Part VI	١.			🗆
Section	A. Officers, Directors, Tru	istees, Key E	mploy	ees	, an	id H	lighe	st C	Compensated En	nployees	
year .	e this table for all persons requir		·						, ,		
of compensa	of the organization's current off ation Enter -0- in columns (D), (E), and (F) if no	compe	nsatı	on v	vas p	paid				
	of the organization's current key										
who receive	organization's five current high d reportable compensation (Box and any related organizations										
	of the organization's former office e compensation from the organiz						pensat	ed e	employees who rece	ived more than \$10	0,000
organızatıor	of the organization's former dire n, more than \$10,000 of reportab	le compensation	n from t								e
	ions for the order in which to list	•									
☐ Check t	this box if neither the organization		d orgar	nizatio			ensate	d ar	ny current officer, di	rector, or trustee	_
	(A) Name and title	(B) Average hours per week (list any hours for related	than o	ne b	ox, ι n of or/t	t che unles ficer rust	· and a ee)	on	(D) Reportable compensation from the organization (W-2/1099-	(E) Reportable compensation from related organizations (W-2/1099-	(F) Estimated amount of other compensation from the organization and
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	related organizations
See Addition	al Data Table										_
					_						
											_

See Additional Data Table					

1b Sub-Total				>			
c Total from continuation sheets to Pa	art VII, Section	Α		▶ [
d Total (add lines 1b and 1c)				>	479,969	0	51,501

	Sub-Total			
d.	Total (add lines 1b and 1c)	0		51,501
2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization \triangleright 3			
			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	Yes	No No

1b :	Sub-Total						>							
c ·	Total from continuation sheets to Pa	art VII, Section	Α.				▶ [
d ·	Total (add lines 1b and 1c)				•		▶	۷	79,969			0		51,501
2	Total number of individuals (including of reportable compensation from the			se list	ed ab	ove)	who	received moi	e than \$	100,000				
													Yes	No
3	Did the organization list any former of line 1a? <i>If "Yes," complete Schedule 2</i>				•			-	•	•	•	3		No
4	For any individual listed on line 1a, is organization and related organization									m the				

					_			_					
1b :	Sub-Total						>						
c ·	Total from continuation sheets to Pa	rt VII, Section	Α.				>						
d.	「otal (add lines 1b and 1c) . . .						>		479,969	9	0		51,501
2	Total number of individuals (including of reportable compensation from the o			se lis	sted	l abo	ove) w	no re	eceived more thai	n \$100,000			
												Yes	No
3	Did the organization list any former of				key	em/	ployee	, or	highest compens	ated employee on			

2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization \triangleright 3			
			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such			

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation

5

(B)

Description of services

WEBSITE DEVELOPMENT AND

VIDEO PRODUCTION

MAINTENANCE

Nο

145,408

144,800

(C) Compensation

Form 990 (2019)

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for

from the organization Report compensation for the calendar year ending with or within the organization's tax year

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

services rendered to the organization? If "Yes," complete Schedule J for such person . . .

(A)

Name and business address

5

WOSU

2003 MILLIKIN RD COLUMBUS, OH 43215

11 E GAY ST UNIT 301 COLUMBUS, OH 43215

OSA TECHNOLOGY PARTNERS

Section B. Independent Contractors

compensation from the organization ▶ 2

		(2019)								Page 9
Part	VIII				a respo	onse or note to any	line in this Part VIII			П
		Check if Sched	auic	o contains	а тезро	AND OF THESE ED CATS	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
<u>"</u> "	18	Federated campa	igns		1 a		L	revenue		312 314
ons, Gifts, Grants Similar Amounts	ļ	b Membership dues	s .		1 b					
G. Gr	•	c Fundraising even	its .		1c					
ifts, ar A	1	d Related organiza			1d					
s, G	1	e Government grants			1e	10,446,162				
ion I Si	1	 All other contribution and similar amounts above 	ns, g s not	ıfts, grants, ıncluded	1f	365,500				
tributio Other	۱,	Noncash contributio	ns in	cluded in						
Contributions, and Other Sirr		lines 1a - 1f \$			1g					
<u>ರ ಕ</u>		h Total. Add lines :	1a-1	f	•	>	10,811,662			
	_	COLUMBUS ARTS FE	TT\ / A	.1		Business Code	1,190,491	1,190,491		
a.	2a	COLUMBUS ARTS FES	SIIVA	AL.		900099	1,130, 131	1,130,131		
Program Service Revenue	b	MARKETING CAMPAIG	GN SI	PONSORSHIP	5	900099	146,505	146,505		
å	c	MISCELLANEOUS PRO	OGRA	M		000000	18,012	18,012		
ZMC 6						900099	12 717	12 717		
<u>~</u>	d	RESCINDED GRANTS				900099	12,717	12,717		
gran	е	FISCAL SPONSOR				900099	10,555	10,555		
ď										
		All other program								
		Total. Add lines 2				1,378,280	1	T		
	S	Investment income similar amounts) .				•	63,83	3		63,833
		Income from invest					-			
	9	Royalties	r.	(ı) Re		(II) Personal	` <u> </u>			
	6-	Cross route					1			
		Gross rents Less rental	6a				-			
	_	expenses	6b				_			
	С	Rental income or (loss)	6 c							
	d	Net rental income	or ((loss)]			
	_	_		(ı) Secui	ities	(II) Other	-			
	7a	Gross amount from sales of assets other	7a		300,004	ı				
		than inventory					_			
	b	Less cost or other basis and 7b			269,327	,				
		sales expenses					-			
		Gain or (loss)	7 c		30,677		30.67	7		30,677
		I Net gain or (loss) Gross income from fu		sing events		<u>····</u>	30,67	<u> </u>		30,677
ıπe		(not including \$		of						
रू }		See Part IV, line 18	•		8a	128,802				
ř.		Less direct expen			8b	77,451				
Other Revenue	C	: Net income or (los	ss) fr	om fundrais	sing ev	ents 🕨	51,35	1		51,351
	9a	Gross income from See Part IV, line 19								
	h	Less direct expen			9a 9b		-			
		: Net income or (los				les \blacktriangleright	J			
						<u>, </u>				
	10a	aGross sales of inve returns and allowa			10a					
	b	Less cost of good	s sol	ld	10 b]			
	c	Net income or (los	_		invent		T			
	11	Miscellaneo	us R	evenue		Business Code 900099	<u> </u> 9 6,02:	2		6,022
		KEVENOL								·
	Ь	·								
	c	:								
		All other revenue Total. Add lines 1								
		: Total revenue. S					6,02	2		
		. rotal revenue, 5	ce If	isti uctions	• •	· · · •	12,341,82	5 1,378,280)	0 151,883 Form 990 (2019)

P	art IX Statement of Functional Expenses				rage 10
	Section 501(c)(3) and 501(c)(4) organizations must o	complete all columns	All other organizatio	ns must complete colu	mn (A)
	Check if Schedule O contains a response or note to ar	ny line in this Part IX			<u> D</u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	6,861,440	6,861,440		
2	Grants and other assistance to domestic individuals See Part IV, line 22	587,180	587,180		
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	410,110	15,000	395,110	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	734,370	146,254	564,673	23,443
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	131,900	15,929	115,971	
9	Other employee benefits	126,671	20,071	106,600	
10	Payroll taxes	76,347	9,993	66,354	
11	Fees for services (non-employees)				
ā	Management				
ŀ	Legal	12,583	1,548	11,035	
c	: Accounting	36,295	15,798	20,497	
c	l Lobbying	39,375		39,375	
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	9,857		9,857	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	15,801	9,701	6,100	
12	Advertising and promotion	190,543	174,387	16,156	
13	Office expenses	72,124	26,220	45,904	
14	Information technology	254,404	190,727	63,677	
15	Royalties				
16	Occupancy	112,752	4,861	107,891	
17	Travel	23,522	13,242	10,280	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19	Conferences, conventions, and meetings	40,992	6,075	34,917	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	88,044	72,369	15,675	
23	Insurance	30,784	18,179	12,605	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
	a COLUMBUS ARTS FESTIVAL	723,975	723,975		
	b BROAD & HIGH CONTENT	125,961	125,961		
	c DUES/SUBSCRIPTIONS	49,811	40,307	9,504	
	d JUNIOR ACHIEVEMENT	29,082	29,082		
	e All other expenses	19,253	13,759	5,494	
25	Total functional expenses. Add lines 1 through 24e	10,803,176	9,122,058	1,657,675	23,443
26	Joint costs. Complete this line only if the 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)				

10a

10b

Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B).

Notes and loans receivable, net . .

Prepaid expenses and deferred charges .

10a Land, buildings, and equipment cost or other

Investments-publicly traded securities .

Investments—other securities See Part IV, line 11

Investments-program-related See Part IV, line 11

Total assets. Add lines 1 through 15 (must equal line 34)

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Organizations that follow FASB ASC 958, check here

Organizations that do not follow FASB ASC 958, check here ▶

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity

Other liabilities (including federal income tax, payables to related third parties,

basis Complete Part VI of Schedule D

Other assets See Part IV, line 11 .

Accounts payable and accrued expenses

or family member of any of these persons

and other liabilities not included on lines 17 - 24)

Total liabilities. Add lines 17 through 25 . .

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Inventories for sale or use .

b Less accumulated depreciation

Intangible assets .

Grants payable

Deferred revenue . .

Tax-exempt bond liabilities

Complete Part X of Schedule D

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions

complete lines 29 through 33.

Total net assets or fund balances

Part X Balance Sheet			
Check if Schedule O contains a response or note to any line in this Part IX			🗆
	(A) Beginning of year		(B) End of year
1 Cash-non-interest-bearing	1,587,046	1	1,707,862
2 Savings and temporary cash investments	2,516,942	2	2,957,515
3 Pledges and grants receivable, net		3	
4 Accounts receivable, net	289,765	4	1,343,577
5 Loans and other 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		5	

779,702

645,032

Page **11**

23.268

76,741

134,670

823,196

31,000

7,097,829

1.145.516

173.372

15,581

1.498.489

3,761,276

1,838,064

5,599,340

7,097,829

Form **990** (2019)

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32

33

21.458

68,192

220,362

609,545

5,313,310

1.125.289

165,804

154.301

23,334

1.468.728

2,888,921

3,844,582

5,313,310

955.661

Assets

11

12

13

14

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21

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28

31

32

33

Liabilities 22

Fund Balances

ō 29

Assets 30

3a

3b

No

Form 990 (2019)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Audit Act and OMB Circular A-133?

Additional Data

Software Version:

Name: GREATER COLUMBUS ARTS COUNCIL

Software ID:

Form 990 (2019)

Form 990, Part III, Line 4a:

SEE SCHEDULE O

EIN: 31-0833384

Form 990, Part III, Line 4b: SEE SCHEDULE O

Form 990, Part III, Line 4c: SEE SCHEDULE O

(A) (D) (E) (B) (C) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless compensation amount of other hours per compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours from the

organization

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0

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organizations

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

	for related							/M- 2/1000-	(W- 2/1099-	organization and	
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	MISC)	related organizations	
THOMAS SZYKOWNY IMMEDIATE PAST CHAIR	1 00	×		×				0	0	0	
MICHAEL BONGIORNO CHAIR	1 00	×		×				0	0	0	
TODD TUNEY VICE-CHAIR	1 00	×		×				0	0	0	
DAVID TEED TREASURER	1 00	×		×				0	0	0	
CHRISTIE ANGEL	1 00										

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DAVID TEED
TREASURER
CHRISTIE ANGEL
SECRETARY
STACIE BOORD

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

MARK CAIN

BARBARA BRANDT

SHANNON CRANE

DAVID FEINBERG

and Independent Contractors

(A) (D) (B) (C) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless compensation amount of other hours per compensation person is both an officer week (list from the from related compensation

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

and Independent Contractors

DREW MCCARTT

ANGELA PACE

EILEEN PALEY

KIMBER PERFECT

EMMANUEL REMY

KARLA ROTHAN

.......

TRUSTEE

TRUSTEE

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	any hours	and a director/trustee))	organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
MICHAEL GONSIOROWSKI	1 00	Х						0	0	0	
TRUSTEE		,						J	,		
DAVE HETZLER	1 00	х						0	0	0	
TRUSTEE											
CHRISTINE KULLBERG TRUSTEE	1 00	×						0	0	0	
TROSTEE											

DAVE HETZLER TRUSTEE		×			0	
CHRISTINE KULLBERG	1 00	×			0	
TRUSTEE						
CATHERINE LANG-CLINE	1 00	l ↓			0	
TRUSTEE		^				
DDEW MCCART	1 00					

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(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average amount of other than one box, unless hours per compensation compensation person is both an officer week (list from the compensation from related any hours and a director/trustee) organization organizations from the

(W- 2/1099-

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262,359

103,785

113,825

(W- 2/1099-

organization and

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36,429

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for related

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

	organizations below dotted line)	ndiwdual trustee or director	Institutional Trustee	(e) employee	righest compensated rightest compensated	Former	MISC)	MISC)	related organizations
MANJU SANKARAPPA	1 00	X					0	0	0
TRUSTEE									_
CLARENCE SIMMONS	1 00	×					0	0	0
TRUSTEE									-
JULIE TAGGART	1 00	×					0	0	0
TRUSTEE		_ ^						0	· ·
YOHANNAN TERRELL TRUSTEE	1 00	×					0	0	0

TRUSTEE
YOHANNAN TERRELL
TRUSTEE
AMY TILLINGHAST
TRUSTEE

......

SARAH TOWNES

PRISCILLA TYSON

THOMAS KATZENMEYER

DIRECTOR OF FINANCE & ADMI

DIRECTOR OF MARKETING, COM

TRUSTEE

TRUSTEE

PRESIDENT

KAYLA GREEN

JAMI GOLDSTEIN

and Independent Contractors

efil	e GR	APHIC prii	1t - DO NO	T PROCESS	As Filed Data -			DLN: 93	DLN: 93493091003370				
SC	H ED m 99	ULE A		Public (Charity Staturganization is a sect	ion 501(c)(3) o empt charitable	organization or trust.	ort	2019				
Depar	tment of	f the Treasury	▶ 0	io to <u>www.irs</u>	► Attach to Form .gov/Form990 for i			ormation.	Open to Public Inspection				
Nam	e of tl	he organiza LUMBUS ARTS						Employer identific	ation number				
O. (.).								31-0833384					
	rt I				us (All organization it is (For lines 1 thro			See instructions.					
1	n gannz		•		sociation of churches	•		/A\/i\					
2		·		,	1)(A)(ii). (Attach Scl								
						,							
3	Ш	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).											
4		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state											
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170 (b)(1)(A)(iv). (Complete Part II)											
6		A federal, s	tate, or local	government or	governmental unit de	scribed in sectio	on 170(b)(1)(A	()(v).					
7	✓	section 17	O(b)(1)(A)(vi). (Complete	Part II)			init or from the genera	al public described in				
8			•		170(b)(1)(A)(vi)	•	•						
9		non-land gi	ant college o	f agrıculture S	ee instructions Enter	the name, city, a	and state of the	,					
10		from activit	ies related to income and i	its exempt fun inrelated busin	ctions—subject to cer	taın exceptions,	and (2) no more	ns, membership fees, in than 331/3% of its subsess acquired by the o	pport from gross				
11		An organiza	ation organize	d and operated	l exclusively to test fo	r public safety S	ee section 509	(a)(4).					
12		more public	ly supported	organizations of	l exclusively for the be lescribed in section 5 the type of supporting	i09(a)(1) or se	ction 509(a)(2	s of, or to carry out th). See section 509(a s 12e, 12f, and 12g	e purposes of one or ()(3). Check the box				
а		Type I. A so	supporting org n(s) the powe	janization oper	ated, supervised, or c appoint or elect a majo	ontrolled by its s	upported organi	zation(s), typically by of the supporting orga					
b		Type II. A manageme	supporting or nt of the supp	rganization sup porting organiza	ervised or controlled i ation vested in the sar			organization(s), by hav ge the supported orga					
c		Type III f	unctionally i					nd functionally integra	ted with, its				
d		Type III n functionally	on-function integrated 1	ally integrated he organization	d. A supporting organ	Ization operated fy a distribution	ın connection wi requirement and	th its supported orgar an attentiveness requ	` '				
e		Check this	box if the org	anızatıon receiv	•	nation from the I		pe I, Type II, Type II	I functionally				
f	Enter			organizations	g. acca supporting	2. gamzation							
g	Provi	de the follow	ing information	on about the su	pported organization(s)							
	(i) N					(iv) Is the org in your govern	anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)				
						Yes	No						
Tota		arante Parati	Lian A - L N - 1		structions for	Cat No 11285	<u> </u>	 Schedule A (Form 9	00 == 000 57\ 3010				

Sch	edule A (Form 990 or 990-EZ) 2019						Page 2			
F	Support Schedule for									
	(Complete only if you ch						nder Part III.			
_	If the organization failed section A. Public Support	i to quality unde	i tile tests listed	below, please c	ompiete Part II	.1.)				
_	Calendar year	T	Т		T					
	(or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total			
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant")	6,682,648	7,081,678	7,292,729	7,411,674	10,811,562	39,280,291			
2	Tax revenues levied for the 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									
4	Total. Add lines 1 through 3	6,682,648	7,081,678	7,292,729	7,411,674	10,811,562	39,280,291			
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						39,280,291			
	ection B. Total Support			T						
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total			
7	Amounts from line 4	6,682,648	7,081,678	7,292,729	7,411,674	10,811,562	39,280,291			
8	Gross income from interest,	2,002,000	1,7002,010	.,,	.,,					
	dividends, payments received on securities loans, rents, royalties and income from similar sources	11,316	14,701	34,480	56,787	63,833	181,117			
9	Net income from unrelated business activities, whether or not the business is regularly carried on									
10	- · · · · · · · · · · · · · · · · · · ·									
11	Total support. Add lines 7 through 10						39,461,408			
12	Gross receipts from related activities,	etc (see instruction	ons)			12	6,759,471			
13	First five years. If the Form 990 is for	or the organization	's first, second, thi	rd, fourth, or fifth	tax year as a sec	tion 501(c)(3) orga	nızatıon,			
	check this box and stop here					▶ □				
_5	ection C. Computation of Publi									
14	Public support percentage for 2019 (li	ne 6, column (f) di	vided by line 11, c	olumn (f))		14	99 540 %			
15	Public support percentage for 2018 So	hedule A, Part II, I	ine 14			15	99 650 %			
	33 1/3% support test—2019. If the			on line 13, and line	e 14 is 33 1/3% oi					
	and stop here. The organization qual 33 1/3% support test—2018. If the	ifies as a publicly s	supported organiza	tion			▶ ☑			
_	box and stop here. The organization	-		·	•	•	▶ □			
17a	10%-facts-and-circumstances tes is 10% or more, and if the organization in Part VI how the organization meets	t— 2019. If the orgon meets the "facts	ganization did not o -and-circumstance	check a box on line s" test, check this	box and stop he	re. Explain				
	organization						ightharpoons			
ь	10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly									
18	supported organization Private foundation. If the organizat	ion did not check a	box on line 13, 16	Sa, 16b, 17a, or 17	b, check this box	and see	▶ □			
_	instructions						▶ □			
					Schedul	e A (Form 990 or	990-F7\ 2019			

P		upport Schedule for						
		Complete only if you cl						der Part II. If
		ne organization fails to	qualify under t	ne tests listed i	pelow, please co	omplete Part II.)	
56	ection A. Pub	ndar year			1			T
		r beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1		contributions, and						
		ees received (Do not						
_		nusual grants ")						
2		from admissions, sold or services						
		facilities furnished in						
		at is related to the						
	organization's	tax-exempt purpose						
3		from activities that are						
		ed trade or business						
4	under section Tax revenues	F						
-		benefit and either paid						
		d on its behalf						
5		ervices or facilities						
		governmental unit to						
		on without charge						
6	Total. Add line	-						
/a		ded on lines 1, 2, and m disqualified persons						
b		ded on lines 2 and 3						
_		other than disqualified						
		exceed the greater of						
		of the amount on line						
_	13 for the yea Add lines 7a a							
8		rt. (Subtract line 7c						
0	from line 6)	it. (Subtract line / c						
Se	ection B. Tota	al Support				•		
		ıdar year	(-) 201E	(h) 2016	(=) 2017	(4) 2010	(-) 2010	(f) Tatal
		r beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts fron	n line 6						
L0a		from interest,						
		yments received on						
		ns, rents, royalties and similar sources						
b		siness taxable income						
_		511 taxes) from						
		equired after June 30,						
	1975							
_	Add lines 10a							
11		rom unrelated business						
		included in line 10b, ot the business is						
	regularly carr							
12		Do not include gain or						
		sale of capital assets						
	(Explain in Pa							+
13	11, and 12)	rt. (Add lines 9, 10c,						
14	First five yea	a rs. If the Form 990 is foi	r the organization	's fırst, second, th	nird, fourth, or fift	th tax year as a se	ction 501(c)(3)	organization,
•		and stop here		, ,	, ,	•	()()	▶ □
Se		nputation of Public S	Support Perce	ntage				
15		percentage for 2019 (lin			column (f))		15	
16	• •	: percentage from 2018 S		•	(//		16	
		nputation of Investr					1 -0	
17		come percentage for 201			line 13. column (f	f))	17	
		come percentage from 20	,		25, 201411111 (1	• / /		
18				·	on line 14	aa 1 E ja waana 41	18 22 1/20/ and l	na 17 ia
		ort tests—2019. If the						_
		/3%, check this box and s	-					▶□
b	33 1/3% sup	pport tests—2018. If the	e organization did	not check a box	on line 14 or line	19a, and line 16 is	more than 33 i	_
	not more than	n 33 1/3%, check this box	and stop here.	The organization (qualifies as a publ	licly supported org	anızatıon	▶□
20	Private found	dation. If the organization	n did not check a	box on line 14, 1	19a, or 19b, check	this box and see	instructions	ightharpoons

Schedule A (Form 990 or 990-EZ) 2019

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7

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10a

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V) Section A. All Supporting Organizations

			Yes	No
•	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			
	ın section 509(a)(1) or (2)	2		

	describe the designation If historic and continuing relationship, explain	1	Γ
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		
	ın section 509(a)(1) or (2)	2	
la	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)		Γ
	below	3a	Γ
1.	Did the appropriate and the cook appropriate appropriate and propriate and appropriate and app		Т

		_	
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		
	ın 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 (b) and (c)		
	below	3a	
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		
ı	determination		

3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	3a		
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			
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	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b ın Part I, answer (b) and (c) below	4a		

	the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the			
	determination	3b	1	
С	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	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b ın Part I, answer (b) and (c) below	4a		
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			

	Checked 12a or 12b in Part 1, answer (b) and (c) below	4a		
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 (b) and (c) 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	<u> </u>	
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the		<u> </u>	
	organization's organizing document?	5b	1	

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

Was the organization controlled directly or indirectly at any time during the tax year by one or more disgualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

than (1) its supported organizations. (11) 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

Substitutions only. Was the substitution the result of an event beyond the organization's control?

organization's supported organizations? If "Yes," provide detail in Part VI.

complete Part I of Schedule L (Form 990 or 990-EZ)

the organization had excess business holdings)

organization had an interest? If "Yes," provide detail in Part VI.

provide detail in Part VI.

answer line 10b below

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

5c

6

7

8

9a

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2019

	dule A (Form 990 of 990-E2) 2019		۲	age :
Pai	t IV Supporting Organizations (continued)			
_			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 (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c		
	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's 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 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		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that	-		
•	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	2		
S	ection C. Type II Supporting Organizations		1	
	., 11 2 2		Yes	No
	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		
S	ection D. All Type III Supporting Organizations			
			Yes	No
•	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 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?			
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported 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)			
	D	2		
	By reason of the relationship described in (2), 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	3		
<u> </u>	ection E. Type III Functionally-Integrated Supporting Organizations			
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct	ions)		
	The organization satisfied the Activities Test Complete line 2 below	,		
	The organization is the parent of each of its supported organizations. Complete line 3 below			
	_		_L \	
(instru	ctions)	
	Activities Test Answer (a) and (b) below.		Yes	No
ā	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 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		
ŀ	Did the activities described in (a) 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 these activities but for the organization's involvement	2 h		
}	Parent of Supported Organizations Answer (a) and (b) below.	2b		
	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? <i>Provide details in Part VI</i> .	3a		
ŀ	Did the organizations? Provide details in Part VI. Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard	3h		

3b

Page **6**

Schedule A (Form 990 or 990-F7) 2019

1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E					
	Section A - Adjusted 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				
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8				
	Section 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)	1				
a	Average monthly value of securities	1a				
b	Average monthly cash balances	1 b				
С	Fair market value of other non-exempt-use assets	1c				
d	Total (add lines 1a, 1b, and 1c)	1d				
е	Discount claimed for blockage or other factors (explain in detail in Part VI)					
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 1-1/2% 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 035	6				
7	Recoveries of prior-year distributions	7				
8	Minimum Asset Amount (add line 7 to line 6)	8				
	Section C - Distributable Amount			Current Year		
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1				
2	Enter 85% of line 1	2				
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3				

3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use Enter 1-1/2% 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 035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
	Section C - Distributable Amount		Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Enter greater of line 2 or line 3 Income tax imposed in prior year	4 5	
		<u> </u>	

instructions)

_		1.0		
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to who			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions	(iii) Distributable

8	Distributions to attentive supported organizations to wh details in Part VI) See instructions			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
	Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI) See instructions			
3	Excess distributions carryover, if any, to 2019			
_	From 2014		(

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2019			
a From 2014			
b From 2015			
c From 2016			
d From 2017 .			
e From 2018			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			

h Applied to 2019 distributable amount i Carryover from 2014 not applied (see

j Remainder Subtract lines 3g, 3h, and 3i from 3f 4 Distributions for 2019 from Section D, line 7

a Applied to underdistributions of prior years **b** Applied to 2019 distributable amount c Remainder Subtract lines 4a and 4b from 4

instructions)

8 Breakdown of line 7

d Excess from 2018. e Excess from 2019.

a Excess from 2015. **b** Excess from 2016. c Excess from 2017.

\$

5	Remaining underdistributions for years prior to 2019, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions		
6	Remaining underdistributions for 2019 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions		
7	Excess distributions carryover to 2020. Add lines 3j and 4c		

Schedule A (Form 990 or 990-EZ) (2019)

Additional Data

Software ID: Software Version:

EIN: 31-0833384

Name: GREATER COLUMBUS ARTS COUNCIL

Page 8

Schedule A (Form 990 or 990-EZ) 2019

Part VI Supplemental Information. Provide the explanations required by Part II. line 10. Part II. line 17a or 17b. Part

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)

instructions)
Facts And Circumstances Test

SCHEDULE C

• Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

DLN: 93493091003370

Open to Public

Department of the Treasury Internal Revenue Service

(Form 990 or 990-

EZ)

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.

• Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B

▶Go to www.irs.gov/Form990 for instructions and the latest information. If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

Inspection

f the	Section 501(c)(3) organizations that	e Part I-A only n Form 990, Part IV, Line 4, or Form 9 have filed Form 5768 (election under s have NOT filed Form 5768 (election ur	ection 501(h)) Co	mplete Part	II-A Do not	comp	plete Part II-E	
f the Pro	e organization answered "Yes" or xy Tax) (see separate instruction:	n Form 990, Part IV, Line 5 (Proxy Tax s), then						
	Section 501(c)(4), (5), or (6) organiz me of the organization	ations Complete Part III		E	mployer id	entif	fication num	nber
	EATER COLUMBUS ARTS COUNCIL				1-0833384			
Par	t I-A Complete if the organ	nization is exempt under sectio	n 501(c) or is			niza	tion.	
1	Provide a description of the organ "political campaign activities")	ızatıon's dırect and ındırect political can	npaign activities ir	n Part IV (se	e instruction	s for	definition of	
2	Political campaign activity expend	itures (see instructions)			>	\$_		
3	Volunteer hours for political camp	· · · · · · · · · · · · · · · · · · ·						
		nization is exempt under sectio						
1 2	· · · · · · · · · · · · · · · · · · ·	x incurred by the organization under se x incurred by organization managers ui			•	\$ <u>-</u>		
3		tion 4955 tax, did it file Form 4720 for t			•	₽_	Yes	П
4a	Was a correction made?	·····	,				□ Yes	⊔ No □ No
b	If "Yes," describe in Part IV							
Par	t I-C Complete if the organ	nization is exempt under sectio	n 501(c), exce	ept section	1 501(c)(3).		
1	·	ed by the filing organization for section	•			\$_		
2	function activities	anızatıon's funds contrıbuted to other o	rganizations for se	ection 527 ex	kempt ▶	\$_		
3	Total exempt function expenditure	es Add lines 1 and 2 Enter here and or	n Form 1120-POL,	lıne 17b	>	\$_		
4	Did the filing organization file For	m 1120-POL for this year?					☐ Yes	□ No
5	organization made payments For of political contributions received	employer identification number (EIN) of each organization listed, enter the amo that were promptly and directly deliver the (PAC) If additional space is needed,	ount paid from the ed to a separate p	filing organ olitical organ	ızatıon's fund	ds A	lso enter the	
	(a) Name	(b) Address	(c) EIN	filing org funds If	int paid from ganization's none, enter -0-		(e) Amount contributions and promp directly delives separate proganization enter	received otly and rered to a political If none,
1								
2								
3								
1								
5								
5								
or P	aperwork Reduction Act Notice, see t	he instructions for Form 990 or 990-EZ.	Cat	No 50084S	Schedule (C (Foi	rm 990 or 990)-EZ) 2019

activity

Volunteers?

Media advertisements?

expenditure next year?

Return Reference

Taxable amount of lobbying and political expenditures (see instructions)

instructions), and Part II-B, line 1 Also, complete this part for any additional information

STAKEHOLDERS

Supplemental Information

5

Part IV

PART II-B, LINE 1

Mailings to members, legislators, or the public?

Publications, or published or broadcast statements?

1

c

Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?

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

(b)

Amount

(a)

Yes | No

Nο

Nο

Nο

Νo

Nο

Nο Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Yes 36,000 Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Nο Other activities? Yes 3,375 Total Add lines 1c through 1i 39,375 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? Nο b If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section Part III-A 501(c)(6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 1 1 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." 1 Dues, assessments and similar amounts from members 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a Current year b Carryover from last year 2b C 2c 3 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see

Explanation

LOBBYING SERVICES PROVIDED BY CONTRACT COMPANIES INCLUDED PROVIDING INFORMATION AND INTRODUCTIONS TO ELECTED OFFICIALS, KEEPING GCAC INFORMED OF PENDING LEGISLATION THAT COULD IMPACT ARTS FUNDING, AND STRATEGIC COMMUNICATION TO COMMUNITY MEMBERS AND

4

SCHEDULE D

DLN: 93493091003370

OMB No 1545-0047

Supplemental Financial Statements ▶ Complete if the organization answered "Yes," on Form 990,

Open to Public

Department of the Treasury Internal Revenue Service

(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.

Inspection

	ne of the organization ATER COLUMBUS ARTS COUNCIL		Employer identification number						
OIL	ATEN COLOMBOS ANTS COUNCIL	31-0833384							
Pa	rt I Organizations Maintaining Donor Advis		or Accounts.						
	Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts								
1	Total number at end of year	(a) beneficially and	(b) runus una cener accounts						
2	Aggregate value of contributions to (during year)								
3	Aggregate value of grants from (during year)								
4	Aggregate value at end of year								
5	Did the organization inform all donors and donor adviso organization's property, subject to the organization's ex		advised funds are the						
6	Did the organization inform all grantees, donors, and do charitable purposes and not for the benefit of the donor private benefit?								
Pai	t II Conservation Easements. Complete if the organization answered "Ye	s" on Form 990, Part IV, line 7.							
1	Purpose(s) of conservation easements held by the organ								
	Preservation of land for public use (e g , recreation	n or education) $igsqcup$ Preservation of a	an historically important land area						
	Protection of natural habitat	Preservation of a	a certified historic structure						
	Preservation of open space								
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	qualified conservation contribution in the f	orm of a conservation Held at the End of the Year						
а	Total number of conservation easements		2a						
b	Total acreage restricted by conservation easements		2b						
С	Number of conservation easements on a certified historic	structure included in (a)	2c						
d	Number of conservation easements included in (c) acqui structure listed in the National Register	red after 7/25/06, and not on a historic	2d						
3	Number of conservation easements modified, transferre tax year ▶	d, released, extinguished, or terminated b	y the organization during the						
4	Number of states where property subject to conservatio	n easement is located 🕨							
5	Does the organization have a written policy regarding th	ne periodic monitoring, inspection, handling	g of violations,						
	and enforcement of the conservation easements it holds	7	☐ Yes ☐ No						
6	Staff and volunteer hours devoted to monitoring, inspect	ting, handling of violations, and enforcing	conservation easements during the year						
7	Amount of expenses incurred in monitoring, inspecting, ►\$	handling of violations, and enforcing conse	ervation easements during the year						
8	Does each conservation easement reported on line 2(d) and section $170(h)(4)(B)(II)$?	above satisfy the requirements of section	170(h)(4)(B)(ı) ☐ Yes ☐ No						
9	In Part XIII, describe how the organization reports consbalance sheet, and include, if applicable, the text of the	footnote to the organization's financial sta	pense statement, and						
Dar	the organization's accounting for conservation easement Organizations Maintaining Collections		ther Similar Assets						
	Complete if the organization answered "Ye		inci Silillai Assets.						
1a	If the organization elected, as permitted under SFAS 11 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its finan	public exhibition, education, or research in	n furtherance of public service,						
b	If the organization elected, as permitted under SFAS 11 historical treasures, or other similar assets held for publ following amounts relating to these items								
(i) Revenue included on Form 990, Part VIII, line 1		▶ \$						
(i	i)Assets included in Form 990, Part X		<u></u> -						
2	If the organization received or held works of art, historic following amounts required to be reported under SFAS 1		nancial gain, provide the						
а									
-	Revenue included on Form 990, Part VIII, line 1		▶ \$						

d Equipment .

Par	t III	Organizations Ma	aintaining Coll	ections of Art, I	Historical T	reasu	res, or Other S	imilar Asset	S (continu	ed)
3	Using	the organization's acq (check all that apply)								
а		Public exhibition			d 🗌	Loan	or exchange progra	ams		
b		Scholarly research			e 🗌	Other				
c		Preservation for future	e generations							
4	Provid Part X	de a description of the	organization's colle	ections and explain	how they furt	her the	e organization's exe	mpt purpose in		
5		g the year, did the org s to be sold to raise fur						ar	Yes [□ No
Pa	rt IV	Escrow and Cust Complete if the ord X, line 21.			m 990, Part	IV, lıı	ne 9, or reported	an amount o	n Form 9	90, Part
1a		e organization an agent led on Form 990, Part I		n or other intermed	liary for contri	butions	s or other assets no	_	Yes 🛭	☑ No
b	If "Ye	s," explain the arrange	ement in Part XIII	and complete the fo	ollowing table			Amou	nt	
С		ning balance		·	-		1c			
d	_	ons during the year					1d			
е		butions during the year	r				1e			
f		g balance					1f			
2a		e organization include	an amount on For	m 990. Part X. line	21. for escrov	v or cu:	stodial account liab	ılıtv? \square	Yes F	 ☑ No
		s," explain the arrange						_	.03	
	rt V	Endowment Fund		Check here if the c	Apidilacion na.	Decin	provided in Fare XI	<u></u>		
		Complete if the or		ered "Yes" on For			ne 10.			
			-	(a) Current year	(b) Prior yea		(c) Two years back (_	ır years back
1 a	Beginn	ing of year balance .		1,905,661	· · · · · · · · · · · · · · · · · · ·	3,574	1,528,965	1,296,9		829,677
b	Contrib	outions		8,684,094	5,81	2,482	5,866,237	5,254,7	94	5,281,787
С	Net inv	estment earnings, gair	ns, and losses							
d	Grants	or scholarships								
е		expenditures for facilitions	es	7,801,693	5,88	0,395	5,421,628	5,022,7	99	4,814,494
f	Admini	strative expenses .								
g	End of	year balance	[2,788,062	1,90	5,661	1,973,574	1,528,9	65	1,296,970
2	Provid	de the estimated perce	ntage of the curre	nt year end balance	(line 1g, colu	mn (a)) held as			
а	Board	l designated or quasi-e	ndowment 🕨 💢	34 000 %						
b	Perma	anent endowment 🕨								
С	Temp	orarily restricted endov	wment ▶ 66 0	00 %						
	The p	ercentages on lines 2a	, 2b, and 2c shoul	d equal 100%						
3а		nere endowment funds ization by	not in the possess	sion of the organizat	on that are h	eld and	d administered for	the		res No
	(i) ur	related organizations							3a(i)	No
_	• •	elated organizations .							3a(ii)	No
ь		s" on 3a(II), are the rel	_						3b	
4		be in Part XIII the inte			wment funds					
Pa	rt VI	Land, Buildings, Complete if the ord			m 990 Dart	TV lu	ne 11a See Forn	n 990 Dart V	line 10	
	Descri	ption of property	(a) Cost or other		or other basis ((c) Accumulated de		(d) Book	value
			(Investmer		- (
1a	Land									
	Building									
		old improvements				35,465		35,465		0
-			i	1						

657,848

86,389

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)).

134,670

134,670

523,178

86,389

Part VII	Investments—Other Securities.	Dowt IV.	111	. Coo Form 000 I	7a-+ V	line 10
	Complete if the organization answered "Yes" on Form 990, (a) Description of security or category (including name of security)	(b) Book value	ne III	(c) Metho Cost or end-of	d of va	aluation
	l derivatives					
(2) Closely- (3)Other	held equity interests					
(A)						
(B)						
(C)						
(D)						
(E)						
(F)						
(G)						
(H)						
Total. (Colum	n (b) must equal Form 990, Part X, col (B) line 12)	•				_
Part VIII	Investments—Program Related. Complete if the organization answered 'Yes' on Form 990,	Part IV. I	ne 110	. See Form 990,	Part >	(, line 13,
	(a) Description of investment			(b) Book value	(c)) Method of valuation
						t or end-of-year market value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	n (b) must equal Form 990, Part X, col (B) line 13)		•			
Part IX	Other Assets. Complete if the organization answered 'Yes' on Form 990, F	Part IV, lıı	ne 11d	. See Form 990, Par	t X, lır	
(1)	(a) Description					(b) Book value
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	mn (b) must equal Form 990, Part X, col (B) line 15)				•	
Part X	Other Liabilities.	· · ·	···			
1.	Complete if the organization answered 'Yes' on Form 990, F (a) Description of liability	Part IV, lii	ne 11e	or 11f.See Form	990,	Part X, line 25. (b) Book value
(1) Federal (2)	income taxes					
					_	
(3)						
(4)					<u> </u>	
(5)					<u> </u>	
(6)					<u> </u>	
(7)					<u> </u>	
(8)					<u> </u>	
(9)						
	<i>n (b) must equal Form 990, Part X, col (B) line 25)</i> or uncertain tax positions In Part XIII, provide the text of the footno	te to the o	rganızat	ion's financial state	<u> </u> ments	15,581 that reports the
	's liability for uncertain tay positions under FIN 48 (ASC 740). Check					_

Part XI

2

3

4

b

c 5

1

2

c

d

3 4

b

5

Part XIII

See Additional Data Table

Part XII

Schedule D (Form 990) 2019

62.041

154.068

77.455

9,857

77,455

9.857

2e

3

4c

5

2e

3

4c

5

Page 4

293,564

9,857

12,341,825

10,870,774

77,455

9,857

10.803.176

Schedule D (Form 990) 2019

10,793,319

12,331,968

С	Recoveries of prior year grants	٠	•	•
d	Other (Describe in Part XIII)			
e	Add lines 2a through 2d .		_	_

Other (Describe in Part XIII)

Add lines **4a** and **4b**

Donated services and use of facilities . . .

Other (Describe in Part XIII)

Supplemental Information

Add lines 2a through 2d . .

Return Reference

а	Net unrealized gains (losses) on investments			
b	Donated services and use of facilities			
c	Recoveries of prior year grants			
d	Other (Describe in Part XIII)			

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Amounts included on Form 990, Part VIII, line 12, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b .

Amounts included on line 1 but not on Form 990, Part IX, line 25

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . .

2b 2c 2d

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

2a

4a

4b

2a 2b

2c

2d

4a

4b

Explanation

Page 5	Schedule D (Form 990) 2019			
	ormation (continued)	Part XIII Supplemental Info		
	Explanation	Return Reference		
	<u> </u>			

Schedule D (Form 990) 2019

Additional Data

Software ID: Software Version:

EIN: 31-0833384

Name: GREATER COLUMBUS ARTS COUNCIL

Supplemental Information

Return Reference	Explanation
	GCAC AGREED TO HOLD, MANAGE, AND DISBURSE FUNDS, ACTING AS FISCAL AGENT FOR VARIOUS ORGANI ZATIONS GCAC HAS NOT REPORTED THE RECEIPT OF THESE FUNDS AS CONTRIBUTIONS SINCE THE TRANS FERS ARE SUBJECT TO RESPECTIVE ORGANIZATION'S UNILATERAL RIGHT TO REDIRECT THE USE OF THES E ASSETS TO OTHER BENEFICIARIES AS OF DECEMBER 31, 2019 AND 2018 GCAC DID NOT HAVE ANY AS SETS HELD FOR OTHERS

supplemental Information							
Return Reference	Explanation						
PART V, LINE 4	THE GREATER COLUMBUS ARTS COUNCIL HAD BOTH BOARD DESIGNATED AND TEMPORARILY RESTRICTED NET ASSETS THE BOARD DESIGNATED FUNDS HAVE BEEN DESIGNATED FOR THE PURPOSES OF OPERATING RES ERVES AND A FUTURE OFFICE RELOCATION THE TEMPORARILY RESTRICTED NET ASSETS ARE COMPOSED O F TWO SEPARATE TEMPORARILY RESTRICTED FUNDS, WHICH INCLUDE FISCALLY SPONSORED ORGANIZATION S AND THE COMMUNITY FUNDING FUND THESE SEPARATE FUNDS ARE RESTRICTED TO FUND THE DESIGNAT ED PROGRAMS						

Supplemental Information	
Return Reference	Explanation
PART X, LINE 2	FIN 48 FOOTNOTE GENERALLY ACCEPTED ACCOUNTING PRINCIPLES REQUIRED THE GCAC TO EVALUATE THE LEVEL OF UNCERTAINTY RELATED TO WHETHER TAX POSITIONS TAKEN WILL BE SUSTAINED UPON EXAMI NATION ANY POSITIONS TAKEN THAT DO NOT MEET THE MORE-LIKELY-THAN-NOT THRESHOLD MUST BE QUANTIFIED AND RECORDED AS A LIABILITY FOR UNRECOGNIZED TAX BENEFITS IN THE ACCOMPANYING STATEMENTS OF FINANCIAL POSITION ALONG WITH INTEREST AND PENALTIES THAT WOULD BE PAYABLE TO THE TAXING AUTHORITIES UPON EXAMINATION THE GCAC BELIEVES THAT NONE OF THE TAX POSITIONS TAKEN WOULD MATERIALLY IMPACT THE FINANCIAL STATEMENTS, AND NO SUCH LIABILITIES HAVE BEEN RECORDED

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	EVENT EXPENSES INCLUDED ON STATEMENT OF REVENUE 77,451 ROUNDING 4

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS	EVENT EXPENSES INCLUDED ON STATEMENT OF REVENUE 77,451 ROUNDING 4

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations e Solicitation of non-government grants Internet and email solicitations Solicitation of government grants Phone solicitations ☐ Special fundraising events ☐ In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of individual (ii) Activity (iii) Did (iv) Gross receipts (v) Amount paid to (vi) Amount paid to or entity (fundraiser) fundraiser have from activity (or retained by) (or retained by) custody or fundraiser listed in organization control of col (i) contributions? Yes No Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Cat No 50083H Schedule G (Form 990 or 990-EZ) 2019

Supplemental Information Regarding

Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a

Attach to Form 990 or Form 990-EZ.

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

DLN: 93493091003370
OMB No 1545-0047

Open to Public

Inspection

Employer identification number

31-0833384

SCHEDULE G

(Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

GREATER COLUMBUS ARTS COUNCIL

Internal Revenue Service

	rt III Fundraising Events. Comple	ete if the organization a	answered "Yes" on For	m 990. Part IV. line 18	Page 2 3. or reported more
	than \$15,000 of fundraising e gross receipts greater than \$	event contributions and			
	groot receipts greater than p	(a)Event #1	(b) Event #2	(c)Other events	(d) Total events (add col (a) through
		(event type)	(event type)	(total number)	col (c))
Reverne		(,	(************************************	,	
_	1 Gross receipts	128,802			128,802
	·	120,002			120,002
	2 Less Contributions	128,802			128,802
	4 Cash prizes				
S	5 Noncash prizes				
Direct Expenses	6 Rent/facility costs	6,204			6,204
ă	7 Food and beverages	29,046			29,046
ਲੂ	8 Entertainment	2,150			2,150
Die	9 Other direct expenses	40,051			40,051
	10 Direct expense summary Add lines 4	through 9 ın column (d)		>	77,451
	11 Net income summary Subtract line 10	from line 3, column (d)		.	51,351
Pai	Gaming. Complete if the org on Form 990-EZ, line 6a.	anızatıon answered "Ye	s" on Form 990, Part I	V, line 19, or reported	l more than \$15,000
<u>e</u>		(a) Bingo	(b) Pull tabs/Instant	(c) Other gaming	(d) Total gaming (add
venu		(a) billigo	bingo/progressive bingo		col (a) through col (c))
Revenue	1 Gross revenue	(a) billigo	bingo/progressive bingo		
s	1 Gross revenue	(a) billigo	bingo/progressive bingo		
S		(a) billigo	bingo/progressive bingo		
S	2 Cash prizes	(a) billigo	bingo/progressive bingo		
s	2 Cash prizes				
s	2 Cash prizes	(a) billigo	Yes %	☐ Yes %	
s	2 Cash prizes			☐ Yes % ☐ No	
s	2 Cash prizes	☐ Yes% ☐ No	Yes		
s	2 Cash prizes	Yes % No	☐ Yes %	□ No ►	
s	2 Cash prizes	Yes%_ No through 5 in column (d) thine 7 from line 1, column ion conducts gaming activities in each of	☐ Yes % %	□ No ►	
b Direct Expenses	2 Cash prizes	Yes%_ No through 5 in column (d) thine 7 from line 1, column ion conducts gaming activities in each of	Yes % No	□ No . . .<	col (a) through col (c))
b 6 Direct Expenses	2 Cash prizes	Yes % No through 5 in column (d) It line 7 from line 1, column Ion conducts gaming activities in each of	Yes % No	No ▶ ▶	Yes No
b 6 Direct Expenses	2 Cash prizes	Yes % No through 5 in column (d) the line 7 from line 1, column ion conducts gaming activities in each of	Yes % No n (d)	No ▶ ▶	Yes No

sche	edule G (Form 990 or 990-EZ) 2019				F	age 3
.1	Does the organization conduct gaming activities with nonmembers?			□Yes	□Ne	
2	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership formed to administer charitable gaming?	or other entity		□Yes		
3	Indicate the percentage of gaming activity conducted in					
а	The organization's facility		13a			%
b	An outside facility		13b			%
4	Enter the name and address of the person who prepares the organization's gaming/special e	events books and re	cords			
	Name •					
	Address ▶					
5a	Does the organization have a contract with a third party from whom the organization receive revenue?	es gaming		□Yes	□No	
b	If "Yes," enter the amount of gaming revenue received by the organization $ ightharpoonup$ \$amount of gaming revenue retained by the third party $ ightharpoonup$ \$	and th	e			
c	If "Yes," enter name and address of the third party					
	Name ►					
	Address ▶					
.6						
0	Gaming manager information					
	Name ►					
	Gaming manager compensation ▶ \$					
	Description of services provided ▶					
	☐ Director/officer ☐ Employee ☐ Independen	nt contractor				
7	Mandatory distributions					
а	Is the organization required under state law to make charitable distributions from the gamin retain the state gaming license?	ng proceeds to		□Yes	Пио	
b	Enter the amount of distributions required under state law distributed to other exempt organ	nizations or spent			_ 110	
	in the organization's own exempt activities during the tax year ▶ \$					
Par	Supplemental Information. Provide the explanations required by Part I, III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide an					5.
_	Return Reference Explan	nation				

Schedule G (Form 990 or 990-EZ) 2019

DLN: 93493091003370 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations**, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. **Open to Public** ▶ Attach to Form 990. Department of the Inspection ▶ Go to www.irs.gov/Form990 for the latest information. Treasury Internal Revenue Service Name of the organization Employer identification number GREATER COLUMBUS ARTS COUNCIL 31-0833384 **General Information on Grants and Assistance** Part I Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 1 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) organization (book, FMV, appraisal, noncash assistance or assistance grant cash or government assistance other) (1) See Additional Data (4)(5)(6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2019

(7)

Explanation

Schedule I (Form 990) 2019

PART I, LINE 2 THE ORGANIZATION APPROVAL OF GRANTS IS DEPENDENT ON A REVIEW BY THE STAFF AND BOARD GRANT COMMITTEE RECIPIENTS OF GRANTS ARE REQUIRED TO SUBMIT FINAL REPORTS GRANTS ARE ACCRUED AND DISTRIBUTED ON A SCHEDULE APPROVED BY THE BOARD AS PART OF THE MONTHLY FINANCIAL STATEMENTS

Additional Data

322 MOUNT VERNON AVE

333 WEST BROAD STREET

COLUMBUS, OH 43215

THE CENTER OF SCIENCE AND

COLUMBUS, OH 43215

INDUSTRY

Software ID: Software Version:

EIN: 31-0833384

Name: GREATER COLUMBUS ARTS COUNCIL

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash

31-4383802

422.001

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (e) Amount of non-(f) Method of valuation if applicable (book, FMV, appraisal, organization grant cash or government assistance other)

501(C)(3)

(q) Description of non-cash assistance

(h) Purpose of grant or assistance

BALLET METROPOLITAN INC 31-0858562 501(C)(3) 417,005

GRANTS TO PROMOTE ART AND CULTURE IN

GRANTS TO PROMOTE

ART AND CULTURE IN

COLUMBUS

COLUMBUS

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 31-4379447 501(C)(3) 409.083 IGRANTS TO PROMOTE COLUMBUS MUSEUM OF ART

480 EAST BROAD STREET ART AND CULTURE IN COLUMBUS COLUMBUS, OH 43215 FRIENDS OF THE 31-1657027 501(C)(3) 255.750

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

COLUMBUS, OH 43203

GRANTS TO PROMOTE CONSERVATORY LART AND CULTURE IN 1777 EAST BROAD STREET **ICOLUMBUS**

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 31-1306419 501(C)(3) 374.634 IGRANTS TO PROMOTE WEXNER CENTER FOR THE ARTS ART AND CULTURE IN

ICOLUMBUS

1871 NORTH HIGHT ST LCOLUMBUS COLUMBUS. OH 43210

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

55 F STATE STREET

COLUMBUS, OH 43215

COLUMBUS SYMPHONY 31-6402408 501(C)(3) 426.307 IGRANTS TO PROMOTE ORCHESTRA INC ART AND CULTURE IN

organization or government if applicable grant cash assistance (book, FMV, appraisal, other) or assistance or assi

(e) Amount of non-

(f) Method of valuation

(a) Description of

(h) Purpose of grant

ART AND CULTURE IN

ICOLUMBUS

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(a) Name and address of

503 S FRONT ST SUITE 260

COLUMBUS, OH 43215

(b) EIN

FOR THE PERFORMING ARTS
INC
55 E STATE STREET
COLUMBUS, OH 43215

SHADOART PRODUCTIONS 31-1340461 501(C)(3) 387,552

ART AND CULTURE IN COLUMBUS

GRANTS TO PROMOTE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance

THE JAZZ ARTS GROUP OF COLUMBUS 400 S FIFTH ST SUITE 103 COLUMBUS, OH 43215	31-0852944	501(C)(3)	246,831		GRANTS TO PROMOTE ART AND CULTURE IN COLUMBUS
PRO MUSICA CHAMBER	31-0952873	501(C)(3)	256,517		GRANTS TO PROMOTE

ORCHESTRA OF COLUMBUS ART AND CULTURE IN INC COLUMBUS 620 E BROAD ST SUITE 300

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 23-7065803 501(C)(3) 136.276 IGRANTS TO PROMOTE THE COMMUNITY ARTS PROJECT INC ART AND CULTURE IN

ICOLUMBUS

867 MT VERNON AVENUE LCOLUMBUS COLUMBUS, OH 43203 31-1168461 196.371 CONTEMPORARY AMERICAN

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

55 F STATE ST

COLUMBUS, OH 43215

501(C)(3) IGRANTS TO PROMOTE THEATER COMPANY ART AND CULTURE IN

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 31-0671802 501(C)(3) 176.620 IGRANTS TO PROMOTE COLUMBUS CHILDRENS

COLUMBUS

THEATRE ART AND CULTURE IN 177 F NAGHTEN STREET LCOLUMBUS COLUMBUS, OH 43215 OPERA COLUMBUS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

COLUMBUS, OH 43215

31-1020676 501(C)(3) 188.222 GRANTS TO PROMOTE 55 E STATE ST ART AND CULTURE IN

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 31-0677681 501(C)(3) 155.815 OHIO DESIGNER CRAFTSMEN IGRANTS TO PROMOTE 1665 W 5TH AVENUE ART AND CULTURE IN LCOLUMBUS 20-1617421 501(C)(3) 156.839 GRANTS TO PROMOTE

COLUMBUS & TECHNICAL ASSISTANCE

COLUMBUS, OH 43212 SHORT NORTH STAGE PO BOX 10689 ART AND CULTURE IN

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

ART AND CULTURE IN

COLUMBUS

GLASS AXIS	31-1237593	501(C)(3)	97,251		GRANTS TO PROMOTE
610 W TOWN ST			·		ART AND CULTURE IN
COLLIMBUIC OIL 4224E					COLLIMBLIC

COLUMBUS, OH 43215 TCOLUMBUS GATEWAY FILM FOUNDATION 47-3178799 501(C)(3) 143,538 IGRANTS TO PROMOTE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1550 N HIGH ST COLUMBUS, OH 43201

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 31-1136182 501(C)(3) 98.346 IGRANTS TO PROMOTE THE THURBER HOUSE INC

ICOLUMBUS

77 JEFFERSON AVENUE ART AND CULTURE IN COLUMBUS COLUMBUS, OH 43215 COLUMBUS GAY MEN'S 31-1306169 501(C)(3) 72.944 GRANTS TO PROMOTE CHORUS LART AND CULTURE IN

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

51 JEFFERSON AVENUE COLUMBUS, OH 43215

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance CHAMBER MUSIC COLUMBUS 31-0679936 501(C)(3) 37.171 IGRANTS TO PROMOTE

PO BOX 14445 ART AND CULTURE IN COLUMBUS, OH 43214 ACTOR'S THEATRE OF 31-1054953 501(C)(3) 46.030

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

COLUMBUS, OH 43206

COLUMBUS GRANTS TO PROMOTE COLUMBUS LART AND CULTURE IN 1000 CITY PARK AVENUE **ICOLUMBUS**

(a) Name and address of (b) EIN (q) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance COLUMBUS CIVIC THEATER 26-3424315 501(C)(3) 16.621 IGRANTS TO PROMOTE

(e) Amount of non-

(f) Method of valuation

ART AND CULTURE IN

ICOLUMBUS

3837 INDIANOLA AVE COLUMBUS, OH 43214			,		ART AND CULTURE IN COLUMBUS & TECHNICAL ASSISTANCE
ASIAN FESTIVAL	31-0813672	501(C)(3)	25,000		GRANTS TO PROMOTE

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

1367 WINGATE DR

DELAWARE, OH 43015

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 31-4389673 501(C)(3) 129.580 IGRANTS TO PROMOTE OHIO HISTORICAL SOCIETY

800 E 17TH AVE ART AND CULTURE IN COLUMBUS, OH 43211 COLUMBUS HARMONY PROJECT 27-1819074 501(C)(3) 23.700

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

COLUMBUS, OH 43203

GRANTS TO PROMOTE PRODUCTIONS LART AND CULTURE IN 779 E LONG ST **ICOLUMBUS**

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 31-0914612 501(C)(3) 43.043 IGRANTS TO PROMOTE COLUMBUS LANDMARKS LTURE IN

COLUMBUS

FOUNDATION 57 JEFFERSON AVENUE COLUMBUS, OH 43215		(), /	٠		1	ART AND CULT COLUMBUS
AVATEABLE LICHT THEATRE	26 0701652	501(C)(3)	22 750			CRANTS TO BE

IGRANTS TO PROMOTE AVAILABLE LIGHT THEATRE 26-0/81652 501(C)(3) 23,/50 77 SOUTH HIGHT ST ART AND CULTURE IN

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance

(e) Amount of non-

(f) Method of valuation

(a) Description of

(h) Purpose of grant

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(a) Name and address of

(b) EIN

CARTOON CROSSROADS 51 JEFFERSON AVENUE SUITE 204 COLUMBUS, OH 43215	47-1706241	501(C)(3)	25,000		GRANTS TO PROMOTE ART AND CULTURE IN COLUMBUS
COLUMBUS & CENTRAL OHIO CHILDREN'S CHORUS &	31-1455959	501(C)(3)	34,857		GRANTS TO PROMOTE ART AND CULTURE IN

FOUNDATION ICOLUMBUS & 760 EAST BROAD ST TECHNICAL COLUMBUS, OH 43205 ASSISTANCE

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance COLUMBUS COLLEGE OF ART & 31-0820394 501(C)(3) 21,250 IGRANTS TO PROMOTE ART AND CULTURE IN DECIGN

TECHNICAL ASSISTANCE

60 CLEVELAND AVE COLUMBUS, OH 43215					I .	COLUMBUS
EVOLUTION THEATRE INC PO BOX 21072 COLUMBUS, OH 43221	45-2747793	501(C)(3)	24,249			GRANTS TO PROMOTE ART AND CULTURE IN COLUMBUS &

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

ART AND CULTURE IN

COLUMBUS

OPERA PROJECT COLUMBUS	45-2324535	501(C)(3)	20,000		GRANTS TO PROMOTE
PO BOX 14185					ART AND CULTURE IN
COLLIMBLIC OLL 42244					COLLIMBUIC

COLUMBUS, OH 43214 TCOLUMBUS WILD GOOSE CREATIVE 26-3180268 501(C)(3) 26.250 GRANTS TO PROMOTE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

2491 SUMMIT ST COLUMBUS, OH 43202

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 31-1120828 501(C)(3) 20.000 IGRANTS TO PROMOTE VAUD-VILLITIES CULTURE IN

ART AND CULTURE IN

COLUMBUS

DED LIEBDING DROBLIGHTONG	46 4455004	504/63/03	12 500		CD ANTO TO
PRODUCTIONS 4411 TAMARACK BLVD COLUMBUS, OH 43229			·		ART AND CU COLUMBUS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

566 W RICH ST

COLUMBUS, OH 43215

IGRANTS TO PROMOTE RED HERRING PRODUCTIONS 46-1455994 501(C)(3) 12.5001

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance or government other) assistance MADLAB THEATRE 31-1635762 501(C)(3) 24.943 IGRANTS TO PROMOTE 227 NORTH 3RD ST ART AND CULTURE IN COLUMBUS, OH 43215 COLUMBUS & TECHNICAL ASSISTANCE IGRANTS TO PROMOTE

TECHNICAL ASSISTANCE

28,000 OHIOANA LIBRARY 31-4379616 501(C)(3) ASSOCIATION ART AND CULTURE IN 274 E FIRST AVE SUITE 300 COLUMBUS &

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(3) 17.500 FRIENDS OF EARLY MUSIC INC. 31-1242710 IGRANTS TO PROMOTE ART AND CULTURE IN LCOLUMBUS 31-1222044 501(C)(3) 17.601 GRANTS TO PROMOTE

COLUMBUS & TECHNICAL ASSISTANCE

1 COLLEGE AND MAIN COLUMBUS, OH 43209 OHTODANCE 77 SOUTH HIGH STREET ART AND CULTURE IN

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 26-4110056 501(C)(3) 15.348 IGRANTS TO PROMOTE CAPRICCIO VOCAL ENSEMBLE

PO BOX 1225 ART AND CULTURE IN WORTHINGTON, OH 43085 COLUMBUS COLUMBUS SONGWRITERS 46-2535230 501(C)(3) 9.139

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

COLUMBUS, OH 43221

GRANTS TO PROMOTE ASSOCIATION LART AND CULTURE IN 3830 SADDLEBROOK CT **ICOLUMBUS**

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(3) 6.000 FIRST NIGHT COLUMBUS 31-1445788 IGRANTS TO PROMOTE PO BOX 2816 ART AND CULTURE IN WESTERVILLE, OH 43082 LCOLUMBUS LINCOLN THEATRE 20-5886656 501(C)(3) 10.480 GRANTS TO PROMOTE ASSOCIATION ART AND CULTURE IN

COLUMBUS &

TECHNICAL ASSISTANCE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

55 E STATE ST

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

IGRANTS TO PROMOTE ART AND CULTURE IN

COLUMBUS

OYO DANCE COMPANY	47-4771200	501(C)(3)	8,400		GRANTS TO PROMOTE
104 PARSONS AVE					ART AND CULTURE IN
COLUMBUS OH 43206					COLLIMBUS

11,660

COLUMBUS, OR 43200 COLUMBUS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

SUMMER JAM WESTGATE

254 S WESTGATE AVE COLUMBUS, OH 43204 47-2350863

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 01-0692587 501(C)(3) 7.110 IGRANTS TO PROMOTE CAMILLE CATHERINE

1436 CHELMSFORD COURT ART AND CULTURE IN COLUMBUS, OH 43229 OHIO PERFORMANCE 26-2331932 501(C)(3) 6.868 ACADEMY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

COLUMBUS, OH 43229

COLUMBUS GRANTS TO PROMOTE LART AND CULTURE IN 4411 TAMARACK BLVD **ICOLUMBUS**

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

ART AND CULTURE IN

COLUMBUS

MAROON ARTS GROUP 81-0802458 501(C)(3) 20.279 GRANTS TO PROMOTE PO BOX 83454 IART AND CULTURE IN COLUMBUS, OH 43203 COLUMBUS

SIDE HUSTLE SYNDICATE 82-4337779 501(C)(3) 27.544 GRANTS TO PROMOTE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

584 RICHARDS RD COLUMBUS, OH 43214

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance or government other) assistance VSA OHIO 31-1255393 501(C)(3) 11.038 IGRANTS TO PROMOTE 77 SOUTH HIGH STREET ART AND CULTURE IN COLUMBUS & SECOND FLOOR COLUMBUS, OH 43215 TECHNICAL ASSISTANCE 21,000 STREETLIGHT GUILD 82-3894251 501(C)(3) IGRANTS TO PROMOTE 3505 SCOTTWOOD RD ART AND CULTURE IN

COLUMBUS & TECHNICAL ASSISTANCE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 31-1284873 501(C)(3) 8.881 IGRANTS TO PROMOTE COLUMBUS GOSPELFEST

PO BOX 32318 COLUMBUS, OH 43232		, , , ,	•		ART AND CULTURE IN COLUMBUS
COLUMBUS DOWNTOWN	76-0704655	501(C)(3)	12,500		GRANTS TO PROMOTE

DEVELOPMENT CORP TART AND CULTURE IN 150 S FRONT ST STE 210 **ICOLUMBUS**

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

ART AND CULTURE IN

COLUMBUS

THE JEWISH CENTER	31-4379496	501(C)(3)	12,000		GRANTS TO PROMOTE
1125 COLLEGE AVE					ART AND CULTURE IN
COLUMBUS OH 43209					COLLIMBUS

1125 COLLEGE AVE COLUMBUS, OH 43209		, , ,	,		ART AND CULTURE IN COLUMBUS
ROY G BIV	31-1306238	501(C)(3)	14,700		GRANTS TO PROMOTE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

435 W RICH ST

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 31-1277720 501(C)(3) 7.650 IGRANTS TO PROMOTE SIX STRINGS CONCERT P O BOX 9330 ART AND CULTURE IN ICOLUMBUS

COLUMBUS, OH 43209 COLUMBUS BLACK 81-3809233 501(C)(3) 5.355 INTERNATIONAL FILM FESTIVAL

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

COLUMBUS, OH 43205

GRANTS TO PROMOTE ART AND CULTURE IN **ICOLUMBUS** 1335 FAIR AVE UNIT 11

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 45-2712431 501(C)(3) 7.937 IGRANTS TO PROMOTE IMAGINE PRODUCTIONS OF

ART AND CULTURE IN

COLUMBUS

COLUMBUS 23 W STARR AVE COLUMBUS, OH 43201		, , , ,	, i		I .	ART AND CULTURE IN COLUMBUS
SOUTHEAST INC	31-0940189	501(C)(3)	6,745			GRANTS TO PROMOTE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

16 W LONG ST

COLUMBUS, OH 43215

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 501(C)(3) 7.000 SPOTLIGHT COLUMBUS 81-5317152 IGRANTS TO PROMOTE 3102 ABBEY KNOLL DR ART AND CULTURE IN LCOLUMBUS GRANTS TO PROMOTE

ASSISTANCE

LEWIS CENTER, OH 43035 XCI ATM 26-1195005 501(C)(3) 8.986 811 E BRIGHTON RD

ART AND CULTURE IN COLUMBUS, OH 43225 COLUMBUS & TECHNICAL

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance INICAL

	00 1000000				
CAMILLE CATHERINE 1436 CHELMSFORD COURT COLUMBUS, OH 43229	01-0692587	501(C)(3)	6,800		TECHNI ASSIST

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

COLUMBUS, OH 43235

STANCE URBAN STRINGS 83-1233959 7.0001 ITECHNICAL 501(C)(3) 191 MELYERS CT ASSISTANCE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 81-3313035 501(C)(3) 5.000 HIXON DANCE TECHNICAL PO BOX 82630 ASSISTANCE COLUMBUS, OH 43202 STATE OF THE ARTS 45-2582455 501(C)(3) 5.905 GRANTS TO PROMOTE PRODUCTION ART AND CULTURE IN

COLUMBUS &

TECHNICAL ASSISTANCE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

80 VILLA CREEK DR

REYNOLDSBURG, OH 43068

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 26-0208894 501(C)(3) 8.898 IGRANTS TO PROMOTE THE FUSE FACTORY 295 OLENTANGY ST ART AND CULTURE IN COLUMBUS &

ASSISTANCE

COLUMBUS, OH 43202

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

THIOSSANE INSTITUTE

685 KIMBALL PLACE COLUMBUS, OH 43203

TECHNICAL ASSISTANCE 13-4273266 501(C)(3) 6.980 TECHNICAL

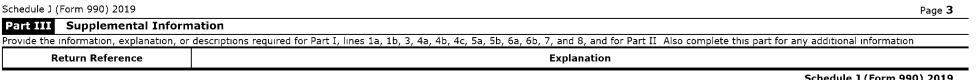
efil	e GRAPHIC pr	int - DO NOT PROCESS	As Filed Dat	a -	DLN: 934	19309	1003	370
Sch	edule J	Co	mpensat	ion Information	00	1B No	1545-0	0047
(For	n 990)	For certain Officer	s, Directors, T	rustees, Key Employees, and Hig	hest			
		➤ Complete if the orga	Compensa nization answ	ated Employees vered "Yes" on Form 990, Part IV,	line 23.	20	19)
_			▶ Attach	to Form 990.			to Pul	
•	tment of the Treasury al Revenue Service	▶ Go to <u>www.irs.gov</u>	<u>// </u>	instructions and the latest inforn	nation.		ectio	
	me of the organiza				Employer identificat	ion nu	ımber	
GKE	ATER COLUMBUS AF	CTS COUNCIL			31-0833384			
Pa	rt I Questi	ons Regarding Compensat	ion					
							Yes	No
1a				the following to or for a person listed y relevant information regarding thes				
		or charter travel		Housing allowance or residence for j				
	_	companions	님	Payments for business use of person				
		nification and gross-up payments	님	Health or social club dues or initiation				
	☐ Discretion	ary spending account	Ц	Personal services (e g , maid, chauf	reur, cner)			
b				follow a written policy regarding payi ve? If "No," complete Part III to expla		1b		
2				or allowing expenses incurred by all r, regarding the items checked on Lin	0.102	2		
	directors, truste	es, officers, including the CEO/EX	recutive Directo	r, regarding the items checked on thi	e ia.			
3				ed to establish the compensation of the not check any boxes for methods	ie			
	_	•	11,	CEO/Executive Director, but explain i	n Part III			
	☐ Compens	ation committee	~	Written employment contract				
		ent compensation consultant		Compensation survey or study				
	·	of other organizations	\checkmark	Approval by the board or compensa	tion committee			
4	During the year related organiza		90, Part VII, Se	ction A, line 1a, with respect to the fi	ling organization or a			
_	_							Na
a b		ance payment or change-of-contr r receive payment from, a supple		ified retirement plan?		4a 4b		No No
c	•	r receive payment from, an equit	•	•		4c		No
	If "Yes" to any o	of lines 4a-c, list the persons and	provide the app	olicable amounts for each item in Part	III			
	- 1/ \/-	/						
5), 501(c)(4), and 501(c)(29) and on Form 990. Part VII. Section	_	the organization pay or accrue any				
•		ontingent on the revenues of		the organization pay or accrue any				
а	The organization	17				5a		No
b	Any related orga					5b		No
	-	5a or 5b, describe in Part III						
6		ed on Form 990, Part VII, Section ontingent on the net earnings of	A, line 1a, did	the organization pay or accrue any				
а	The organization					6a		No
b	Any related orga					6b		No
-	•	6a or 6b, describe in Part III	A long 4 1 1 1	Maria	i			
7	payments not d	escribed in lines 5 and 6? If "Yes,	" describe in Pa		1	7		No
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," de	escribe			Ne
9	If "Yes" on line 3	3, did the organization also follow	the rebuttable	presumption procedure described in	Regulations section	9		No
For I		ction Act Notice, see the Inst	ructions for Ec	orm 990 Cat No. 5	0053T Schedule 1		. 000)	2019

Schedule J (Form 990) 2019

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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 are not listed on Form 990. Part VII.

Note. The sum of column	Dono 1s (B	ot list any individuals that)(i)-(iii) for each listed inc	: are not listed on Form 9 dividual must equal the to	90, Part VII otal amount of Form 990,	Part VII, Section A, line 1	a, applicable column (D) and (E) amounts for tha	t ındıvıdual
(A) Name and Title			of W-2 and/or 1099-MIS		(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
1 THOMAS KATZENMEYER PRESIDENT	(i)	233,466	28,893	0	28,893	7,536	298,788	0
	(ii)	0	0	0	0	0	0	0



efile GRAPHIC	print - DO I	NOT PROCES	S As F	iled Data -					DL	N: 93	4930	910	03370
Schedule L		Tran	sactio	ns with Ir	ntereste	d Person	ıs			OI	MB No	1545	-0047
(Form 990 or 990-	EZ) <mark>▶ Com</mark> p	lete if the orga	anization a	nswered "Yes	on Form 9	90, Part IV, li	nes 25	5a, 2	25b, 26	5,	20	1	0
		27, 28a,		Bc, or Form 99 ch to Form 990			юь.				Z U		フ
Department of the Treas	urs 1	►Go to <u>www.ii</u>		<u>m990</u> for inst			ormat	ion.			Open (to P	ublic
Internal Revenue Servic											Insp		
Name of the orga GREATER COLUMBUS							Em	ploy	er ide	entifica	ation n	umb	er
									3384				
				(c)(3), section 5		,		_)		
	Name of disgu			Form 990, Part : Relationship be					escript		(d) Cor	rected?
1 (4)	riame or aloqu	amica person	(5)		organization	imica person ai	`	•	ansacti		Yes		No
							-						
2 Enter the am	ount of tax inc	urred by the or	nanization r	nanagers or dis	gualified persi	ons during the	vear ur	nder	section	,			
4958			·				year ur	iuei	_	\$			
3 Enter the am	ount of tax, if	any, on line 2, a	above, reim	bursed by the o	rganization .				•	\$			
Part III Loa	ns to and/o	r From Inter	ested Pe	rsons.									
Com	plete if the orga	anızatıon answe	red "Yes" o	n Form 990-EZ,	Part V, line 3	38a, or Form 99	0, Part	ΙV,	line 26	, or if	the org	anıza	tion
repo	rted an amount	on Form 990, p (c) Purpose	Part X, line	5, 6, or 22	(a) On an al	(f) Balance	(~)	т		L. \		1 14/	
interested person	with organization	on of loan		inization?	(e) Original principal	due	(g) defau			h) ved by	(i) Written d by agreement?		
·					amount					poard or mmittee?		-	
			То	From	-		Yes	No	Yes	No	Yes		No
			10	110111			103	110	103	110	1.03		110
 Total					<u> </u>								
	to or Assist	anca Banafit	ina Tata	ested Perso	<u></u> \$								
				es" on Form 9		. line 27.							
(a) Name of intere		(b) Relationship		(c) Amount	<u> </u>	(d) Type o	of assis	tanc	e	(e) Pu	rpose o	f ass	stance
		nterested perso				' ' ' '				•	•		
		organizat	ion	-									
	+			 									
				1									
For Paperwork Redu	ction Act Notice	see the Instru	ctions for Ec	rm 990 or 990-F	7. C	at No 50056A		Sch	odula I	(Form	990 05	990-	F71 201

Complete if the organization a	answered "Yes" on Forr	n 990, Part IV, line 28a	a, 28b, or 28c.		
(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sh o organiz rever	f ation's
				Yes	No
(1) YOHANNAN TERRELL	OWNER OF WARHOL & WALL ST LTD		MANAGEMENT , MARKETING SERVICES AND PAYMENTS TO ARTISTS PROVIDED FOR FISCALLY SPONSORSED EVENTS RELATED TO THE HARLEM RENAISSANCE		No

Explanation

Schedule I (Form 990 or 990-F7) 2019

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference

Part V

Supplemental Information

efile GRAPHI	C print - DO NOT PROCESS	DLN:	93493091003370
SCHEDULE (Form 990 or 9 EZ)	Complete to provide information for responses to specific Form 990 or 990-EZ or to provide any additional info Attach to Form 990 or 990-EZ.	questions on ormation.	2019 Open to Public Inspection
Name Brthe of gar GREATER COLUMBUS	S ARTS COUNCIL	Employer identi 31-0833384	fication number
990 Schedule	O, Supplemental Information		
Return Reference	Explanation		
FORM 990, PART III, LINE 4A, DESCRIPTION OF PROGRAM SERVICE		S AND CULTURAL PROGITATIONS, ARTS EXHIBIT SES FUNDS IT RECEIVES INUES OTHER THAN NATES CONTRACT, GCAC HAG GRANTS ARE AWARD TECHNICAL ASSISTANCE SHIPS, INTERNATIONAL EXPENDITURES DO NOT YEAR FOR ALLOCATIONS FOR ST) FUNDING CAN ALSO DANCE WITH ITS CONTRACT TY FUNDING EXPENSES	GRAMMING TO THE TS, CONCERTS, AND FROM THE CITY OF TIONWIDE ARENA) AS TO DIRECT AT ED TO LOCAL ARTS DE (BOOST) ARTIST EXCHANGE, DT TOTAL 75%, THE ON GCAC USES GENERAL BE USED FOR RACT, GCAC HAS TO IS IF ELIGIBLE

Return Reference	Explanation
FORM 990, PART III, LINE 4B, DESCRIPTION OF PROGRAM SERVICE	COLUMBUS ARTS FESTIVAL GCAC ORGANIZES THE ANNUAL COLUMBUS ARTS FESTIVAL, WHICH IS HELD IN EARLY JUNE THE FESTIVAL PROVIDES OPPORTUNITIES FOR THE COMMUNITY TO VIEW AND PURCHASE WORK OF LOCAL AND NATIONAL ARTISTS, LISTEN TO CONTINUOUS LIVE MUSIC, AND PARTICIPATE IN ART ACTIVITIES FREE OF CHARGE THE REVENUES OF THE FESTIVAL REPRESENT CORPORATE SPONSORSHIPS, CONTRIBUTIONS, AND BOOTH AND TENT RENTALS, AS WELL AS REVENUES FROM CONCESSIONS FUNDS RECEIVED FROM THE CITY OF COLUMBUS HOTEL/MOTEL EXCISE TAX ARE NOT USED TO SUPPORT THE COLUMBUS ARTS FESTIVAL FESTIVAL EXPENSES ARE FOR OPERATIONAL AND ADMINISTRATIVE EXPENSES, PROGRAMMING, EQUIPMENT, MATERIALS, AND SUPPLIES

Return Reference	Explanation
FORM 990, PART III, LINE 4C, DESCRIPTION OF PROGRAM SERVICE	COMMUNITY ARTS PROGRAMS ART IN THE HOUSE THE PROGRAM DELIVERS AFTERSCHOOL AND SUMMER ART S PROGRAMMING TO STUDENTS THROUGH THE YOUTH PROGRAMS OF THE COLUMBUS FEDERATION OF SETTLEM ENTS AND COMMUNITY DEVELOPMENT FOR ALL PEOPLE WORKING IN PARTNERSHIP WITH LOCAL TEER PROG RAM TRANSIT ARTS, ART IN THE HOUSE IS ABLE TO OFFER A NETWORK OF ARTS OPPORTUNITIES FOR K- 12 STUDENTS IN COLUMBUS THIS PROGRAM WAS TRANSFERRED TO THE OHIO ALLIANCE FOR ARTS EDUCATION DURING 2012 DURING THE YEARS ENDED DECEMBER 31, 2019 AND 2018, GCAC PROVIDED SUPPORT TO ASSIST THIS PROGRAM ARTISTS-IN-SCHOOLS ARTISTS IN SCHOOLS CONNECTS PROFESSIONAL ARTIS TS AND ARTS GROUPS WITH K-12 SCHOOLS AND OTHER EDUCATIONAL VENUES ACROSS THE STATE THE TE ACHING ARTISTS OFFER PROGRAMS RANGING FROM CLASSROOM WORKSHOPS TO LONG-TERM RESIDENCIES THE PROGRAM PROVIDES A WAY FOR SCHOOLS, PARKS AND RECREATION CENTERS, SENIOR FACILITIES, CO RRECTIONAL FACILITIES, LIBRARIES, AS WELL AS PRIVATE SECTOR BUSINESSES AND INDIVIDUALS, TO ACCESS ARTIST SERVICES THIS PROGRAM WAS TRANSFERRED TO THE OHIO ALLIANCE FOR ARTS EDUCATION DURING 2012 DURING THE YEARS ENDED DECEMBER 31, 2019 AND 2018, GCAC PROVIDED SUPPORT TO ASSIST THIS PROGRAM MENOMEN THE FRANKLIN COUNTY NEIGHBORHOOD DARTS THE FRANKLIN COUNTY NEIGHBORHOOD ARTS THE FRANKLIN COUNTY NEIGHBORHOOD DARTS PROGRAM SUPPORTS ARTISTIC PROGRAMMING WITHIN A WIDE VARIETY OF ORGANIZATIONS ACROSS FRANKLIN COUNTY THIS SMALL GRANT PROGRAM IS DESIGNED TO SUPPORT COMMUNITY-MINDED PROJECT S THAT MAY HAVE DIFFICULTY ACCESSING TRADITIONAL ARTS FUNDINGS OSUACES THIS PROGRAM WAS TRANSFERRED TO THE OHIO ALLIANCE FOR ARTS EDUCATION DURING 2012 DURING THE YEARS ENDED DECE MBER 31, 2019 AND 2018, GCAC PROVIDED SUPPORT TO ASSIST THIS PROGRAM JUNIOR ACHIEVEMENT THE PROGRAM IS THE WORLD'S LARGEST ORGANIZATION DEDICATED TO EDUCATING SOURCES THIS PROGRAM WAS TRANSFERRED TO THE OHIO ALLIANCE FOR ARTS EDUCATION DURING 2012 DURING THE YEARS E

Paturn

Reference	Explanation
FORM 990, PART III, LINE 4C, DESCRIPTION OF PROGRAM SERVICE	ONS OPERATE AS A PROJECT OF GCAC UNTIL OBTAINING TAX EXEMPT STATUS GCAC RECEIVES GRANTS, TAX- DEDUCTIBLE CONTRIBUTIONS, AND OTHER REVENUES THAT ARE MADE AVAILABLE TO THE FISCALLY S PONSORED ORGANIZATION FOR THE PURPOSE OF CARRYING OUT THE PROJECT GCAC RECEIVES AN ADMINI STRATIVE FEE FOR THE SERVICES PROVIDED

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Return

Pafaranca

Reference	
FORM 990,	PER GCAC'S ANNUAL CONTRACT WITH THE CITY OF COLUMBUS, THE CITY WILL BE REPRESENTED BY FIVE
PART VI,	MEMBERS TO THE GCAC BOARD OF TRUSTEES TWO MEMBERS APPOINTED BY THE MAYOR, TWO MEMBERS
SECTION A,	APPOINTED BY CITY COUNCIL, AND ONE MEMBER RECOMMENDED BY THE MAYOR AND APPROVED BY CITY
LINE 7A	COUNCIL PER GCAC'S ANNUAL CONTRACT WITH FRANKLIN COUNTY, THE COUNTY WILL BE REPRESENTED BY
	THREE MEMBERS APPOINTED TO THE GCAC BOARD OF TRUSTEES

Explanation

Return Explanation
Reference

FORM 990, PART VI, SECTION B, LINE 11B

990 Schedule O, Supplemental Information

REVIEWED AND KEPT ON FILE

Return

LINE 12C

Reference	
FORM 990,	THE MEMBERS OF THE BOARD OF TRUSTEES COMPLETE A CONFLICT OF INTEREST STATEMENT AT THE BEGINNING
PART VI, SECTION B.	OF EVERY BOARD YEAR, JULY 1ST STAFF COMPLETES A CONFLICT OF INTEREST STATEMENT AT THE DATE OF HIRE AND EACH YEAR THEREAFTER AT THE BEGINNING OF THE BOARD YEAR. JULY 1ST THESE DOCUMENTS ARE THEN

Explanation

990 Schedule O, Supplemental Information

Return Explanation

Reference

Reference	
FORM 990,	THE COMPENSATION OF THE PRESIDENT IS REVIEWED BY THE EXECUTIVE COMMITTEE ANNUALLY USING
PART VI,	COMPARABILITY DATA IN MAKING THAT DECISION THE PRESIDENT REVIEWS AND APPROVES COMPENSATION
SECTION B,	RANGES FOR OTHER STAFF WITHIN THE ORGANIZATION AND USES COMPARABILITY DATA IN CONJUCTION WITH
LINE 15	COMPENSATION DECISIONS ALL DECISIONS REGARDING COMPENSATION ARE PROPERLY DOCUMENTED BY THE
	ORGANIZATION

Return Explanation

FORM 990, PART VI, PUBLIC UPON REQUEST FINANCIAL STATEMENTS ARE POSTED WITHIN THE ANNUAL REPORT ON THE SECTION C, INTEREST POLICY AVAILABLE TO THE ORGANIZATION'S WEBSITE

Return Reference	Explanation
FORM 990, PART XII, LINE 2C, OVERSIGHT OF FINANCIAL STATEMENT AUDIT	THE ORGANIZATION HAS A COMMITTEE THAT ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT AND SELECTION OF THE INDEPENDENT ACCOUNTANT THE PROCESS BY WHICH THE ORGANIZATION OVERSEES THE AUDIT AND SELECTS THE INDEPENDENT ACCOUNTANT HAS NOT CHANGED FROM PRIOR YEARS