

2009 TAX RETURN

Government Copy

Client: CIFA

Prepared for: Cincinnati Institute of Fine Arts
dba ArtsWave
20 East Central Pkwy Suite 200
Cincinnati, OH 45202
513 871 2787

Prepared by: CINCINNATI INSTITUTE OF FINE ART/TAFT MUSEUM
20 E CENTRAL PKWY #200
CINCINNATI, OH 45202-2019
(513) 871-2787

Date: July 29, 2011

Comments:

Route to: _____

**CINCINNATI INSTITUTE OF FINE ART/TAFT MUSEUM
20 E CENTRAL PKWY #200
CINCINNATI, OH 45202-2019
(513) 871-2787**

July 29, 2011

Cincinnati Institute of Fine Arts
dba ArtsWave
20 East Central Pkwy Suite 200
Cincinnati, OH 45202

Dear Client:

Enclosed is your 2009 Federal Return of Organization Exempt from Income Tax. The original should be signed at the bottom of page one. No tax is payable with the filing of this return. Mail your Federal return on or before January 18, 2011 to:

DEPARTMENT OF TREASURY
INTERNAL REVENUE SERVICE
OGDEN, UT 84201-0027

Please be sure to call us if you have any questions.

Sincerely,

CINCINNATI INSTITUTE OF FINE ART/TAFT MUSEUM

20 E CENTRAL PKWY #200
CINCINNATI, OH 45202-2019
(513) 871-2787

Client CIFA
July 29, 2011

**Cincinnati Institute of Fine Arts
dba ArtsWave
20 East Central Pkwy #200
Cincinnati, OH 45202
513 871 2787**

FEDERAL FORMS

Form 990	2009 Return of Organization Exempt from Income Tax
Schedule A	Organization Exempt Under Section 501(c)(3)
Schedule B	Schedule of Contributors
Schedule C	Political Campaign and Lobbying Activities
Schedule D	Schedule D
Schedule I	Grants and Other Assistance Inside U.S.
Schedule J	Schedule J
Schedule M	Non-Cash Contributions
Schedule O	Supplemental Information

FEE SUMMARY

Preparation Fee

Return of Organization Exempt From Income Tax

2009

Department of the Treasury
Internal Revenue Service

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

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

Open to Public Inspection

For the **2009** calendar year, or tax year beginning **9/01**, **2009**, and ending **8/31**, **2010**

B Check if applicable:	C	D Employer Identification Number	E Telephone number
<input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See specific instructions. Cincinnati Institute of Fine Arts dba ArtsWave 20 East Central Pkwy #200 Cincinnati, OH 45202	31-0537138	513 871 2787
		F Name and address of principal officer: Mary McCullough-Hudson Same As C Above	G Gross receipts \$ 35,714,889.
I Tax-exempt status <input checked="" type="checkbox"/> 501(c) (3) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		J Website: ▶ theartswave.org	
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of Formation: 1927	M State of legal domicile: OH

Part I Summary			
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>We are a leader and catalyst advancing the vitality and vibrancy of our communities by mobilizing the creative energy of our entire region.</u>		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets.		
	3 Number of voting members of the governing body (Part VI, line 1a).....	3	44
	4 Number of independent voting members of the governing body (Part VI, line 1b).....	4	44
	5 Total number of employees (Part V, line 2a).....	5	29
	6 Total number of volunteers (estimate if necessary).....	6	1,482
	7a Total gross unrelated business revenue from Part VIII, column (C), line 12.....	7a	0.
b Net unrelated business taxable income from Form 990-T, line 34.....	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h).....	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g).....	12,436,071.	12,483,604.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d).....	22,592.	25,317.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e).....	-354,591.	251,684.
	12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12).....	12,104,072.	12,760,605.
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3).....	10,332,904.
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).....		1,918,868.	2,045,289.
16a Professional fundraising fees (Part IX, column (A), line 11e).....			
b Total fundraising expenses (Part IX, column (D), line 25) ▶ <u>1,302,711.</u>			
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f).....		1,616,440.	1,684,448.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25).....	13,868,212.	14,122,002.	
19 Revenue less expenses. Subtract line 18 from line 12.....	-1,764,140.	-1,361,397.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16).....	Beginning of Year	End of Year
	21 Total liabilities (Part X, line 26).....	83,608,933.	85,152,229.
	22 Net assets or fund balances. Subtract line 21 from line 20.....	43,155,892.	43,673,725.
		40,453,041.	41,478,504.

Part II Signature Block			
Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.		
	▶ _____ Signature of officer	_____ Date	
	▶ <u>Mary McCullough-Hudson</u> Type or print name and title.		President & CEO
Paid Preparer's Use Only	Preparer's signature ▶ <u>Self-Prepared</u>	Date	Check if self-employed <input type="checkbox"/> Preparer's identifying number (see instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ _____	EIN ▶ _____	_____
	_____	Phone no. ▶ _____	_____

May the IRS discuss this return with the preparer shown above? (see instructions)..... **Yes** **No**

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission:

We are a leader and catalyst advancing the vitality and vibrancy of our communities by mobilizing the creative energy of our entire region.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? See Schedule O.

X Yes No

If 'Yes,' describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

No Yes X

If 'Yes,' describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 10,645,123. including grants of \$ 10,392,265.) (Revenue \$ 13,640.)

Grantmaking and Services: Distribution of unrestricted operating support to arts organizations throughout the greater Cincinnati region to help them create a vital arts scene and all the community-wide benefits that come with that- from economic vitality to a greater sense of connectedness for the people who live there. Distribution of smaller project grants to support emerging arts groups. Capacity building grants and support for arts and culture groups that arise from and attract diverse populations to create a more vibrant arts environment that reflects and benefits the community in all its diversity.

4b (Code:) (Expenses \$ 519,463. including grants of \$) (Revenue \$)

Awareness and Accessibility. Organization of a weekend of free samplings of visual and performing arts at multiple venues across the regional community. Organization of community engagement events that connect people through the arts. Development of new strategy to build broad support for the arts, including new organization name, brand, and website.

4c (Code:) (Expenses \$ 393,387. including grants of \$) (Revenue \$)

Connection and Engagement: Provision of technical support to grantee organizations through best practice sharing and training, networking with and recruitment of diverse board and committee members, and promoting growth and viability of multicultural arts organizations and community-based arts centers.

4d Other program services. (Describe in Schedule O.) See Schedule O

(Expenses \$ 254,595. including grants of \$) (Revenue \$)

4e Total program service expenses 11,812,568.

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)? <i>If 'Yes,' complete Schedule A.</i>	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If 'Yes,' complete Schedule C, Part I.</i>		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If 'Yes,' complete Schedule C, Part II.</i>	X	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If 'Yes,' complete Schedule C, Part III.</i>		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If 'Yes,' complete Schedule D, Part I.</i>		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If 'Yes,' complete Schedule D, Part II.</i>		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If 'Yes,' complete Schedule D, Part III.</i>		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If 'Yes,' complete Schedule D, Part IV.</i>		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If 'Yes,' complete Schedule D, Part V.</i>	X	
11	Is the organization's answer to any of the following questions 'Yes'? <i>If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.</i>	X	
	• Did the organization report an amount for land, buildings and equipment in Part X, line 10? <i>If 'Yes,' complete Schedule D, Part VI.</i>		
	• Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If 'Yes,' complete Schedule D, Part VII.</i>		
	• Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If 'Yes,' complete Schedule D, Part VIII.</i>		
	• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If 'Yes,' complete Schedule D, Part IX.</i>		
	• Did the organization report an amount for other liabilities in Part X, line 25? <i>If 'Yes,' complete Schedule D, Part X.</i>		
	• 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? <i>If 'Yes,' complete Schedule D, Part X.</i>		
12	Did the organization obtain separate, independent audited financial statement for the tax year? <i>If 'Yes,' complete Schedule D, Parts XI, XII, and XIII.</i>	X	
12A	Was the organization included in consolidated, independent audited financial statement for the tax year? <i>If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional.</i>		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If 'Yes,' complete Schedule E.</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
14b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If 'Yes,' complete Schedule F, Part I.</i>		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If 'Yes,' complete Schedule F, Part II.</i>		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If 'Yes,' complete Schedule F, Part III.</i>		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If 'Yes,' complete Schedule G, Part I.</i>		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If 'Yes,' complete Schedule G, Part II.</i>		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If 'Yes,' complete Schedule G, Part III.</i>		X
20	Did the organization operate one or more hospitals? <i>If 'Yes,' complete Schedule H.</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If 'Yes,' complete Schedule I, Parts I and II.</i>	X	
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If 'Yes,' complete Schedule I, Parts I and III.</i>		X
23 Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J.</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? <i>If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25.</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If 'Yes,' complete Schedule L, Part I.</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If 'Yes,' complete Schedule L, Part I.</i>		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If 'Yes,' complete Schedule L, Part II.</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If 'Yes,' complete Schedule L, Part III.</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV.</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV.</i>		X
c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? <i>If 'Yes,' complete Schedule L, Part IV.</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M.</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M.</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If 'Yes,' complete Schedule N, Part I.</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If 'Yes,' complete Schedule N, Part II.</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part I.</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1.</i>		X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If 'Yes,' complete Schedule R, Part V, line 2.</i>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2.</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI.</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O.	X	

BAA

Form 990 (2009)

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1 a	Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable.		
	1 a 54		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
	1 b 0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2 a 29		
2 b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
b	If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O.		
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	X	
b	If 'Yes,' enter the name of the foreign country: ► <u>Cayman Islands</u> See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		X
b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If 'Yes,' indicate the number of Forms 8282 filed during the year.		
	7 d		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		
b	Did the organization make any distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12.	10 a	
b	Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10 b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from other members or shareholders.	11 a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11 b	
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year.	12 b	

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

Section A. Governing Body and Management

		Yes	No
1 a	Enter the number of voting members of the governing body		
1 b	Enter the number of voting members that are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee? See Schedule O	X	
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?		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?		X
6	Does the organization have members or stockholders?		X
7 a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
7 b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8 a	The governing body?	X	
8 b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director or 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		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10 a	Does the organization have local chapters, branches, or affiliates?		X
10 b	If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?		X
11 A	Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O		
12 a	Does the organization have a written conflict of interest policy? If 'No,' go to line 13	X	
12 b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12 c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done. See Schedule O	X	
13	Does the organization have a written whistleblower policy?	X	
14	Does the organization have a written document retention and destruction policy?	X	
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?		
15 a	The organization's CEO, Executive Director, or top management official. See Schedule O	X	
15 b	Other officers of key employees of the organization. If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)		X
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
16 b	If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosures

- 17** List the states with which a copy of this Form 990 is required to be filed ► OH KY
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
 Own website Another's website Upon request
- 19** Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Schedule O
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization:
 ► Mary McCullough-Hudson 20 E Central Pkwy, Suite 200 Cincinnati OH 45202 513-871-2787

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

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

1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

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

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

Check this box if the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Lee A. Carter Chairman	5	X		X				0.	0.	0.
Ellen Van Der Horst Vice Chair	1	X		X				0.	0.	0.
Edgar L. Smith Jr. Secretary	2	X		X				0.	0.	0.
Karen M. Hoquet Treasurer	1	X		X				0.	0.	0.
John F. Barrett Trustee	0	X						0.	0.	0.
Karen R. Bowman Trustee	1	X						0.	0.	0.
Margaret Buchanan Trustee	0	X						0.	0.	0.
Otto M. Budig, Jr. Trustee	1	X						0.	0.	0.
Paul W. Chellgren Trustee	0	X						0.	0.	0.
Alfonso Cornejo Trustee	0	X						0.	0.	0.
Cathy Crain Trustee	0	X						0.	0.	0.
Daniel B. Cunningham Trustee	1	X						0.	0.	0.
Nancy Heffner Donovan Trustee	0	X						0.	0.	0.
Kenneth Goldhoff Trustee	1	X						0.	0.	0.
Stephen L. Hightower Trustee	1	X						0.	0.	0.
Doris S. Jackson Trustee	1	X						0.	0.	0.
Julie S. Jansen Trustee	3	X						0.	0.	0.

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Judge Nathaniel R. Jones (Ret) Trustee	0	X					0.	0.	0.	
Kevin T. Kabat Trustee	0	X					0.	0.	0.	
Jan-Michele Lemon Kearney Trustee	1	X					0.	0.	0.	
Robert Lawrence Trustee	0	X					0.	0.	0.	
Dr. Mitchel D. Livingston Trustee	2	X					0.	0.	0.	
Jean Lydon-Rodgers Trustee	1	X					0.	0.	0.	
Timothy Maloney Trustee	0	X					0.	0.	0.	
David S. Meyer Trustee	1	X					0.	0.	0.	
James A. Miller Trustee	0	X					0.	0.	0.	
Marjorie Motch Trustee	0	X					0.	0.	0.	
Thomas Neyer, Jr. Trustee	0	X					0.	0.	0.	
Mikio Nishizu Trustee	1	X					0.	0.	0.	
Evans N. Nwankwo Trustee	0	X					0.	0.	0.	
1 b Total							501,014.	0.	51,809.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ▶ 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>		X
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? <i>If 'Yes' complete Schedule J for such individual.</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? <i>If 'Yes,' complete Schedule J for such person.</i>		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of Services	(C) Compensation
Topos Partnership 1865 Broad St Providence, RI 02905	Strategic consulting	137,500.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶ 1

SCHEDULE J-2
(Form 990)

Continuation Sheet for Form 990

OMB No. 1545-0047

2009

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.
▶ See instructions for Form 990.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the Organization Cincinnati Institute of Fine Arts	Employer Identification number 31-0537138
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Part I Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
J. Marvin Quin Trustee	0	X						0.	0.	0.
H. Roderick Robinson Trustee	0	X						0.	0.	0.
Jack Rouse Trustee	1	X						0.	0.	0.
Lisa Sauer Trustee	1	X						0.	0.	0.
Thomas R. Schiff Trustee	0	X						0.	0.	0.
Michael T. Schueler Trustee	1	X						0.	0.	0.
Kathy Selker Trustee	0	X						0.	0.	0.
Marilyn Shazor Trustee	0	X						0.	0.	0.
Robert Sibcy Trustee	0	X						0.	0.	0.
Peter S. Strange Trustee	1	X						0.	0.	0.
Carol G. Talbot Trustee	1	X						0.	0.	0.
Mary Tuuk Trustee	1	X						0.	0.	0.
Gail W. Wells Ph.D Trustee	0	X						0.	0.	0.
George H. Vincent Trustee	0	X						0.	0.	0.
Mary McCullough-Hudson President & CEO	50			X				236,106.	0.	23,939.
Teresa Haught CFO	50			X				143,328.	0.	14,946.
Margy Waller VP/Communications	50					X		121,580.	0.	12,924.

Part VIII Statement of Revenue

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns	1 a				
	b Membership dues	1 b				
	c Fundraising events	1 c				
	d Related organizations	1 d				
	e Government grants (contributions)	1 e				
	f All other contributions, gifts, grants, and similar amounts not included above	1 f 12,483,604.				
	g Noncash contribns included in lns 1a-1f: ... \$	167,584.				
h Total. Add lines 1a-1f	▶ 12,483,604.					
PROGRAM SERVICE REVENUE	2 a Admissions	Business Code 713990	25,317.	25,317.		
	b					
	c					
	d					
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f	▶ 25,317.				
OTHER REVENUE	3 Investment income (including dividends, interest and other similar amounts)	▶	820,480.		820,480.	
	4 Income from investment of tax-exempt bond proceeds	▶				
	5 Royalties	▶				
	6 a Gross Rents	(i) Real				
		(ii) Personal				
		b Less: rental expenses				
		c Rental income or (loss)				
	d Net rental income or (loss)	▶				
	7 a Gross amount from sales of assets other than inventory	(i) Securities	22385488.			
		(ii) Other				
		b Less: cost or other basis and sales expenses	22954284.			
		c Gain or (loss)	-568,796.			
	d Net gain or (loss)	▶ -568,796.			-568,796.	
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a				
		b Less: direct expenses	b			
		c Net income or (loss) from fundraising events	▶			
	9 a Gross income from gaming activities. See Part IV, line 19	a				
b Less: direct expenses		b				
c Net income or (loss) from gaming activities		▶				
10 a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b				
	c Net income or (loss) from sales of inventory	▶				
Miscellaneous Revenue	11 a	Business Code				
	b					
	c					
	d All other revenue					
	e Total. Add lines 11a-11d	▶				
12 Total revenue. See instructions	▶	12,760,605.	25,317.	0.	251,684.	

Part IX Statement of Functional Expenses

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

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

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	10,392,265.	10,392,265.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	427,376.	170,415.	166,221.	90,740.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B))	0.	0.	0.	0.
7 Other salaries and wages	1,303,814.	524,599.	157,019.	622,196.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	93,390.	39,196.	12,786.	41,408.
9 Other employee benefits	105,581.	35,801.	19,247.	50,533.
10 Payroll taxes	115,128.	47,661.	17,068.	50,399.
11 Fees for services (non-employees)				
a Management				
b Legal	20,116.	16,335.	3,131.	650.
c Accounting	17,595.		17,595.	
d Lobbying				
e Prof fundraising svcs. See Part IV, ln 17				
f Investment management fees	104,284.		104,284.	
g Other	367,236.	211,420.	145,742.	10,074.
12 Advertising and promotion	44,140.	6,250.		37,890.
13 Office expenses	94,547.	27,525.	8,928.	58,094.
14 Information technology	130,923.	38,091.	33,196.	59,636.
15 Royalties				
16 Occupancy	97,445.	34,902.	13,421.	49,122.
17 Travel	19,330.	9,640.	6,251.	3,439.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	41,144.	13,080.	24,456.	3,608.
20 Interest	23,092.		23,092.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	58,376.		58,376.	
23 Insurance	19,292.		19,292.	
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a <u>Community engagement programmi</u>	224,800.	224,800.		
b <u>Uncollectible pledge expense</u>	188,851.			188,851.
c <u>Furniture and equipment</u>	168,261.	3,059.	161,109.	4,093.
d <u>Recognition</u>	29,692.	1,490.	311.	27,891.
e <u>Miscellaneous</u>	22,718.	3,433.	15,198.	4,087.
f All other expenses	12,606.	12,606.		
25 Total functional expenses. Add lines 1 through 24f	14,122,002.	11,812,568.	1,006,723.	1,302,711.
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
ASSETS	1 Cash — non-interest-bearing.....		1	
	2 Savings and temporary cash investments.....	798,093.	2	3,248,352.
	3 Pledges and grants receivable, net.....	4,757,686.	3	4,829,429.
	4 Accounts receivable, net.....		4	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.....		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L..		6	
	7 Notes and loans receivable, net.....		7	
	8 Inventories for sale or use.....		8	
	9 Prepaid expenses and deferred charges.....	19,542.	9	29,996.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 682,076.		
	b Less: accumulated depreciation.....	10b 136,210.	53,751.	10c 545,866.
	11 Investments — publicly-traded securities.....	69,999,698.	11	65,940,093.
	12 Investments — other securities. See Part IV, line 11.....	5,337,565.	12	7,772,380.
	13 Investments — program-related. See Part IV, line 11.....	1,550.	13	23,650.
	14 Intangible assets.....		14	
	15 Other assets. See Part IV, line 11.....	2,641,048.	15	2,762,463.
16 Total assets. Add lines 1 through 15 (must equal line 34).....	83,608,933.	16	85,152,229.	
LIABILITIES	17 Accounts payable and accrued expenses.....	180,016.	17	216,380.
	18 Grants payable.....	221,978.	18	176,277.
	19 Deferred revenue.....		19	
	20 Tax-exempt bond liabilities.....		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D.....		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L.....		22	
	23 Secured mortgages and notes payable to unrelated third parties.....		23	435,199.
	24 Unsecured notes and loans payable to unrelated third parties.....		24	
	25 Other liabilities. Complete Part X of Schedule D.....	42,753,898.	25	42,845,869.
	26 Total liabilities. Add lines 17 through 25.....	43,155,892.	26	43,673,725.
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29 and lines 33 and 34.			
	27 Unrestricted net assets.....	8,725,031.	27	9,084,319.
	28 Temporarily restricted net assets.....	22,563,311.	28	23,000,730.
	29 Permanently restricted net assets.....	9,164,699.	29	9,393,455.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds.....		30	
	31 Paid-in or capital surplus, or land, building, and equipment fund.....		31	
32 Retained earnings, endowment, accumulated income, or other funds.....		32		
33 Total net assets or fund balances.....	40,453,041.	33	41,478,504.	
34 Total liabilities and net assets/fund balances.....	83,608,933.	34	85,152,229.	

BAA

Part XI Financial Statements and Reporting

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
2b	Were the organization's financial statements audited by an independent accountant?	X	
2c	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		
d	If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:		
	<input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3b	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.		

BAA

Form 990 (2009)

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants'.)	13171476.	12162955.	13113552.	12436071.	12483604.	63,367,658.
2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf.						0.
3 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.						0.
4 Total. Add lines 1-through 3.	13171476.	12162955.	13113552.	12436071.	12483604.	63,367,658.
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).						5,363,600.
6 Public support. Subtract line 5 from line 4.						58,004,058.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4.	13171476.	12162955.	13113552.	12436071.	12483604.	63,367,658.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	2,218,143.	2,123,866.	1,413,708.	1,123,705.	820,480.	7,699,902.
9 Net income from unrelated business activities, whether or not the business is regularly carried on.	321,347.					321,347.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						0.
11 Total support. Add lines 7 through 10.						71,388,907.
12 Gross receipts from related activities, etc. (see instructions).					12	0.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)).	14	81.3 %
15 Public support percentage from 2008 Schedule A, Part II, line 14.	15	82.2 %
16a 33-1/3 support test – 2009. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization.	<input checked="" type="checkbox"/>	
b 33-1/3 support test – 2008. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.	<input type="checkbox"/>	
17a 10%-facts-and-circumstances test – 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.	<input type="checkbox"/>	
b 10%-facts-and-circumstances test – 2008. 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 IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.	<input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.	<input type="checkbox"/>	

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants'.)						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose.						
3 Gross receipts from activities that are not an unrelated trade or business under section 513.						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
5 The value of services or facilities furnished by a governmental unit to the organization without charge.						
6 Total. Add lines 1 through 5.						
7a Amounts included on lines 1, 2, 3 received from disqualified persons.						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year.						
c Add lines 7a and 7b.						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6.						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c Add lines 10a and 10b.						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (add lns 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)).	15	%
16 Public support percentage from 2008 Schedule A, Part III, line 15.	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)).	17	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17.	18	%

19a 33-1/3 support tests – 2009. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33-1/3 support tests – 2008. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

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

Schedule B
(Form 990, 990-EZ,
or 990-PF)

Department of the Treasury
Internal Revenue Service

PUBLIC DISCLOSURE COPY

Schedule of Contributors

▶ **Attach to Form 990, 990-EZ, or 990-PF**

OMB No. 1545-0047

2009

Name of the organization Cincinnati Institute of Fine Arts
dba ArtsWave

Employer identification number
31-0537138

Organization type (check one):

Filers of:

Form 990 or 990-EZ

Section:

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule –

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

Special Rules –

For a section 501(c)(3) organization filing Form 990 or 990-EZ, that met the 33-1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc, purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc, purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc, contributions of \$5,000 or more during the year..... ▶ \$ _____

Caution: An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF) but it **must** answer 'No' on Part IV, line 2 of their Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990, 990EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Name of organization

Employer identification number

Cincinnati Institute of Fine Arts

31-0537138

Part I Contributors (see instructions.)

(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	----- ----- -----	\$ 1,175,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	----- ----- -----	\$ 1,017,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	----- ----- -----	\$ 485,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
---	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
---	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
---	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
---	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

Cincinnati Institute of Fine Arts

31-0537138

Part II Noncash Property (see instructions.)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	N/A		
_____		\$ _____	
_____		\$ _____	
_____		\$ _____	
_____		\$ _____	
_____		\$ _____	

Name of organization

Employer identification number

Cincinnati Institute of Fine Arts

31-0537138

Part III Exclusively religious, charitable, etc, individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. (Complete cols (a) through (e) and the following line entry.)

For organizations completing Part III, enter total of *exclusively* religious, charitable, etc, contributions of **\$1,000 or less** for the year. (Enter this information once – see instructions.) \$ N/A

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	N/A		

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2009

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

▶ **Complete if the organization is described below.**

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

Department of the Treasury
Internal Revenue Service

Open to Public Inspection

If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

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

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

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

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization Cincinnati Institute of Fine Arts	Employer identification number 31-0537138
--	---

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures ▶ \$ _____
- 3 Volunteer hours

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____ 0.
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____ 0.
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If 'Yes,' describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total of exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b. ▶ \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group.
B Check if the filing organization checked box A and 'limited control' provisions apply.

Limits on Lobbying Expenditures – (The term 'expenditures' means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1 a Total lobbying expenditures to influence public opinion (grass roots lobbying).....		14.													
b Total lobbying expenditures to influence a legislative body (direct lobbying).....		1,444.													
c Total lobbying expenditures (add lines 1a and 1b).....		1,458.	0.												
d Other exempt purpose expenditures.....		14,120,544.													
e Total exempt purpose expenditures (add lines 1c and 1d).....		14,122,002.	0.												
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		856,100.													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g Grassroots nontaxable amount (enter 25% of line 1f).....		214,025.	0.												
h Subtract line 1g from line 1a. If zero or less, enter -0-.....		0.	0.												
i Subtract line 1f from line 1c. If zero or less, enter -0-.....		0.	0.												
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?.....			<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)
 (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying non-taxable amount.....	853,522.	873,303.	843,411.	856,100.	3,426,336.
b Lobbying ceiling amount (150% of line 2a, column (e)).....					5,139,504.
c Total lobbying expenditures.....	1,602.	1,778.	1,440.	1,458.	6,278.
d Grassroots nontaxable amount.....	213,381.	218,326.	210,853.	214,025.	856,585.
e Grassroots ceiling amount (150% of line 2d, column (e)).....					1,284,878.
f Grassroots lobbying expenditures.....	14.	14.	14.	14.	56.

BAA

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities? If 'Yes,' describe in Part IV.			
j Total. Add lines 1c through 1i.			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If 'Yes,' enter the amount of any tax incurred under section 4912.			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912.			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered 'No' OR if Part III-A, line 3 is answered 'Yes.'

1 Dues, assessments and similar amounts from members.	1	
2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year.	2a	
b Carryover from last year.	2b	
c Total.	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues.	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions).	5	

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12. Attach to Form 990. See separate instructions

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization

Cincinnati Institute of Fine Arts dba ArtsWave

Employer identification number

31-0537138

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered 'Yes' to Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Includes questions 1-6 regarding donor advised funds.

Part II Conservation Easements Complete if the organization answered 'Yes' to Form 990, Part IV, line 7.

Table with 3 columns: Question, Held at the End of the Year (2a-2d). Includes questions 1-9 regarding conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.

Table with 3 columns: Question, Amount. Includes questions 1a, 1b, 2 regarding art and historical treasures.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition accession and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements Complete if organization answered 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If 'Yes,' explain the arrangement in Part XIV and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If 'Yes,' explain the arrangement in Part XIV.

Part V Endowment Funds Complete if organization answered 'Yes' to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	36,009,901.	41,497,628.			
b Contributions	275,528.	747,716.			
c Net Investment earnings, gains, and losses	2,463,869.	-4,047,793.			
d Grants or scholarships					
e Other expenditures for facilities and programs	2,489,275.	2,187,650.			
f Administrative expenses					
g End of year balance	36,260,023.	36,009,901.			

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment ▶ 20.00 %
- b Permanent endowment ▶ 18.00 %
- c Term endowment ▶ 62.00 %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) unrelated organizations	X	
(ii) related organizations		X
b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R?	3b	

4 Describe in Part XIV the intended uses of the organization's endowment funds. See Part XIV

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated Depreciation	(d) Book Value
1a Land				
b Buildings				
c Leasehold improvements		513,717.	25,686.	488,031.
d Equipment				
e Other		168,359.	110,524.	57,835.

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) ▶ 545,866.

BAA

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements	
1 Total revenue (Form 990, Part VIII, column (A), line 12)	12,760,605.
2 Total expenses (Form 990, Part IX, column (A), line 25)	14,122,002.
3 Excess or (deficit) for the year. Subtract line 2 from line 1	-1,361,397.
4 Net unrealized gains (losses) on investments	2,262,509.
5 Donated services and use of facilities	6,256.
6 Investment expenses	
7 Prior period adjustments	
8 Other (Describe in Part XIV). See Part XIV	124,350.
9 Total adjustments (net). Add lines 4 through 8	2,393,115.
10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	1,031,718.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return		
1 Total revenue, gains, and other support per audited financial statements	1	15,233,985.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains on investments	2a	2,262,509.
b Donated services and use of facilities	2b	86,521.
c Recoveries of prior year grants	2c	
d Other (Describe in Part XIV). See Part XIV	2d	124,350.
e Add lines 2a through 2d	2e	2,473,380.
3 Subtract line 2e from line 1	3	12,760,605.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investments expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIV)	4b	
c Add lines 4a and 4b	4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	12,760,605.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return		
1 Total expenses and losses per audited financial statements	1	14,202,267.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities	2a	80,265.
b Prior year adjustments	2b	
c Other losses	2c	
d Other (Describe in Part XIV)	2d	
e Add lines 2a through 2d	2e	80,265.
3 Subtract line 2e from line 1	3	14,122,002.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investments expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIV)	4b	
c Add lines 4a and 4b	4c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	14,122,002.

Part XIV Supplemental Information

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

Part V, Line 4 - Intended Uses Of Endowment Fund

The spending rate distribution from unrestricted endowment and board designated funds supports a healthy arts sector in the region through grants to arts organizations and programs as well as through support of ArtsWave's operating budget.

The spending rate distribution from restricted endowment funds is expended in accordance with the donor's wishes.

Part XIV Supplemental Information (continued)

Part X - FIN 48 Footnote

ArtsWave adopted the provision of FASB Accounting Standards Codification ("ASC") 740, Income Taxes, on September 1, 2009, as it relates to uncertain income tax positions. Adoption of ASC 740 had no effect on the accompanying financial statements. ArtsWave evaluates its uncertain tax positions as to whether it is more likely than not a tax position could be sustained in the event of an audit by the applicable taxing authority. Accordingly, a loss contingency is recognized when it is probable that a liability has been incurred as of the date of the financial statements and the amount of the loss can be reasonably estimated. The amount recognized is subject to estimate and management judgment with respect to the likely outcome of each uncertain tax position. The amount that is ultimately sustained for an individual uncertain tax position or for all uncertain tax positions in the aggregate could differ from the amount recognized.

Schedule D, Part XI, Line 8
Other Changes In Net Assets Or Fund Balances

Beneficial interest value change.....	\$	124,350.
Total	\$	<u>124,350.</u>

Schedule D, Part XII, Line 2d
Other Revenue Included In F/S But Not Included On Form 990

Beneficial int. value change.....	\$	124,350.
Total	\$	<u>124,350.</u>

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2009

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22.
▶ Attach to Form 990.

Name of the organization

Cincinnati Institute of Fine Arts

Employer identification number

31-0537138

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. See Part IV

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Art Opportunities Inc. 20 E. Central Parkway, Suite 100 Cincinnati, OH 45202	31-1665900		44,120.	0.			Operating Support
Ballettech Ohio 6543 Montgomery Road Cincinnati, OH 45213	31-1579484		54,921.	0.			Operating support
Bi-Okoto Drum & Dance 7030 Reading Rd. #662 Cincinnati, OH 45237	31-1440549		32,401.	0.			Operating Support
Carnegie Center 1028 Scott Blvd. Covington, KY 41012	61-0897319		25,247.	0.			Operating Support
Center for the Arts, Wyoming 322 Wyoming Avenue Wyoming, OH 45215	31-1454096		10,338.	0.			Operating support
Children's Theatre of Cincinnati 5020 Oaklawn Drive #2000 Cincinnati, OH 45227	31-6026285		95,020.	0.			Operating Support
Cincinnati Art Club 1021 Parkside Plac Cincinnati, OH 45202	31-0599379		5,780.	0.			Arts programming
Cincinnati Ballet 1555 Central Parkway Cincinnati, OH 45214	31-6050354		888,254.	0.			Operating Support

2 Enter total number of section 501(c)(3) and government organizations ▶ 50

3 Enter total number of other organizations ▶ 0

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

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

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

Part I, Line 2 - Grantmaker's Description of How Grants are Used

Grantees who receive annual operating support submit an annual performance review every spring on their past year's operations. Allocation Committees, comprised of community volunteers, review the submitted materials, conduct site visits and are present for oral interviews of applicant leadership before awards are finalized. Awards are paid out on a monthly basis for the eight largest grants and a quarterly basis for the smaller grants throughout the fiscal year. Grantees are required to submit interim financial reports during the year.

The ArtsWave Grants Program Committee, comprised of community volunteers, review submissions at joint meetings held three times per year. Recipients of operating and

Part I, Line 2 - Grantmaker's Description of How Grants are Used (continued)

project grant support from the Grants Program are required to complete and submit an "Evaluation Plan" with their letters of acceptance. Upon the receipt of the confirmation and the "Evaluation Plan, ArtsWave mails the award check along with a copy of an "Evaluation Report" which is submitted back to ArtsWave at the conclusion of the grant period. A comparison of the "Evaluation Plan" and the "Evaluation Report" helps determine key outcomes from the program/project and pinpoints areas for future improvement.

**SCHEDULE I-1
(Form 990)**

Continuation Sheet for Schedule I (Form 990)

OMB No. 1545-0047

2009

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

▶ **Attach to Form 990 to list additional information for
Schedule I (Form 990), Part II and Part III.**

Name of the organization Cincinnati Institute of Fine Arts	Employer identification number 31-0537138
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Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Cincinnati Black Theatre Company 5919 Hamilton Avenue Cincinnati, OH 45224	31-1793396		41,313.				Operating Support
Cincinnati Boychoir 4501 Allison Street Cincinnati, OH 45212	31-1383061		6,000.				Operating support
Cincinnati Chamber Orchestra 105 W. 4th Street #810 Cincinnati, OH 45202	31-0865998		32,389.				Operating Support
Cincinnati Landmark Productions 4990 Glenway Avenue Cincinnati, OH 45238	20-2814659		13,600.				Operating Support
Cincinnati Museum Association 953 Eden Park Drive Cincinnati, OH 45202	31-0536653		1,820,226.				Operating Support
Cincinnati Musical Festival Asso 1241 Elm Street Cincinnati, OH 45202	31-0584309		358,840.				Operating Support
Cincinnati Opera 1243 Elm Street Cincinnati, OH 45202	31-0349044		1,054,513.				Operating Support
Cincinnati Playhouse in the Park 962 Mt. Adams Circle Cincinnati, OH 45220	31-0624790		1,206,112.				Operating Support
Cincinnati Shakespeare Festival 717 Race Street Cincinnati, OH 45202	31-1413229		46,107.				Operating Support
Cincinnati Symphony Orchestra 1241 Elm St. Cincinnati, OH 45202	31-0537080		3,075,409.				Operating Support

**SCHEDULE I-1
(Form 990)**

Continuation Sheet for Schedule I (Form 990)

OMB No. 1545-0047

2009

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

▶ **Attach to Form 990 to list additional information for
Schedule I (Form 990), Part II and Part III.**

Name of the organization Cincinnati Institute of Fine Arts	Employer identification number 31-0537138
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Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Clifton Cultural Arts Center 3711 Clifton Avenue Cincinnati, OH 45220	20-2383576		30,755.				Operating Support
Contemporary Arts Center 44 E. 6th Street Cincinnati, OH 45202	31-0590095		478,919.				Operating Support
Contemporary Dance Theater, Inc. 1805 Larch Avenue Cincinnati, OH 45224	23-7431573		12,000.				Operating Support
Creative Aging Cincinnati 7970 Beechmont Avenue Cincinnati, OH 45255	31-1129571		10,000.				Operating Support
Elementz P.O. Box 141078 Cincinnati, OH 45250	04-3698700		26,000.				Operating support
Ensemble Theatre of Cincinnati 1127 Vine Street Cincinnati, OH 45202	31-1220252		99,052.				Operating Support
Eye of the Artists Foundation 1821 Summit Road #217 Cincinnati, OH 45237	83-0395169		47,036.				Operating support
Fitton Center for Creative Art 101 S. Monument Ave. Hamilton, OH 45011	31-0736673		59,622.				Operating Support
Friends of SCPA 108 West Central Parkway Cincinnati, OH 45202	31-6000758		6,775.				Student performance
Greater Cincinnati Blues Society PO Box 6098 Cincinnati, OH 45206	31-1311304		10,000.				Blues Fest

**SCHEDULE I-1
(Form 990)**

Continuation Sheet for Schedule I (Form 990)

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**Open to Public
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Internal Revenue Service

▶ **Attach to Form 990 to list additional information for
Schedule I (Form 990), Part II and Part III.**

Name of the organization Cincinnati Institute of Fine Arts	Employer identification number 31-0537138
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Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Grtr Cincinnati Found (ArtLinks) PO Box 5381 Cincinnati, OH 45201	31-0669700		7,500.				Operating Support
Kennedy Heights Arts Center 6546 Montgomery Road Cincinnati, OH 45213	45-0477749		13,720.				Operating Support
Kentucky Symphony Orchestra PO Box 72810 Newport, KY 41072	31-1190635		56,918.				Operating Support
Know Theatre Tribe Inc. 1120 Jackson Street Cincinnati, OH 45202	31-1666206		17,000.				Operating Support
Linton Inc. Music Hall, 1241 Elm Street Cincinnati, OH 45202	31-1401052		8,000.				Operating Support
Madcap Productions Puppet Theatr 3316 Glenmore Avenue Cincinnati, OH 45211	31-1123910		58,226.				Operating Support
Madisonville Arts Center 5021 Whetsel Ave. Cincinnati, OH 45227	30-0063421		5,150.				Art programming
Manifest Creative Gallery PO Box 6218 Cincinnati, OH 45206	42-1640342		8,000.				Operating Support
Media Bridges Cincinnati, Inc. 1100 Race Street Cincinnati, OH 45202	31-1262229		10,000.				Creation of documentary film
My Nose Turns Red Theatre Co PO Box 120307 Covington, KY 41012	31-1203908		6,000.				Operating Support

**SCHEDULE I-1
(Form 990)**

Continuation Sheet for Schedule I (Form 990)

OMB No. 1545-0047

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Internal Revenue Service

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Schedule I (Form 990), Part II and Part III.

Name of the organization Cincinnati Institute of Fine Arts	Employer identification number 31-0537138
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Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
New Edgecliff Theatre 1612 Otte Ave. Cincinnati, OH 45223	31-1644558		6,000.				Art programming
Oxford Community Arts Center P.O. Box 172, P.O. Box 172 Oxford, OH 45056	31-1761141		7,125.				Operating support
Peaslee Neighborhood Center 215 E. 14th Street Cincinnati, OH 45202	31-1268160		7,074.				Music programming
Pyramid Hill Sculpture Park & Mu 1763 Hamilton-Cleves Road Cincinnati, OH 45013	31-1439692		7,000.				Operating Support
Queen City Performing Arts Organ PO Box 3061 Cincinnati, OH 45201	31-1374671		7,500.				Concert Series
School House Symphony PO Box 36494 Cincinnati, OH 45236	31-0885557		6,000.				Operating Support
Taft Museum of Art 316 Pike Street Cincinnati, OH 45262	20-5148617		376,575.				Operating Support
Visionaries & Voices 3841 Spring Grove Avenue Cincinnati, OH 45223	30-0178314		10,000.				Operating Support
Vocal Arts Ensemble of Cincinnati PO Box 8404 Cincinnati, OH 45208	31-0960571		8,000.				Choral performance
Woman's Art Club of Cincinnati 6980 Cambridge Ave. Cincinnati, OH 45227	20-5433639		5,750.				Operating support

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)

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OMB No. 1545-0047

2009

**Open to Public
Inspection**

Name of the organization

Cincinnati Institute of Fine Arts

Employer identification number

31-0537138

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Women Writing for (a) Change Foundation, 6906 Plainfield Rd. Cincinnati, OH 45236	31-1697279		8,475.				Art collaboration
World Piano Competition, Inc. 441 Vine Street #1030 Cincinnati, OH 45202	31-0711243		7,500.				Pianist competition

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

▶ **Complete if the organization answered 'Yes' to Form 990, Part IV, line 23.**
▶ **Attach to Form 990.** ▶ **See separate instructions.**

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Open to Public Inspection

Name of the organization

Cincinnati Institute of Fine Arts

Employer identification number

31-0537138

Part I Questions Regarding Compensation

	Yes	No
1 a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		
<input type="checkbox"/> First-class or charter travel		
<input type="checkbox"/> Travel for companions		
<input type="checkbox"/> Tax indemnification and gross-up payments		
<input type="checkbox"/> Discretionary spending account		
<input type="checkbox"/> Housing allowance or residence for personal use		
<input type="checkbox"/> Payments for business use of personal residence		
<input type="checkbox"/> Health or social club dues or initiation fees		
<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain.....	1 b	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?.....	2	
3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.		
<input checked="" type="checkbox"/> Compensation committee		
<input type="checkbox"/> Independent compensation consultant		
<input checked="" type="checkbox"/> Form 990 of other organizations		
<input type="checkbox"/> Written employment contract		
<input checked="" type="checkbox"/> Compensation survey or study		
<input checked="" type="checkbox"/> Approval by the board or compensation committee		
4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization:		
a Receive a severance payment or change-of-control payment?.....	4 a	X
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?.....	4 b	X
c Participate in, or receive payment from, an equity-based compensation arrangement?.....	4 c	X
If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.		
5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a The organization?.....	5 a	X
b Any related organization?.....	5 b	X
If 'Yes' to line 5a or 5b, describe in Part III.		
6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a The organization?.....	6 a	X
b Any related organization?.....	6 b	X
If 'Yes' to line 6a or 6b, describe in Part III.		
7 For person listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If 'Yes,' describe in Part III.....	7	X
8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If 'Yes,' describe in Part III.....	8	X
If 'Yes' to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?.....	9	X

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

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus and incentive compensation	(iii) Other reportable compensation				
Mary McCullough-Hudso	(i)	236,106.	0.	0.	16,160.	7,779.	260,045.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
Teresa Haught	(i)	131,328.	12,000.	0.	10,213.	4,733.	158,274.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

▶ **Complete if the organizations answered 'Yes'**
on Form 990, Part IV, lines 29 or 30.

▶ **Attach to Form 990.**

OMB No. 1545-0047

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**Open To Public
Inspection**

Name of the organization **Cincinnati Institute of Fine Arts
dba ArtsWave**

Employer identification number
31-0537138

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	93	167,584.	Fair value
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution— Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (_____)				
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

	Yes	No
30a		X
31	X	
32a	X	
33		

b If 'Yes,' describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

b If 'Yes,' describe in Part II.

See Part II

33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II.

Part II Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Part I, Line 32 - Hire and Use of Third Parties

Gifts of publicly traded stocks are transferred by the donor or donor's broker

directly to a ArtsWave account at a bank. When received, the shares are immediately

sold through normal brokerage channels by the bank.

**SCHEDULE O
(Form 990)**

Supplemental Information to Form 990

OMB No. 1545-0047

2009

**Open to Public
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Department of the Treasury
Internal Revenue Service

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

Name of the organization **Cincinnati Institute of Fine Arts
dba ArtsWave**

Employer identification number
31-0537138

Form 990 - Additional DBAs

ArtsWave

Form 990, Part III, Line 2 - New Services

In our prior tax return, we identified the Arts and Culture Partnership as a program service in which we were determining the future direction of our organization's programming. We conducted hundreds of conversations with people from all over the region who told us that they see the arts as important because they connect people and because they make neighborhoods exciting. This research led us to the conclusion that we had to evolve and expand our mission (as shown in Part III, 1).

To signal this transition, we also changed our doing-business-as name to ArtsWave.

This name captures the ripple effect of benefits that the arts create throughout the region by embedding the idea of motion and vitality, and of a movement in which everyone can participate.

In connection with these changes, we also revised our desired outcomes and categorized our programming to align with these outcomes. The new categories are described in Part III.

Form 990, Part III, Line 4d - Other Program Services Description

Other programming primarily includes facilitation of an arts integration project wherein art is incorporated in the core curriculum for several third and fourth grade classes. Additionally, we spoke at several events around the nation to share our research of the ripple effect of the arts.

Form 990, Part VI, Line 2 - Business or Family Relationship of Officers, Directors, Etc.

Mitch Livingston was a board member for Fifth Third Bank for which Kevin Kabat served as CEO.

Name of the organization Cincinnati Institute of Fine Arts
dba ArtsWave

Employer identification number
31-0537138

Form 990, Part VI, Line 2 - Business or Family Relationship of Officers, Directors, Etc. (contin

Karen Bowman, Julie Janson and Mikio Nishizu were board members for the Cincinnati Regional Chamber of Commerce for which Ellen van der Horst served as CEO.

John Barrett was a board member for Convergys for which Karen Bowman was General Counsel.

Mary Tuuk was the Chief Credit Officer for Fifth Third Bank for which Kevin Kabat served as CEO.

Form 990, Part VI, Line 11 - Form 990 Review Process

The draft Form 990 is provided to the President and CEO as well as the Audit Committee and Executive Committee of the Board prior to submitting to the IRS. The Executive Committee has been granted authority by the Board to act on its behalf.

The Board is made aware that the Form 990 has been filed, is offered either a printed or electronic copy, and is alerted when a link to the Form 990 from the website is available.

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

The conflict of interest policy and a questionnaire regarding conflicts of interest are mailed to all board members and management team members annually in September. Questionnaires are reviewed by the management team so there is awareness of potential conflicts and interested parties.

Form 990, Part VI, Line 15a - Compensation Review & Approval Process for CEO, Exec. Dir., or Top Mgmtment

The Compensation Committee, a sub-committee of the Executive Committee, meets annually to determine the CEO compensation. The Committee's analysis includes the baseline set by a compensation study commissioned in 2006 and a summary of CEO compensation for other local nonprofits as well as national peer organizations coupled with a review of the CEO's performance. The Committee also factors in the direction the organization is taking and the increased responsibilities that will entail. The Compensation Committee's recommendation must be approved by the

Name of the organization Cincinnati Institute of Fine Arts
dba ArtsWave

Employer identification number
31-0537138

Form 990, Part VI, Line 15a - Compensation Review & Approval Process for CEO, Exec. Dir., or Top Mgtment (continued)

Executive Committee.

The CEO sets compensation for the management team, including the COO, after review of comparative amounts obtained from peer group Form 990s and consultation with the Board Chair.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

A link to the most recent audited financial statements is provided on the ArtsWave website.

The governing documents as well as the conflict of interest policy are available upon request.

