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Return of Organization Exempt From Income Tax

Form **990**

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2024

Open to Public Inspection

A For the 2024 calendar year, or tax year beginning OCT 1, 2024 **and ending** SEP 30, 2025

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/ terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
ARTSFUND

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) P.O. BOX 19780

Room/suite

City or town, state or province, country, and ZIP or foreign postal code
SEATTLE, WA 98109-6780

D Employer identification number
91-0839644

E Telephone number
206-281-9050

G Gross receipts $ 18,092,474.

F Name and address of principal officer: MICHAEL GREER
100 W HARRISON ST #S-150, SEATTLE, WA 98119

H(a) Is this a group return for subordinates? ☐ Yes ☒ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list. See instructions

H(c) Group exemption number

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( ) (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: WWW.ARTSFUND.ORG

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation: 1969

M State of legal domicile: WA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: STRENGTHEN THE COMMUNITY BY SUPPORTING THE ARTS THROUGH LEADERSHIP, ADVOCACY, AND GRANT MAKING.

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	30
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	30
5	Total number of individuals employed in calendar year 2024 (Part V, line 2a)	5	20
6	Total number of volunteers (estimate if necessary)	6	43
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.

Revenue

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	15,643,885.	15,670,914.
9	Program service revenue (Part VIII, line 2g)	90,100.	66,257.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	320,873.	417,898.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	123,900.	-73,158.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	16,178,758.	16,081,911.

Expenses

13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	12,550,135.	12,277,413.
14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,739,452.	2,185,897.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	12,521.	0.
b	Total fundraising expenses (Part IX, column (D), line 25) 647,627.		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	902,186.	879,736.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	15,204,294.	15,343,046.
19	Revenue less expenses. Subtract line 18 from line 12	974,464.	738,865.

Net Assets or Fund Balances

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	7,424,421.	9,640,760.
21	Total liabilities (Part X, line 26)	496,483.	1,973,957.
22	Net assets or fund balances. Subtract line 21 from line 20	6,927,938.	7,666,803.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer — Date

MICHAEL GREER, PRESIDENT & CEO
Type or print name and title

Paid Preparer Use Only

Preparer's name	Preparer's signature	Date	Check if self-employed	PTIN
MAGGIE ELLIOTT	MAGGIE ELLIOTT	08/11/26	☐	P01790721

Firm's name MOSS ADAMS LLP — Firm's EIN 39-0859910

Firm's address 999 THIRD AVENUE, SUITE 2800
SEATTLE, WA 98104 — Phone no. 206-302-6500

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:
ARTSFUND STRENGTHENS THE COMMUNITY BY SUPPORTING THE ARTS THROUGH LEADERSHIP, ADVOCACY, AND GRANT MAKING.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ 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? ☐ Yes ☒ No
If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations 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 $ 12,277,413. including grants of $ 12,277,413.) (Revenue $ 66,257.)
ARTSFUND PROVIDES GENERAL OPERATING SUPPORT TO NONPROFIT IRC 501(C)(3) ARTS ORGANIZATIONS. AWARDS ARE MADE THROUGH AN "ALLOCATION PROCESS" AND TAKE INTO CONSIDERATION EACH ORGANIZATION'S MISSION AND ART, MANAGEMENT AND FINANCIAL CONDITION, AND COMMITMENT TO AND IMPACT ON THE COMMUNITY. FOR THE YEAR ENDED SEPTEMBER 30, 2025, 999 ORGANIZATIONS WERE GRANTED OPERATING SUPPORT.

4b (Code:) (Expenses $ 884,858. including grants of $ 0.) (Revenue $ 0.)
ARTSFUND CONDUCTS A VARIETY OF PROGRAMS TO BENEFIT THE CULTURAL SECTOR: AN ASSOCIATES PROGRAM TO EQUIP VOLUNTEERS WITH LEADERSHIP AND FUNDRAISING SKILLS; BOARD LEADERSHIP TRAINING CLASSES ON LEGAL AND FINANCIAL RESPONSIBILITIES, STRATEGIC PLANNING, FUNDRAISING AND BEST GOVERNANCE PRACTICES; CONVENINGS TO SHARE RESOURCES, PRACTICES AND PERSPECTIVES TO EXPAND THE CAPACITY OF THE CULTURAL SECTOR; STUDY OF THE ECONOMIC IMPACT OF THE ARTS; AND FISCAL SPONSOR FOR BUILDING FOR THE ARTS.

4c (Code:) (Expenses $ including grants of $) (Revenue $)

4d Other program services (Describe on Schedule O.)
(Expenses $ including grants of $) (Revenue $)

4e Total program service expenses 13,162,271.

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete *Schedule B, Schedule of Contributors*? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? *If "Yes," complete Schedule C, Part III*	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		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? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		X
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	16		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? *If "Yes," complete Schedule G, Part I.* See instructions	17		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? *If "Yes," complete Schedule G, Part II*	18	X	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	X	

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		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? *If "Yes," complete Schedule J*	23	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, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		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? *If "Yes," complete Schedule L, Part I*	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of any individual described in line 28a? *If "Yes," complete Schedule L, Part IV*	28b		X
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in noncash contributions? *If "Yes," complete Schedule M*	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		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? *If "Yes," complete Schedule R, Part I*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b	X	
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		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? *If "Yes," complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? **Note:** All Form 990 filers are required to complete Schedule O	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

				Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	64		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c X	

Part V Statements Regarding Other IRS Filings and Tax Compliance *(continued)*

				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	20		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	X	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?		3a		X
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation on Schedule O*		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		X
b	If "Yes," enter the name of the foreign country				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b		
7	**Organizations that may receive deductible contributions under section 170(c).**				
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?		7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h		
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		8		
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	**Section 501(c)(7) organizations.** Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note: See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation on Schedule O*		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year?		15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?		16		X
	If "Yes," complete Form 4720, Schedule O.				
17	**Section 501(c)(21) organizations.** Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		
	If "Yes," complete Form 6069.				

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 on Schedule O. See instructions.*

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

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	30		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.				
b	Enter the number of voting members included on line 1a, above, who are independent	1b	30		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3			X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6	Did the organization have members or stockholders?	6			X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b			X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?	8a		X	
b	Each committee with authority to act on behalf of the governing body?	8b		X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses on Schedule O*	9			X

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

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed NONE

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

[X] Own website [ ] Another's website [X] Upon request [ ] Other *(explain on Schedule O)*

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

20 State the name, address, and telephone number of the person who possesses the organization's books and records

KEITH G EASTER - 206-788-3044

100 W HARRISON S, SUITE S-150, SEATTLE, WA 98119

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than $100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

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

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/ 1099-NEC)	(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			
(1) MICHAEL R. GREER	40.00									
PRESIDENT/CEO	0.50			X				346,622.	0.	26,078.
(2) KEITH G. EASTER	40.00									
DIRECTOR OF FINANCE				X				132,675.	0.	26,267.
(3) KAREN BERGIN	5.00									
CHAIR		X		X				0.	0.	0.
(4) LESLIE RAY BERNSTEIN	5.00									
CHAIR-ELECT		X		X				0.	0.	0.
(5) LIZ BERRY	5.00									
IMMEDIATE PAST CHAIR		X		X				0.	0.	0.
(6) AARON BLANK	5.00									
VICE CHAIR		X		X				0.	0.	0.
(7) LAURA DOEHLE	5.00									
SECRETARY		X		X				0.	0.	0.
(8) TIFFINY EVANS	5.00									
TREASURER		X		X				0.	0.	0.
(9) KUMI YAMAMOTO BARUFFI	5.00									
TRUSTEE		X						0.	0.	0.
(10) CARL BEHNKE	5.00									
TRUSTEE		X						0.	0.	0.
(11) MIKE BENTLEY	5.00									
TRUSTEE		X						0.	0.	0.
(12) ANNE GOOKIN	5.00									
TRUSTEE		X						0.	0.	0.
(13) CLAY GUSTAVES	5.00									
TRUSTEE		X						0.	0.	0.
(14) DIANNE HARRIS	5.00									
TRUSTEE		X						0.	0.	0.
(15) STEVE HEDBERG	5.00									
TRUSTEE		X						0.	0.	0.
(16) ERIN HOBSON	5.00									
TRUSTEE		X						0.	0.	0.
(17) IAN KERRIGAN	5.00									
TRUSTEE		X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/ 1099-NEC)	(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			
(18) M. THOMAS KROON	5.00									
TRUSTEE		X						0.	0.	0.
(19) CRYSTAL LANGHORNE	5.00									
TRUSTEE		X						0.	0.	0.
(20) CATHY LEAP	5.00									
TRUSTEE		X						0.	0.	0.
(21) DIENA LEE MANN	5.00									
TRUSTEE		X						0.	0.	0.
(22) TOM LEONIDAS	5.00									
TRUSTEE		X						0.	0.	0.
(23) FRANCES LUKE	5.00									
TRUSTEE		X						0.	0.	0.
(24) ELIZABETH MACPHERSON HEARN	5.00									
TRUSTEE		X						0.	0.	0.
(25) BRIAN PAULEN	5.00									
TRUSTEE		X						0.	0.	0.
(26) BILL PREDMORE	5.00									
TRUSTEE		X						0.	0.	0.
1b Subtotal								479,297.	0.	52,345.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								479,297.	0.	52,345.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization 2

		Yes	No
3 Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3		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? *If "Yes," complete Schedule J for such individual*	4	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	5		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. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization 0

SEE PART VII, SECTION A CONTINUATION SHEETS

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(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			
(27) JOSE QUINTANA	5.00									
TRUSTEE		X						0.	0.	0.
(28) ANDREW RECINOS	5.00									
TRUSTEE		X						0.	0.	0.
(29) CINDY SNYDER	5.00									
TRUSTEE		X						0.	0.	0.
(30) NORMA JEAN STRAW	5.00									
TRUSTEE		X						0.	0.	0.
(31) LOREN SUPP	5.00									
TRUSTEE		X						0.	0.	0.
(32) ANDREA TEMPLETON	5.00									
TRUSTEE		X						0.	0.	0.
(33) LINDA WALTON	5.00									
TRUSTEE		X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	171,400.				
	d Related organizations	1d	1,666,633.				
	e Government grants (contributions)	1e	141,820.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	13,691,061.				
	g Noncash contributions included in lines 1a-1f	1g	$ 1,851,273.				
	h **Total.** Add lines 1a-1f			15,670,914.			
Program Service Revenue		**Business Code**					
	2a BOARD LEADERSHIP TRAIN	611610		66,257.	66,257.		
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g **Total.** Add lines 2a-2f			66,257.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			417,898.			417,898.
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
			(i) Real	(ii) Personal			
	6a Gross rents	6a					
	b Less: rental expenses	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss)						
			(i) Securities	(ii) Other			
	7a Gross amount from sales of assets other than inventory	7a	1,849,548.				
	b Less: cost or other basis and sales expenses	7b	1,849,548.				
	c Gain or (loss)	7c	0.				
	d Net gain or (loss)			0.			
	8a Gross income from fundraising events (not including $ 171,400. of contributions reported on line 1c). See Part IV, line 18	8a	87,857.				
	b Less: direct expenses	8b	161,015.				
	c Net income or (loss) from fundraising events			-73,158.			-73,158.
	9a Gross income from gaming activities. See Part IV, line 19	9a					
	b Less: direct expenses	9b					
	c Net income or (loss) from gaming activities						
	10a Gross sales of inventory, less returns and allowances	10a					
	b Less: cost of goods sold	10b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		**Business Code**					
	11a						
	b						
	c						
	d All other revenue						
	e **Total.** Add lines 11a-11d						
	12 **Total revenue.** See instructions			16,081,911.	66,257.	0.	344,740.

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).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	12,277,413.	12,277,413.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	585,922.	195,289.	221,896.	168,737.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,220,243.	268,995.	644,665.	306,583.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	53,493.	13,751.	25,665.	14,077.
9 Other employee benefits	178,691.	45,933.	85,732.	47,026.
10 Payroll taxes	147,548.	37,928.	70,791.	38,829.
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	56,963.		56,963.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	280,550.	195,772.	84,778.	
12 Advertising and promotion	36,166.	16,938.	8,841.	10,387.
13 Office expenses	16,168.	1,165.	10,664.	4,339.
14 Information technology	79,624.	9,619.	50,310.	19,695.
15 Royalties				
16 Occupancy	138,226.	6,911.	122,100.	9,215.
17 Travel	32,985.	8,780.	17,123.	7,082.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	108,217.	62,674.	45,543.	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	33,000.	1,650.	29,150.	2,200.
23 Insurance	21,536.	1,077.	19,023.	1,436.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a DUES & PUBLICATIONS	39,565.	8,413.	22,901.	8,251.
b PROFESSIONAL DEVELOPMEN	19,405.	6,658.	12,747.	
c BAD DEBT	10,386.	519.	1,083.	8,784.
d COLLABS & PARTNERSHIPS	6,945.	2,786.	3,173.	986.
e All other expenses				
25 **Total functional expenses.** Add lines 1 through 24e	15,343,046.	13,162,271.	1,533,148.	647,627.
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

				(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing		2,585,224.	1	3,120,521.
	2	Savings and temporary cash investments		3,346,351.	2	5,409,823.
	3	Pledges and grants receivable, net		1,338,938.	3	972,406.
	4	Accounts receivable, net			4	
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		70,666.	9	87,768.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 567,787.			
	b	Less: accumulated depreciation	10b 552,413.	48,374.	10c	15,374.
	11	Investments - publicly traded securities			11	
	12	Investments - other securities. See Part IV, line 11			12	
	13	Investments - program-related. See Part IV, line 11			13	
	14	Intangible assets		34,868.	14	34,868.
	15	Other assets. See Part IV, line 11			15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)		7,424,421.	16	9,640,760.
Liabilities	17	Accounts payable and accrued expenses		496,483.	17	1,973,957.
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D			25	
	26	**Total liabilities.** Add lines 17 through 25		496,483.	26	1,973,957.
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here** ☒ **and complete lines 27, 28, 32, and 33.**				
	27	Net assets without donor restrictions		6,236,994.	27	7,060,859.
	28	Net assets with donor restrictions		690,944.	28	605,944.
		Organizations that do not follow FASB ASC 958, check here ☐ **and complete lines 29 through 33.**				
	29	Capital stock or trust principal, or current funds			29	
	30	Paid-in or capital surplus, or land, building, or equipment fund			30	
	31	Retained earnings, endowment, accumulated income, or other funds			31	
	32	Total net assets or fund balances		6,927,938.	32	7,666,803.
	33	Total liabilities and net assets/fund balances		7,424,421.	33	9,640,760.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	16,081,911.
2	Total expenses (must equal Part IX, column (A), line 25)	2	15,343,046.
3	Revenue less expenses. Subtract line 2 from line 1	3	738,865.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	6,927,938.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	7,666,803.

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	2a		X
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis	2b	X	
c	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? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	2c	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	3b		

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2024

Open to Public Inspection

Name of the organization	Employer identification number
ARTSFUND	91-0839644

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
10 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
f Enter the number of supported organizations .....
g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document? Yes	(iv) No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
Total						

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	14,807,415.	5,253,907.	14,439,458.	15,643,885.	15,670,914.	65,815,579.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	14,807,415.	5,253,907.	14,439,458.	15,643,885.	15,670,914.	65,815,579.
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)						35,079,252.
6 **Public support.** Subtract line 5 from line 4.						30,736,327.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7 Amounts from line 4	14,807,415.	5,253,907.	14,439,458.	15,643,885.	15,670,914.	65,815,579.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	4,140.	14,344.	76,721.	320,873.	417,898.	833,976.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 **Total support.** Add lines 7 through 10						66,649,555.

12 Gross receipts from related activities, etc. (see instructions) **12** 745,497.

13 **First 5 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

14 Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f)) **14** 46.12 %

15 Public support percentage from 2023 Schedule A, Part II, line 14 **15** 53.33 %

16a **33 1/3% support test - 2024.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ☒

b **33 1/3% support test - 2023.** 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 ☐

17a **10% -facts-and-circumstances test - 2024.** 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 VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ☐

b **10% -facts-and-circumstances test - 2023.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ☐

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 ☐

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
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, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support.** (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(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 on 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 VI.)						
13 **Total support.** (Add lines 9, 10c, 11, and 12.)						

14 **First 5 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 2024 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2023 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2024** (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from **2023** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2024.** 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 - 2023.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 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 ☐

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in* **Part VI** *how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.*	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in* **Part VI** *how the organization determined that the supported organization was described in section 509(a)(1) or (2).*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer lines 3b and 3c below.*	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in* **Part VI** *when and how the organization made the determination.*	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in* **Part VI** *what controls the organization put in place to ensure such use.*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.*	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in* **Part VI,** *including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).*	5a		
b	**Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* **Part VI.**	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990).*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If "Yes," complete Part I of Schedule L (Form 990).*	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in* **Part VI.**	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in* **Part VI.**	9b		
c	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in* **Part VI.**	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer line 10b below.*	10a		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)*	10b		

Part IV Supporting Organizations *(continued)*

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?	**11a**		
b	A family member of a person described on line 11a above?	**11b**		
c	A 35% controlled entity of a person described on line 11a or 11b above? *If "Yes" to line 11a, 11b, or 11c, provide detail in* **Part VI.**	**11c**		

Section B. Type I Supporting Organizations

			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? *If "No," describe in* **Part VI** *how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*	**1**		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in* **Part VI** *how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.*	**2**		

Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in* **Part VI** *how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).*	**1**		

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	**1**		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in* **Part VI** *how the organization maintained a close and continuous working relationship with the supported organization(s).*	**2**		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in* **Part VI** *the role the organization's supported organizations played in this regard.*	**3**		

Section E. Type III Functionally Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year* **(see instructions).**

- **a** ☐ The organization satisfied the Activities Test. *Complete* **line 2** *below.*
- **b** ☐ The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*
- **c** ☐ The organization supported a governmental entity. *Describe in* **Part VI** *how you supported a governmental entity (see instructions).*

			Yes	No
2	Activities Test. **Answer lines 2a and 2b below.**			
a	*Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in* **Part VI identify those supported organizations and explain** *how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*	**2a**		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* **Part VI** *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*	**2b**		
3	Parent of Supported Organizations. **Answer lines 3a and 3b below.**			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in **Part VI**.	**3a**		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in **Part VI** the role played by the organization in this regard.	**3b**		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in* **Part VI**). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	**1**		
2 Recoveries of prior-year distributions	**2**		
3 Other gross income (see instructions)	**3**		
4 Add lines 1 through 3.	**4**		
5 Depreciation and depletion	**5**		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	**6**		
7 Other expenses (see instructions)	**7**		
8 **Adjusted Net Income** (subtract lines 5, 6, and 7 from line 4)	**8**		

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	**1a**		
b Average monthly cash balances	**1b**		
c Fair market value of other non-exempt-use assets	**1c**		
d **Total** (add lines 1a, 1b, and 1c)	**1d**		
e **Discount** claimed for blockage or other factors (*explain in detail in* **Part VI**):			
2 Acquisition indebtedness applicable to non-exempt-use assets	**2**		
3 Subtract line 2 from line 1d.	**3**		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	**4**		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	**5**		
6 Multiply line 5 by 0.035.	**6**		
7 Recoveries of prior-year distributions	**7**		
8 **Minimum Asset Amount** (add line 7 to line 6)	**8**		

Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	**1**		
2 Enter 0.85 of line 1.	**2**		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	**3**		
4 Enter greater of line 2 or line 3.	**4**		
5 Income tax imposed in prior year	**5**		
6 **Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	**6**		

7 ☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Part V **Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** *(continued)*

Section D - Distributions		**Current Year**
1 Amounts paid to supported organizations to accomplish exempt purposes	**1**	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	**2**	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	**3**	
4 Amounts paid to acquire exempt-use assets	**4**	
5 Qualified set-aside amounts (prior IRS approval required - *provide details in* **Part VI**)	**5**	
6 Other distributions (describe in **Part VI**). See instructions.	**6**	
7 **Total annual distributions.** Add lines 1 through 6.	**7**	
8 Distributions to attentive supported organizations to which the organization is responsive (*provide details in* **Part VI**). See instructions.	**8**	
9 Distributable amount for 2024 from Section C, line 6	**9**	
10 Line 8 amount divided by line 9 amount	**10**	

Section E - Distribution Allocations (see instructions)	**(i)** **Excess Distributions**	**(ii)** **Underdistributions Pre-2024**	**(iii)** **Distributable Amount for 2024**
1 Distributable amount for 2024 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2024 (reasonable cause required - *explain in* **Part VI**). See instructions.			
3 Excess distributions carryover, if any, to 2024			
a From 2019			
b From 2020			
c From 2021			
d From 2022			
e From 2023			
f **Total** of lines 3a through 3e			
g Applied to under distributions of prior years			
h Applied to 2024 distributable amount			
i Carryover from 2019 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2024 from Section D, line 7: $			
a Applied to underdistributions of prior years			
b Applied to 2024 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, *explain in* **Part VI.** See instructions.			
6 Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, *explain in* **Part VI**. See instructions.			
7 **Excess distributions carryover to 2025.** Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2020			
b Excess from 2021			
c Excess from 2022			
d Excess from 2023			
e Excess from 2024			

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

Schedule B (Form 990)
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Name of the organization	Employer identification number
ARTSFUND	91-0839644

Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	[X] 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, contributions totaling $5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

[X] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions 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 an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled 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. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling $5,000 or more during the year ..... $ _____

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

Name of organization: ARTSFUND

Employer identification number: 91-0839644

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		$ 10,669,403.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
2		$ 1,666,633.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
3		$ 325,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
4		$ 353,095.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)

Name of organization

ARTSFUND

Employer identification number

91-0839644

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	

Name of organization: ARTSFUND

Employer identification number: 91-0839644

Part III **Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor.** Complete columns **(a)** through **(e) and** the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **$1,000 or less** for the year. (Enter this info. once.) $

Use duplicate copies of Part III if additional space is needed.

(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

(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)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2024

Open to Public Inspection

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

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

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

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- 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" on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions), or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then:

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

Name of organization	Employer identification number (EIN)
ARTSFUND	91-0839644

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 campaign activity expenditures ..... $
3 Volunteer hours for political campaign activities .....

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 ..... $
2 Enter the amount of any excise tax incurred by organization managers under section 4955 ..... $
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 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 EINs of all section 527 political organizations to which the filing organization made payments. 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 (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

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
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)	0.	
b Total lobbying expenditures to influence a legislative body (direct lobbying)	0.	
c Total lobbying expenditures (add lines 1a and 1b)	0.	
d Other exempt purpose expenditures	15,343,046.	
e Total exempt purpose expenditures (add lines 1c and 1d)	15,343,046.	
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.	917,152.	
g Grassroots nontaxable amount (enter 25% of line 1f)	229,288.	
h Subtract line 1g from line 1a. If zero or less, enter -0-	0.	
i Subtract line 1f from line 1c. If zero or less, enter -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?	☐ Yes ☐ No	

IF the amount on line 1e, column (a) or (b), is:	THEN 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.

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 separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2021	(b) 2022	(c) 2023	(d) 2024	(e) Total
2a Lobbying nontaxable amount	358,552.	901,372.	910,215.	917,152.	3,087,291.
b Lobbying ceiling amount (150% of line 2a, column(e))					4,630,937.
c Total lobbying expenditures					
d Grassroots nontaxable amount	89,638.	225,343.	227,554.	229,288.	771,823.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,157,735.
f Grassroots lobbying expenditures					

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)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a) Yes	(a) No	(b) 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?			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to not be 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 carry over lobbying and political campaign activity 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) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No;" OR (b) Part III-A, line 3, is answered "Yes."

1	Dues, assessments, and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures **(do not include amounts of political expenses for which the section 527(f) tax was paid):**		
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 expenditures next year?	4	
5	Taxable amount of lobbying and political expenditures. See instructions	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

SCHEDULE D
(Form 990)
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
ARTSFUND

Employer identification number
91-0839644

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
- ☐ Preservation of land for public use (for example, recreation or education)
- ☐ Preservation of a historically important land area
- ☐ Protection of natural habitat
- ☐ Preservation of a certified historic structure
- ☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

			Held at the End of the Tax Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included on line 2a	2c	
d	Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year _____

4 Number of states where property subject to conservation easement is located _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year _____

8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.

(i) Revenue included on Form 990, Part VIII, line 1 $ _____

(ii) Assets included in Form 990, Part X $ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 $ _____

b Assets included in Form 990, Part X $ _____

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 make 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 program
e ☐ Other _____

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

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 the organization answered "Yes" on 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 XIII 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, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII ☐

Part V Endowment Funds Complete if the organization answered "Yes" on 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	38,786,569.	28,485,479.	26,360,953.	32,553,145.	27,808,362.
b Contributions	5,000,000.	5,494,848.		24,670.	250,000.
c Net investment earnings, gains, and losses	3,998,742.	6,300,758.	3,134,772.	-5,162,318.	5,508,817.
d Grants or scholarships	1,666,633.	1,352,212.	876,400.	880,000.	866,000.
e Other expenditures for facilities and programs					
f Administrative expenses	220,634.	142,304.	133,846.	174,544.	148,034.
g End of year balance	45,898,044.	38,786,569.	28,485,479.	26,360,953.	32,553,145.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment 34.0000 %
b Permanent endowment 54.7000 %
c Term endowment 11.3000 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

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? 3a(i)		X
(ii) Related organizations? 3a(ii)	X	
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b	X	

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

Part VI Land, Buildings, and Equipment

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(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				
d Equipment		567,787.	552,413.	15,374.
e Other				
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, line 10c, column (B))*				15,374.

Part VII Investments - Other Securities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))		

Part IX Other Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, line 15, col. (B))*	

Part X Other Liabilities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, line 25, col. (B))*	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ... X

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

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

1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	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	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

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

1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	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	

Part XIII Supplemental Information

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

PART V, LINE 4:

ARTSFUND FOUNDATION PROVIDES MANAGEMENT OF ENDOWMENT FUNDS FOR ARTSFUND FOR THE PURPOSE OF DISTRIBUTING GRANTS TO IRC 501(C)(3) NONPROFIT ARTS ORGANIZATIONS.

PART X, LINE 2:

ARTSFUND AND THE FOUNDATION ARE NOT-FOR-PROFIT CORPORATIONS EXEMPT FROM FEDERAL INCOME TAX, EXCEPT FOR UNRELATED BUSINESS INCOME UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. IN ADDITION, ARTSFUND AND THE FOUNDATION HAVE BEEN CLASSIFIED AS ENTITIES THAT ARE NOT PRIVATE FOUNDATIONS WITHIN THE MEANING OF SECTION 509(A) AND QUALIFY FOR DEDUCTIBLE CONTRIBUTIONS AS PROVIDED IN SECTION 170(B)(1)(A)(VI). UNRELATED BUSINESS INCOME TAX, IF ANY, IS INSIGNIFICANT AND NO TAX PROVISION HAS BEEN MADE IN THE ACCOMPANYING CONSOLIDATED FINANCIAL STATEMENTS.

THE ORGANIZATION RECOGNIZES THE TAX BENEFIT FROM UNCERTAIN TAX POSITIONS ONLY IF IT IS MORE LIKELY THAN NOT THAT THE TAX POSITIONS WILL BE SUSTAINED ON EXAMINATION BY THE TAX AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE POSITION. THE TAX BENEFIT IS MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A GREATER THAN 50% LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT. THE ORGANIZATION FILES AN EXEMPT ORGANIZATION RETURN AND APPLICABLE UNRELATED BUSINESS INCOME TAX RETURN IN THE U.S. FEDERAL JURISDICTION.

Part XIII Supplemental Information *(continued)*

SCHEDULE G (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

ARTSFUND

Employer identification number

91-0839644

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a ☐ Mail solicitations
b ☐ Internet and email solicitations
c ☐ Phone solicitations
d ☐ In-person solicitations
e ☐ Solicitation of nongovernment grants
f ☐ Solicitation of government grants
g ☐ Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ **Yes** ☐ **No**

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions? Yes	**(iii)** No	**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col. **(i)**	**(vi)** Amount paid to (or retained by) organization
Total						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II **Fundraising Events.** Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

		(a) Event #1 CELEBRATON OF THE ARTS (event type)	(b) Event #2 (event type)	(c) Other events NONE (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	259,257.			259,257.
	2 Less: Contributions	171,400.			171,400.
	3 Gross income (line 1 minus line 2)	87,857.			87,857.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	35,844.			35,844.
	7 Food and beverages				
	8 Entertainment	64,160.			64,160.
	9 Other direct expenses	61,011.			61,011.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				161,015.
	11 Net income summary. Subtract line 10 from line 3, column (d)				-73,158.

Part III **Gaming.** Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes_____ % ☐ No	☐ Yes_____ % ☐ No	☐ Yes_____ % ☐ No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain: _____

11 Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	**13a**	%
b An outside facility	**13b**	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name _____

Address _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization $ _____ and the amount of gaming revenue retained by the third party $ _____

c If "Yes," enter the name and address of the third party:

Name _____

Address _____

16 Gaming manager information:

Name _____

Gaming manager compensation $ _____

Description of services provided _____

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year $

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Part IV **Supplemental Information** *(continued)*

SCHEDULE I (Form 990)
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
ARTSFUND

Employer identification number
91-0839644

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? ..... [X] Yes [ ] No

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

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
SHUNPIKE PO BOX 22439 SEATTLE, WA 98122	91-2138554	501(C)(3)	860,000.	0.			GENERAL SUPPORT
NORTHWEST FILM FORUM 1515 12TH AVE SEATTLE, WA 98122	91-1702331	501(C)(3)	264,260.	0.			GENERAL SUPPORT
PACIFIC NORTHWEST BALLET 301 MERCER ST SEATTLE, WA 98109	91-0897129	501(C)(3)	170,021.	0.			GENERAL SUPPORT
SEATTLE ART MUSEUM 1300 1ST AVE SEATTLE, WA 98101	91-0640788	501(C)(3)	151,170.	0.			GENERAL SUPPORT
SEATTLE OPERA 363 MERCER ST SEATTLE, WA 98109	91-0760426	501(C)(3)	146,510.	0.			GENERAL SUPPORT
SEATTLE SYMPHONY ORCHESTRA PO BOX 21906 SEATTLE, WA 98111	91-0667412	501(C)(3)	143,710.	0.			GENERAL SUPPORT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ..... 434.

3 Enter total number of other organizations listed in the line 1 table ..... 0.

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SEATTLE REP 155 MERCER ST SEATTLE, WA 98109	91-0756535	501(C)(3)	112,937.	0.			GENERAL SUPPORT
ACT THEATRE 700 UNION ST SEATTLE, WA 98101	91-0787792	501(C)(3)	111,447.	0.			GENERAL SUPPORT
WING LUKE MEMORIAL FOUNDATION PO BOX 3025 SEATTLE, WA 98114	91-6067431	501(C)(3)	106,504.	0.			GENERAL SUPPORT
THE 5TH AVENUE THEATRE 1308 5TH AVE SEATTLE, WA 98101	91-1087612	501(C)(3)	104,497.	0.			GENERAL SUPPORT
SEATTLE CHILDREN'S THEATRE 201 THOMAS ST SEATTLE, WA 98109	51-0172421	501(C)(3)	90,907.	0.			GENERAL SUPPORT
VILLAGE THEATRE 303 FRONT ST N ISSAQUAH, WA 98027	91-1077130	501(C)(3)	89,740.	0.			GENERAL SUPPORT
HENRY ART GALLERY UNIVERSITY OF WASHINGTON, BOX 35141 SEATTLE, WA 98195	23-7052537	501(C)(3)	88,130.	0.			GENERAL SUPPORT
SEATTLE THEATRE GROUP 911 PINE ST SEATTLE, WA 98101	94-3130227	501(C)(3)	86,631.	0.			GENERAL SUPPORT
TACOMA ARTS LIVE 1001 YAKIMA AVE, SUITE 1 TACOMA, WA 98405	91-1106878	501(C)(3)	70,250.	0.			GENERAL SUPPORT

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TASVEER 24746 NE 18TH ST SEATTLE, WA 98074	20-0886886	501(C)(3)	60,400.	0.			GENERAL SUPPORT
RVC SEATTLE 3715 S HUDSON, SUITE 103 SEATTLE, WA 98118	47-4257834	501(C)(3)	60,000.	0.			GENERAL SUPPORT
VELOCITY DANCE CENTER 117 EAST LOUISA ST SEATTLE, WA 98102	91-2030037	501(C)(3)	58,590.	0.			GENERAL SUPPORT
THE VERA PROJECT 305 HARRISON ST SEATTLE SEATTLE, WA 98109	31-1816016	501(C)(3)	56,560.	0.			GENERAL SUPPORT
BURKE MUSEUM ASSOCIATION UNIVERSITY OF WASHINGTON, BOX 35301 SEATTLE, WA 98195	91-2151686	501(C)(3)	55,807.	0.			GENERAL SUPPORT
ON THE BOARDS 100 W ROY ST SEATTLE, WA 98119	91-1081983	501(C)(3)	50,608.	0.			GENERAL SUPPORT
INSPIRED CHILD COMMUNITY 3823 37TH AVE SOUTH SEATTLE, WA 98118	92-0468012	501(C)(3)	50,000.	0.			GENERAL SUPPORT
SONGWRITING WORKS EDUCATIONAL FOUNDATION - 2023 E SIMS WAY #271 - PORT TOWNSEND, WA 98368	90-0447753	501(C)(3)	50,000.	0.			GENERAL SUPPORT
SPOKANE TRIBE OF INDIANS PO BOX 100 WELLPINIT, WA 99040	91-0606339	SPOKANE TRIBE OF	50,000.	0.			GENERAL SUPPORT

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WENATCHEE VALLEY MUSEUM AND CULTURAL CENTER - 127 S MISSION ST - WENATCHEE, WA 98801	91-6054055	501(C)(3)	50,000.	0.			GENERAL SUPPORT
ALLIED ARTS FOUNDATION 3518 FREMONT AVE N #521 SEATTLE, WA 98103	91-0829974	501(C)(3)	47,500.	0.			GENERAL SUPPORT
SEATTLE SHAKESPEARE COMPANY PO BOX 19595 SEATTLE, WA 98109	91-1512717	501(C)(3)	47,127.	0.			GENERAL SUPPORT
ARTIST TRUST 1211 E DENNY WAY #A25 SEATTLE, WA 98122	91-1353974	501(C)(3)	45,294.	0.			GENERAL SUPPORT
FRACTURED ATLAS PO BOX 55 HARTSDALE, WA 10530	11-3451703	501(C)(3)	42,500.	0.			GENERAL SUPPORT
PUYALLUP TRIBE OF INDIANS CULTURAL ARTS PROGRAM - 3002 DUCT CHO ST - TACOMA, WA 98404	91-0955402	PUYALLUP TRIBE O	42,500.	0.			GENERAL SUPPORT
TACOMA ART MUSEUM 1701 PACIFIC AVE TACOMA, WA 98402	91-0697444	501(C)(3)	40,874.	0.			GENERAL SUPPORT
SENIORS CREATING ART 4140 SW KENYON ST SEATTLE, WA 98136	46-2095281	501(C)(3)	37,500.	0.			GENERAL SUPPORT
FRYE ART MUSEUM 704 TERRY AVE SEATTLE, WA 98104	91-0659435	501(C)(3)	37,450.	0.			GENERAL SUPPORT

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LANGSTON 104 17TH AVE S SEATTLE, WA 98144	81-2515412	501(C)(3)	35,660.	0.			GENERAL SUPPORT
SOUND THEATRE PO BOX 99327 SEATTLE, WA 98139	61-1663804	501(C)(3)	35,390.	0.			GENERAL SUPPORT
DEAF SPOTLIGHT PO BOX 20191 SEATTLE, WA 98102	27-5059109	501(C)(3)	35,320.	0.			GENERAL SUPPORT
HERITAGE RANCH PO BOX 521 EASTSOUND, WA 98245	20-0755792	501(C)(3)	35,000.	0.			GENERAL SUPPORT
MUSEUM OF POP CULTURE 120 6TH AVE N SEATTLE, WA 98109	91-1626784	501(C)(3)	33,530.	0.			GENERAL SUPPORT
NATIONAL NORDIC MUSEUM 2655 NW MARKET ST SEATTLE, WA 98107	91-1107537	501(C)(3)	33,207.	0.			GENERAL SUPPORT
THREE DOLLAR BILL CINEMA 1122 E PIKE ST, #1313 SEATTLE, WA 98122	91-1708195	501(C)(3)	32,780.	0.			GENERAL SUPPORT
MEANY CENTER FOR THE PERFORMING ARTS - PO BOX 351150 - SEATTLE, WA 98195	94-3079432	501(C)(3)	32,720.	0.			GENERAL SUPPORT
HUGO HOUSE 1634 11TH AVE SEATTLE WA 98122 SEATTLE, WA 98122	91-1718383	501(C)(3)	32,460.	0.			GENERAL SUPPORT

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TOWN HALL SEATTLE 720 SENECA ST, SUITE A SEATTLE, WA 98101	91-1910904	501(C)(3)	32,360.	0.			GENERAL SUPPORT
SEATTLE CHAMBER MUSIC SOCIETY 601 UNION ST, SUITE 220 SEATTLE, WA 98101	91-1169836	501(C)(3)	31,760.	0.			GENERAL SUPPORT
SIFF 167 REPUBLICAN ST SEATTLE, WA 98109	91-1489660	501(C)(3)	31,090.	0.			GENERAL SUPPORT
ALLIED ARTS OF WHATCOM COUNTY 1213 CORNWALL AVE BELLINGHAM, WA 98225	91-1177002	501(C)(3)	30,000.	0.			GENERAL SUPPORT
SOUTHEAST EFFECTIVE DEVELOPMENT 5117 RAINIER AVE S SEATTLE, WA 98118	91-0947619	501(C)(3)	30,000.	0.			GENERAL SUPPORT
SEATTLE YOUTH SYMPHONY ORCHESTRA 11065 5TH AVE NE, SUITE A SEATTLE, WA 98125	91-0493840	501(C)(3)	28,489.	0.			GENERAL SUPPORT
HILLTOP ARTISTS IN RESIDENCE PO BOX 6829 TACOMA, WA 98417	91-1667476	501(C)(3)	28,008.	0.			GENERAL SUPPORT
EARSHOT JAZZ SOCIETY 3417 FREMONT AVE N #221 SEATTLE, WA 98103	94-3051610	501(C)(3)	27,700.	0.			GENERAL SUPPORT
NORTHWEST AFRICAN AMERICAN MUSEUM 2300 S MASSACHUSETTS SEATTLE, WA 98144	76-0835379	501(C)(3)	27,140.	0.			GENERAL SUPPORT

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SEATTLE ARTS & LECTURES 340 15TH AVE E #301 SEATTLE, WA 98112	91-1384964	501(C)(3)	26,880.	0.			GENERAL SUPPORT
SPECTRUM DANCE THEATER 800 LAKE WASHINGTON BLVD SEATTLE, WA 98122	91-1263530	501(C)(3)	26,600.	0.			GENERAL SUPPORT
FLYING HOUSE PRODUCTIONS 319 12TH AVE SEATTLE, WA 98122	91-1183859	501(C)(3)	25,970.	0.			GENERAL SUPPORT
TOTEM STAR PO BOX 4554 SEATTLE, WA 98194	82-3271788	501(C)(3)	25,870.	0.			GENERAL SUPPORT
INTIMAN THEATRE 1425 BRDWAY BOX 35 SEATTLE, WA 98122	23-7328597	501(C)(3)	25,670.	0.			GENERAL SUPPORT
206 ZULU 153 14TH AVE SEATTLE, WA 98122	27-0807517	501(C)(3)	25,000.	0.			GENERAL SUPPORT
ADUEFUA CULTURAL EDUCATION WORKSHOP - 6716 RAINIER AVE SOUTH - SEATTLE, WA 98118	91-1641230	501(C)(3)	25,000.	0.			GENERAL SUPPORT
AFRICAN AMERICAN COMMUNITY CULTURE & EDUCATION SOCIETY - PO BOX 3126 - PASCO, WA 99302	05-0592107	501(C)(3)	25,000.	0.			GENERAL SUPPORT
ANACORTES MUSIC PROJECT PO BOX 1903 ANACORTES, WA 98221	81-5421883	501(C)(3)	25,000.	0.			GENERAL SUPPORT

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ARTS NORTHWEST 104 N LAUREL ST PORT ANGELES, WA 98362	94-3048927	501(C)(3)	25,000.	0.			GENERAL SUPPORT
ASIANS FOR COLLECTIVE LIBERATION IN SPOKANE - 25 W MAIN AVE #404 - SPOKANE, WA 99201	87-2478304	501(C)(3)	25,000.	0.			GENERAL SUPPORT
BALLYHOO THEATRE 19616 80TH AVE W, UNIT L EDMONDS, WA 98026	47-1293549	501(C)(3)	25,000.	0.			GENERAL SUPPORT
BELLINGHAM CHAMBER CHORALE 1901 CORNWALL AVE # 395 BELLINGHAM, WA 98225	20-0285101	501(C)(3)	25,000.	0.			GENERAL SUPPORT
BLUE LEGACY 7419 EBBERT DRIVE SOUTHEAST PORT ORCHARD, WA 98367	83-4307421	501(C)(3)	25,000.	0.			GENERAL SUPPORT
BURLYCON PO BOX 31695 SEATTLE, WA 98103	45-2050517	501(C)(3)	25,000.	0.			GENERAL SUPPORT
CAMAS FOUNDATION 1821 N LECLERC RD CUSICK, WA 99119	68-0498731	501(C)(3)	25,000.	0.			GENERAL SUPPORT
CAPITAL CITY PRIDE 1001 COOPER PT RDSW140-129 OLYMPIA, WA 98512	99-5055403	501(C)(3)	25,000.	0.			GENERAL SUPPORT
CHEWELAH CREATIVE DISTRICT 401 S PARK PMB 123 CHEWELAH, WA 99109	85-0785000	501(C)(3)	25,000.	0.			GENERAL SUPPORT

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CHILDREN OF THE SETTING SUN PRODUCTIONS - 114 W MAGNOLIA ST - BELLINGHAM, WA 98225	47-5005550	501(C)(3)	25,000.	0.			GENERAL SUPPORT
CHILDREN'S MUSEUM OF SKAGIT COUNTY 432 FASHION WAY BURLINGTON, WA 98233	91-2081180	501(C)(3)	25,000.	0.			GENERAL SUPPORT
COAST SALISH WOOL WEAVING CENTER 792 N RESERVATION RD SKOKOMISH, WA 98584	83-1302559	501(C)(3)	25,000.	0.			GENERAL SUPPORT
CULTUREWORKS 220 ERIE AVE SEATTLE, WA 98122	23-2732224	501(C)(3)	25,000.	0.			GENERAL SUPPORT
ENTERTAINMENT RESOURCE ALLIANCE 7100 FORT DENT WAY SUITE 100 TUKWILA, WA 98188	85-0500571	501(C)(3)	25,000.	0.			GENERAL SUPPORT
ESTELITA'S LIBRARY 241 MLK JR WAY S SEATTLE, WA 98144	83-2105428	501(C)(3)	25,000.	0.			GENERAL SUPPORT
EVERGREEN SOCIAL IMPACT PO BOX 429 BOTHELL, WA 98041	86-2954398	501(C)(3)	25,000.	0.			GENERAL SUPPORT
FABLAB NONPROFIT 764 S 38TH ST TACOMA, WA 98418	82-4619891	501(C)(3)	25,000.	0.			GENERAL SUPPORT
FILIPINO AMERICAN NORTHWEST ASSOCIATION - 205 N UNIVERSITY RD #5 - SPOKANE VALLEY, WA 99206	83-2926862	501(C)(3)	25,000.	0.			GENERAL SUPPORT

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FREAKOUT FESTIVAL PO BOX 1357 WINTHROP, WA 98862	99-1451143	501(C)(3)	25,000.	0.			GENERAL SUPPORT
FUTURE ARTS 4730 UNIVERSITY WAY NE PMB 2887 SEATTLE, WA 98105	87-0950093	501(C)(3)	25,000.	0.			GENERAL SUPPORT
GEEKGIRLCON 7511 GREENWOOD AVE N SUITE 4250 SEATTLE, WA 98103	27-4177245	501(C)(3)	25,000.	0.			GENERAL SUPPORT
GRACE'S MAHALI PO BOX 1651 PORT TOWNSEND, WA 98368	88-1704782	501(C)(3)	25,000.	0.			GENERAL SUPPORT
GREAT BEND CENTER FOR MUSIC PO BOX 501, UNION, WA 98592	82-1699863	501(C)(3)	25,000.	0.			GENERAL SUPPORT
GRUNEWALD GUILD 19003 RIVER RD LEAVENWORTH, WA 98826	91-1126086	501(C)(3)	25,000.	0.			GENERAL SUPPORT
HIGHLANDS COMMUNITY SUPPORT COALITION - PO BOX 372 - OROVILLE, WA 98844	88-3969782	501(C)(3)	25,000.	0.			GENERAL SUPPORT
HIGHLINE HERITAGE MUSEUM 819 SW 152ND ST BURIEN, WA 98166	91-1655243	501(C)(3)	25,000.	0.			GENERAL SUPPORT
HONK! FESTIVAL WEST PO BOX 20242 SEATTLE, WA 98102	86-3761255	501(C)(3)	25,000.	0.			GENERAL SUPPORT

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INDIGENOUS CREATIVES COLLECTIVE 3815 S OTHELLO ST SUITE 100/348 SEATTLE, WA 98118	86-1235460	501(C)(3)	25,000.	0.			GENERAL SUPPORT
INDIGENOUS ROOTS & REPARATION FOUNDATION - PO BOX 856 - WENATCHEE, WA 98807	87-1933610	501(C)(3)	25,000.	0.			GENERAL SUPPORT
INSPIRATIONS DANCE STUDIO 3621 E SPRINGFIELD AVE SPOKANE, WA 99202	47-1165896	501(C)(3)	25,000.	0.			GENERAL SUPPORT
JAMES AND JANIE WASHINGTON FOUNDATION - PO BOX 22952 - SEATTLE, WA 98122	91-1944562	501(C)(3)	25,000.	0.			GENERAL SUPPORT
JHP CULTURAL AND DIVERSITY LEGACY 924 NORTH 199TH ST SHORELINE, WA 98133	47-4907087	501(C)(3)	25,000.	0.			GENERAL SUPPORT
KALISPEL INDIAN COMMUNITY, PUBLIC WORKS DEPARTMENT - PO BOX 39 - USK, WA 99180	91-0875018	501(C)(3)	25,000.	0.			GENERAL SUPPORT
KEY CITY PLAYERS 419 WASHINGTON ST PORT TOWNSEND, WA 98368	91-6070946	501(C)(3)	25,000.	0.			GENERAL SUPPORT
KOKUA SERVICES 1226 CARPENTER RD SE LACEY, WA 98503	91-1792867	501(C)(3)	25,000.	0.			GENERAL SUPPORT
LARSON GALLERY GUILD PO BOX 22520 YAKIMA, WA 98902	23-7450104	501(C)(3)	25,000.	0.			GENERAL SUPPORT

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LEWIS COUNTY HISTORICAL MUSEUM 599 NW FRONT WAY CHEHALIS, WA 98532	91-6072021	501(C)(3)	25,000.	0.			GENERAL SUPPORT
LIVING VOICES 3417 EVANSTON AVE N #225 SEATTLE, WA 98103	94-3164871	501(C)(3)	25,000.	0.			GENERAL SUPPORT
MAKE.SHIFT ART SPACE 306 FLORA ST BELLINGHAM, WA 98225	26-2871326	501(C)(3)	25,000.	0.			GENERAL SUPPORT
MARI'S PLACE FOR THE ARTS 9529 29TH ST NE LAKE STEVENS, WA 98258	45-3411935	501(C)(3)	25,000.	0.			GENERAL SUPPORT
MOVIMIENTO AFROLATINO SEATTLE (MS) PO BOX 14273 SEATTLE, WA 98114	47-1416753	501(C)(3)	25,000.	0.			GENERAL SUPPORT
NO MORE UNDER 3815 S OTHELLO ST #100-310 SEATTLE, WA 98118	84-3022106	501(C)(3)	25,000.	0.			GENERAL SUPPORT
NORTHWEST DESIGNER CRAFTARTISTS 2256 SE 42ND CT LANGLEY, WA 98260	94-3210925	501(C)(3)	25,000.	0.			GENERAL SUPPORT
NOVELTEASE THEATRE 3604 NE 143RD ST SEATTLE, WA 98125	92-1615210	501(C)(3)	25,000.	0.			GENERAL SUPPORT
OASIS YOUTH CENTER 2215 PACIFIC AVE TACOMA, WA 98402	45-5381980	501(C)(3)	25,000.	0.			GENERAL SUPPORT

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OCHEAMI 127 22ND AVE SUITE 7 SEATTLE, WA 98122	91-1152736	501(C)(3)	25,000.	0.			GENERAL SUPPORT
PAWSWITHCAUSE 12421 123RD AVE NORTHEAST LAKE STEVENS, WA 98258	84-2263128	501(C)(3)	25,000.	0.			GENERAL SUPPORT
PHOENIX THEATRE 9673 FIRDALE AVE EDMONDS, WA 98020	26-4105910	501(C)(3)	25,000.	0.			GENERAL SUPPORT
PORT TOWNSEND SCHOOL OF WOODWORKING - 200 BATTERY WAY - PORT TOWNSEND, WA 98368	27-0756635	501(C)(3)	25,000.	0.			GENERAL SUPPORT
POWERFUL VOICES 840 E DENNY WAY, SUITE 102 SEATTLE, WA 98122	91-1679907	501(C)(3)	25,000.	0.			GENERAL SUPPORT
PUGET SOUNDWORKS 6523 CALIFORNIA AVE SW #514 SEATTLE, WA 98032	83-1286693	501(C)(3)	25,000.	0.			GENERAL SUPPORT
QUINAULT INDIAN NATION LANGUAGE DEPARTMENT - 1214 AALIS DRIVE - TAHOLAH, WA 98587	91-0760952	501(C)(3)	25,000.	0.			GENERAL SUPPORT
RAIN CITY ROCK CAMP 117 EAST LOUISA ST #445 SEATTLE, WA 98102	94-3455872	501(C)(3)	25,000.	0.			GENERAL SUPPORT
RAINBOW CENTER 2215 PACIFIC AVE, TACOMA, WA 98402	91-1859897	501(C)(3)	25,000.	0.			GENERAL SUPPORT

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RAINBOW CITY PO BOX 45454 SEATTLE, WA 98145	91-2018261	501(C)(3)	25,000.	0.			GENERAL SUPPORT
REACT THEATRE 1122 E PIKE ST - BOX 1111 SEATTLE, WA 98122	46-4954740	501(C)(3)	25,000.	0.			GENERAL SUPPORT
REAL ART TACOMA 5412 SOUTH TACOMA WAY TACOMA, WA 98409	80-0459258	501(C)(3)	25,000.	0.			GENERAL SUPPORT
REBOOT THEATRE COMPANY 8112 5TH AVE NE SEATTLE, WA 98115	81-4279851	501(C)(3)	25,000.	0.			GENERAL SUPPORT
REGIONAL AREA YOUTH DEVELOPMENT ORGANIZATION - 8635 45TH AVE S - SEATTLE, WA 98118	81-4125824	501(C)(3)	25,000.	0.			GENERAL SUPPORT
REGIONAL THEATRE OF THE PALOUSE PO BOX 1183 PULLMAN, WA 99163	20-8406847	501(C)(3)	25,000.	0.			GENERAL SUPPORT
REMAKERY 2718 S 14TH ST TACOMA, WA 98405	92-2895997	501(C)(3)	25,000.	0.			GENERAL SUPPORT
RESOUNDING LOVE CENTER FOR THE ARTS - 4970 12TH AVE SOUTH - SEATTLE, WA 98108	85-1176137	501(C)(3)	25,000.	0.			GENERAL SUPPORT
SAMISH INDIAN NATION CHELNGEN DEPARTMENT - 715 SEAFARERS WAY SUITE 200, PO BOX 217 - ANACORTES, WA 98221	91-0931896	501(C)(3)	25,000.	0.			GENERAL SUPPORT

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SEATTLE CITY OF LITERATURE PO BOX 31040 SEATTLE, WA 98103	47-1207148	501(C)(3)	25,000.	0.			GENERAL SUPPORT
SEATTLE FLOW ARTS COLLECTIVE PO BOX 22325 SEATTLE, WA 98122	84-4196256	501(C)(3)	25,000.	0.			GENERAL SUPPORT
SEATTLE INDIES 2142 8TH AVE N, APT 407 SEATTLE, WA 98109	81-4423414	501(C)(3)	25,000.	0.			GENERAL SUPPORT
SEATTLE LATINO FILM FESTIVAL PO BOX 65074 SEATTLE, WA 98155	45-5363567	501(C)(3)	25,000.	0.			GENERAL SUPPORT
SEATTLE PRIDE 600 1ST AVE, SUITE 616 SEATTLE, WA 98104	85-1407007	501(C)(3)	25,000.	0.			GENERAL SUPPORT
SEATTLE TRANS AND NONBINARY CHORAL ENSEMBLE - 17837 1ST AVE S, #524 - NORMANDY PARK, WA 98148	88-2081310	501(C)(3)	25,000.	0.			GENERAL SUPPORT
SEVENTH WAVE MAGAZINE 1213 SW 174TH PL NORMANDY PARK, WA 98166	47-4469984	501(C)(3)	25,000.	0.			GENERAL SUPPORT
SKOKOMISH INDIAN TRIBE 80 NORTH TRIBAL CENTER RD SKOKOMISH, WA 98584	91-0874463	SKOKOMISH INDIAN	25,000.	0.			GENERAL SUPPORT
SOCIAL GOOD FUND PO BOX #5473 RICHMOND, CA 94805	46-1323531	501(C)(3)	25,000.	0.			GENERAL SUPPORT

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SOCIAL JUSTICE FILM INSTITUTE 7511 GREENWOOD AVE N #506 SEATTLE, WA 98103	86-1781669	501(C)(3)	25,000.	0.			GENERAL SUPPORT
SOMALI CULTURAL CENTER 7100 FORT DENT WAY, SUITE 100 TUKWILA, WA 98188	93-3831740	501(C)(3)	25,000.	0.			GENERAL SUPPORT
SOUTH BEACH ARTS ASSOCIATION PO BOX 2006 WESTPORT, WA 98595	20-8799856	501(C)(3)	25,000.	0.			GENERAL SUPPORT
SOU'WESTER ARTIST RESIDENCY PO BOX 16 SEAVIEW, WA 98644	82-1077038	501(C)(3)	25,000.	0.			GENERAL SUPPORT
SPECTRUM CENTER 1514 N MONROE ST SPOKANE, WA 99201	36-4950751	501(C)(3)	25,000.	0.			GENERAL SUPPORT
SPECTRUM SINGERS 1818 W FRANCIS AVE, PO BOX 243 SPOKANE, WA 99205	83-3572781	501(C)(3)	25,000.	0.			GENERAL SUPPORT
SPOKANE PRIDE 715 E SPRAGUE AVE SUITE 115 SPOKANE, WA 99202	20-3292606	501(C)(3)	25,000.	0.			GENERAL SUPPORT
SPOKANE UNITED WE STAND 10922 E 47TH AVE SPOKANE VALLEY, WA 99206	26-0223132	501(C)(3)	25,000.	0.			GENERAL SUPPORT
SUQUAMISH MUSEUM 18490 SUQUAMISH WAY NE SUQUAMISH, WA 98392	91-0854725	501(C)(3)	25,000.	0.			GENERAL SUPPORT

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TACOMA PHOTO CENTER 1720 S 7TH ST SUITE 103 TACOMA, WA 98405	88-0996862	501(C)(3)	25,000.	0.			GENERAL SUPPORT
TACOMA URBAN PERFORMING ARTS CENTER - PO BOX 5602 - TACOMA, WA 98415	82-0972418	501(C)(3)	25,000.	0.			GENERAL SUPPORT
TAHOMA INDIAN CENTER PO BOX 111144 TACOMA, WA 98411	87-3327859	501(C)(3)	25,000.	0.			GENERAL SUPPORT
THE BRIDGE MUSIC PROJECT 120 STATE AVE NW, #1417 OLYMPIA, WA 98501	82-1633999	501(C)(3)	25,000.	0.			GENERAL SUPPORT
THE COMMON ACRE 9666 51ST AVE S SEATTLE, WA 98118	27-2709558	501(C)(3)	25,000.	0.			GENERAL SUPPORT
THE DANCE THING 2305 N 41ST ST SEATTLE, WA 98103	83-4334802	501(C)(3)	25,000.	0.			GENERAL SUPPORT
THE FEAST 3411 20TH AVE S SEATTLE, WA 98144	47-3954408	501(C)(3)	25,000.	0.			GENERAL SUPPORT
THE OLD HOTEL ART GALLERY 33 E LARCH ST OTHELLO, WA 99344	51-0167021	501(C)(3)	25,000.	0.			GENERAL SUPPORT
THEATRE PUGET SOUND 305 HARRISON ST SEATTLE, WA 98109	91-1779663	501(C)(3)	25,000.	0.			GENERAL SUPPORT

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TOOLBOX LEARNING LABORATORIES 309 PUYALLUP AVE TACOMA, WA 98421	99-1275748	501(C)(3)	25,000.	0.			GENERAL SUPPORT
TULALIP TRIBES EDUCATION DIVISION 6406 MARINE DRIVE TULALIP, WA 98271	91-0557816	501(C)(3)	25,000.	0.			GENERAL SUPPORT
TWO RIVERS GALLERY 102 N COLUMBIA ST WENATCHEE, WA 98801	45-2545391	501(C)(3)	25,000.	0.			GENERAL SUPPORT
UNKITAWA PO BOX 127 KENT, WA 98035	83-2398323	501(C)(3)	25,000.	0.			GENERAL SUPPORT
UP UP UP 246 OLD HIGHWAY 99 N BELLINGHAM, WA 98229	86-2443132	501(C)(3)	25,000.	0.			GENERAL SUPPORT
UTOPIA WASHINGTON 841 CENTRAL AVE N SUITE C106 KENT, WA 98032	61-1668192	501(C)(3)	25,000.	0.			GENERAL SUPPORT
WASHINGTON ENSEMBLE THEATRE PO BOX 20834 SEATTLE, WA 98102	11-3720814	501(C)(3)	25,000.	0.			GENERAL SUPPORT
WASHINGTON OLD TIME FIDDLERS ASSOCIATION - 156 SAN JUAN DRIVE - SEQUIM, WA 98382	91-1188969	501(C)(3)	25,000.	0.			GENERAL SUPPORT
WHITE CENTER COMMUNITY DEVELOPMENT ASSOCIATION - 605 SW 108TH ST - SEATTLE, WA 98146	72-1526567	501(C)(3)	25,000.	0.			GENERAL SUPPORT

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YAKIMA MUSIC EN ACCIN (YAMA) PO BOX 317 YAKIMA, WA 98907	30-0893939	501(C)(3)	25,000.	0.			GENERAL SUPPORT
YAKIMA PRIDE 2529 MAIN ST, SUITE 236 UNION GAP, WA 98903	84-1745033	501(C)(3)	25,000.	0.			GENERAL SUPPORT
YOUNG SHAKESPEARE WORKSHOP 6523 CALIFORNIA AVE SW SUITE 214 SEATTLE, WA 98136	20-2660025	501(C)(3)	25,000.	0.			GENERAL SUPPORT
YOUNG WOMEN EMPOWERED 5623 RAINIER AVE S SEATTLE, WA 98118	47-2230647	501(C)(3)	25,000.	0.			GENERAL SUPPORT
YUN THEATER 9032 NE 145TH PL KENMORE, WA 98028	88-4137443	501(C)(3)	25,000.	0.			GENERAL SUPPORT
SEATTLE PRO MUSICA PO BOX 17939 SEATTLE, WA 98127	51-0175286	501(C)(3)	22,930.	0.			GENERAL SUPPORT
RED EAGLE SOARING 108 S WASHINGTON #308 SEATTLE, WA 98104	91-1862731	501(C)(3)	22,800.	0.			GENERAL SUPPORT
MUSEUM OF GLASS 1801 DOCK ST TACOMA, WA 98402	91-1669422	501(C)(3)	22,770.	0.			GENERAL SUPPORT
SPOKANE INDEPENDANT METRO BUSINESS ALLIANCE - 25 W MAIN AVE, SUITE C1 - SPOKANE, WA 99201	82-4824582	501(C)(3)	22,500.	0.			GENERAL SUPPORT

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UNITED INDIANS OF ALL TRIBES FOUNDATION - PO BOX 99100 - SEATTLE, WA 98139	91-0889016	501(C)(3)	22,500.	0.			GENERAL SUPPORT
TACOMA MUSICAL PLAYHOUSE 7116 6TH AVE TACOMA, WA 98406	94-3198670	501(C)(3)	22,080.	0.			GENERAL SUPPORT
PATH WITH ART 200 MERCER ST SEATTLE, WA 98109	26-0599518	501(C)(3)	20,980.	0.			GENERAL SUPPORT
PONGO POETRY PROJECT 130 2ND AVE N #3068 EDMONDS, WA 98020	91-2114772	501(C)(3)	20,000.	0.			GENERAL SUPPORT
JACK STRAW CULTURAL CENTER 4261 ROOSEVELT WAY NE SEATTLE, WA 98105	91-0776606	501(C)(3)	19,460.	0.			GENERAL SUPPORT
SYMPHONY TACOMA 901 BRDWAY, SUITE 600 TACOMA, WA 98402	91-6032976	501(C)(3)	19,290.	0.			GENERAL SUPPORT
PILCHUCK GLASS SCHOOL 240 2ND AVE S SUITE 100 SEATTLE, WA 98104	91-0963132	501(C)(3)	18,489.	0.			GENERAL SUPPORT
JET CITY IMPROV 5031 UNIVERSITY WAY NE #208 SEATTLE, WA 98105	91-1730761	501(C)(3)	17,980.	0.			GENERAL SUPPORT
9TH AND 10TH HORSE CAVALRY BUFFALO SOLDIERS MUSEUM - 1940 SOUTH WILKESON - TACOMA, WA 98405	37-1660458	501(C)(3)	17,500.	0.			GENERAL SUPPORT

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ACTS ON STAGE 10806 12TH AVE SW SEATTLE, WA 98146	85-0694752	501(C)(3)	17,500.	0.			GENERAL SUPPORT
AFTER-SCHOOL ALL-STARS PUGET SOUND 33400 8TH AVE S, SUITE 117 FEDERAL WAY, WA 98003	95-4441208	501(C)(3)	17,500.	0.			GENERAL SUPPORT
ALCHEMY ART CENTER 1255 WOLD RD FRIDAY HARBOR, WA 98250	82-4766421	501(C)(3)	17,500.	0.			GENERAL SUPPORT
ALLIED ARTS ASSOCIATION 89 LEE BLVD RICHLAND, WA 99352	23-7359795	501(C)(3)	17,500.	0.			GENERAL SUPPORT
AMIGOS DE SEATTLE PO BOX 80332 SEATTLE, WA 98108	46-4815329	501(C)(3)	17,500.	0.			GENERAL SUPPORT
ANNEX THEATRE 1122 EAST PIKE ST #1440, SEATTLE, W SEATTLE, WA 98122	94-3057211	501(C)(3)	17,500.	0.			GENERAL SUPPORT
ARBUTUS FOLK SCHOOL 705 4TH AVE E SUITE 101 OLYMPIA, WA 98506	46-3046450	501(C)(3)	17,500.	0.			GENERAL SUPPORT
ART FOR ALL 7231 NE 152ND PL KENMORE, WA 98028	82-4160979	501(C)(3)	17,500.	0.			GENERAL SUPPORT
ART SALVAGE 610 E NORTH FOOTHILLS DRIVE SPOKANE, WA 99207	81-1637564	501(C)(3)	17,500.	0.			GENERAL SUPPORT

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ARTE NOIR 1122 23RD AVE, UNIT B526 SEATTLE, WA 98122	87-1329926	501(C)(3)	17,500.	0.			GENERAL SUPPORT
ARTSED WASHINGTON 1723 31ST AVE SEATTLE, WA 98122	91-1189441	501(C)(3)	17,500.	0.			GENERAL SUPPORT
ARTWALLA PO BOX 2192 WALLA WALLA, WA 99362	91-1575336	501(C)(3)	17,500.	0.			GENERAL SUPPORT
ASCENDANCE POLE & AERIAL ARTS 724 S 3RD ST SUITE A RENTON, WA 98057	82-5021158	501(C)(3)	17,500.	0.			GENERAL SUPPORT
BAYFEST YOUTH THEATRE 4050 20TH AVE SW SUITE B SEATTLE, WA 98106	13-3570285	501(C)(3)	17,500.	0.			GENERAL SUPPORT
BELLINGHAM CIRCUS GUILD PO BOX 795 BELLINGHAM, WA 98227	26-3766737	501(C)(3)	17,500.	0.			GENERAL SUPPORT
BELLINGHAM MAKERSPACE 1 BELLIS FAIR PARKWAY BELLINGHAM, WA 98225	81-5395318	501(C)(3)	17,500.	0.			GENERAL SUPPORT
BHINDESHI 18522 43RD DR SE BOTHELL, WA 98012	82-1525022	501(C)(3)	17,500.	0.			GENERAL SUPPORT
CENTRO AMERICANO 4419 S 366 AUBURN, WA 98001	81-2562582	501(C)(3)	17,500.	0.			GENERAL SUPPORT

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CENTRO CULTURAL MEXICANO 16300 REDMOND WAY SUITE 100 REDMOND, WA 98052	83-3001688	501(C)(3)	17,500.	0.			GENERAL SUPPORT
CHIEF SEATTLE CLUB 410 2ND AVE EXT S SEATTLE, WA 98104	91-0852503	501(C)(3)	17,500.	0.			GENERAL SUPPORT
CLARION WEST PO BOX 31264 SEATTLE, WA 98103	91-1352168	501(C)(3)	17,500.	0.			GENERAL SUPPORT
COLIMA PASCO COLLABORATION AND FRIENDSHIP ASSOCIATION - PO BOX 5331 - PASCO, WA 99302	87-1700200	501(C)(3)	17,500.	0.			GENERAL SUPPORT
COLUMBIA THEATRE ASSOCIATION FOR THE PERFORMING ARTS - PO BOX 1026 - LONGVIEW, WA 98632	91-1186556	501(C)(3)	17,500.	0.			GENERAL SUPPORT
COMMUNITY CULTURAL CENTER OF TONASKET - PO BOX 664 - TONASKET, WA 98855	91-1667770	501(C)(3)	17,500.	0.			GENERAL SUPPORT
CONFLUENCE 1109 EAST 5TH ST VANCOUVER, WA 98661	75-3008926	501(C)(3)	17,500.	0.			GENERAL SUPPORT
EXPRESSIONS ARTS 15600 REDMOND WAY, SUITE 205 REDMOND, WA 98052	88-0849476	501(C)(3)	17,500.	0.			GENERAL SUPPORT
FESTIVAL SUNDIATA PO BOX 24723 SEATTLE, WA 98124	27-0704483	501(C)(3)	17,500.	0.			GENERAL SUPPORT

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FILIPINO COMMUNITY OF SEATTLE 5740 MARTIN LUTHER KING JR WAY S SEATTLE, WA 98118	91-6055858	501(C)(3)	17,500.	0.			GENERAL SUPPORT
FRED OLDFIELD WESTERN HERITAGE CENTER - 422 WEST MEEKER - PUYALLUP, WA 98371	91-2154745	501(C)(3)	17,500.	0.			GENERAL SUPPORT
FRIENDS OF BOXX GALLERY PO BOX 508 TIETON, WA 98947	85-2975947	501(C)(3)	17,500.	0.			GENERAL SUPPORT
FRIENDS OF LITTLE SI GN 1227 S WELLER ST, SUITE A SEATTLE, WA 98144	45-3621880	501(C)(3)	17,500.	0.			GENERAL SUPPORT
IRANIAN AMERICAN COMMUNITY ALLIANCE - PO BOX 4014 - SEATTLE, WA 98194	20-8599199	501(C)(3)	17,500.	0.			GENERAL SUPPORT
IURBAN TEEN 7100 FORT DENT WAY, SUITE 100 TUKWILA, WA 98188	46-5015461	501(C)(3)	17,500.	0.			GENERAL SUPPORT
JAPAN FAIR 14640 NE 24TH ST BELLEVUE, WA 98007	82-3478918	501(C)(3)	17,500.	0.			GENERAL SUPPORT
KHMER COMMUNITY OF SEATTLE KING COUNTY - PO BOX 46284 - SEATTLE, WA 98146	91-1577475	501(C)(3)	17,500.	0.			GENERAL SUPPORT
KITTITAS COUNTY HISTORICAL SOCIETY 114 E 3RD AVE ELLENSBURG, WA 98926	91-6037783	501(C)(3)	17,500.	0.			GENERAL SUPPORT

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LAKE CHELAN BACH FEST PO BOX 554 CHELAN, WA 98816	94-3050234	501(C)(3)	17,500.	0.			GENERAL SUPPORT
LAKEWOOD PLAYHOUSE PO BOX 99041 LAKEWOOD, WA 98496	91-6058223	501(C)(3)	17,500.	0.			GENERAL SUPPORT
LEAVENWORTH SUMMER THEATER 928 PINE ST LEAVENWORTH, WA 98826	91-1637063	501(C)(3)	17,500.	0.			GENERAL SUPPORT
LELOOSKA FOUNDATION PO BOX 526 ARIEL, WA 98603	91-1037468	501(C)(3)	17,500.	0.			GENERAL SUPPORT
LOOK, LISTEN & LEARN TV 100 ANDOVER PARK WEST, SUITE 150-12 TUKWILA, WA 98188	87-1974554	501(C)(3)	17,500.	0.			GENERAL SUPPORT
LOWER ELWHA KLALLAM TRIBE 2851 LOWER ELWHA RD PORT ANGELES, WA 98363	91-0838085	LOWER ELWHA KLAL	17,500.	0.			GENERAL SUPPORT
MARTIN LUTHER KING FAME COMMUNITY CENTER - 3201 EAST REPUBLICAN ST - SEATTLE, WA 98112	27-4652745	501(C)(3)	17,500.	0.			GENERAL SUPPORT
MENDING WINGS PO BOX 324 WAPATO, WA 98951	20-4312928	501(C)(3)	17,500.	0.			GENERAL SUPPORT
MID-COLUMBIA MASTERSINGERS PO BOX 461 RICHLAND, WA 99352	91-1362433	501(C)(3)	17,500.	0.			GENERAL SUPPORT

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MIDSUMMER MUSICAL RETREAT SOCIETY 702 LANE DE CHANTAL PORT TOWNSEND, WA 98368	91-1302643	501(C)(3)	17,500.	0.			GENERAL SUPPORT
MIRROR STAGE 5129 2ND AVE NW SEATTLE, WA 98107	91-2145441	501(C)(3)	17,500.	0.			GENERAL SUPPORT
MOMENTUM DANCE ACADEMY 15811 AMBAUM BLVD SW, SUITE 160 BURIEN, WA 98166	27-1827270	501(C)(3)	17,500.	0.			GENERAL SUPPORT
MORNING STAR KOREAN CULTURAL CENTER - 15206 18TH AVE W - LYNNWOOD, WA 98087	27-0028338	501(C)(3)	17,500.	0.			GENERAL SUPPORT
NAA KANI NATIVE PROGRAM 814 NE 40TH ST SEATTLE, WA 98015	82-2361294	501(C)(3)	17,500.	0.			GENERAL SUPPORT
NOOKSACK INDIAN TRIBE PO BOX 157 DEMING, WA 98244	91-1487296	NOOKSACK INDIAN	17,500.	0.			GENERAL SUPPORT
NORTHWIND ART 701 WATER ST PORT TOWNSEND, WA 98368	47-3067617	501(C)(3)	17,500.	0.			GENERAL SUPPORT
OLYMPIA ARTSPACE ALLIANCE 120 STATE AVE #183 OLYMPIA, WA 98501	45-2670138	501(C)(3)	17,500.	0.			GENERAL SUPPORT
OLYMPIA FAMILY THEATER 612 4TH AVE E OLYMPIA, WA 98501	83-0465459	501(C)(3)	17,500.	0.			GENERAL SUPPORT

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OLYMPIA FILM SOCIETY 416 WASHINGTON ST SE #208 OLYMPIA, WA 98501	91-1110849	501(C)(3)	17,500.	0.			GENERAL SUPPORT
PALOUSE CHORAL SOCIETY PO BOX 994 PULLMAN, WA 99163	91-2046954	501(C)(3)	17,500.	0.			GENERAL SUPPORT
PANAMA FOLKLORE SEATTLE 8341 WALCOTT AVE S SEATTLE, WA 98118	47-4100129	501(C)(3)	17,500.	0.			GENERAL SUPPORT
PENINSULA ASSOCIATION OF PERFORMING ARTISTS - PO BOX 1458 - OCEAN PARK, WA 98640	91-1852087	501(C)(3)	17,500.	0.			GENERAL SUPPORT
PORT GAMBLE S'KLALLAM FOUNDATION 31912 LITTLE BOSTON RD NE KINGSTON, WA 98346	91-1145489	501(C)(3)	17,500.	0.			GENERAL SUPPORT
PORT TOWNSEND FILM FESTIVAL 211 TAYLOR ST, SUITE 401A PORT TOWNSEND, WA 98368	52-2455215	501(C)(3)	17,500.	0.			GENERAL SUPPORT
POTLATCH FUND 800 5TH AVE #101-257 SEATTLE, WA 98104	73-1712905	501(C)(3)	17,500.	0.			GENERAL SUPPORT
POTTERY NORTHWEST 220 3RD AVE S LOWER LEVEL SEATTLE, WA 98104	91-0815956	501(C)(3)	17,500.	0.			GENERAL SUPPORT
PRATT FINE ARTS CENTER 1902 SOUTH MAIN ST SEATTLE, WA 98144	91-1186639	501(C)(3)	17,500.	0.			GENERAL SUPPORT

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PRIDEFEST 2623 E PIKE ST SEATTLE, WA 98122	47-1817063	501(C)(3)	17,500.	0.			GENERAL SUPPORT
RHAPSODY WINTERGUARD PO BOX 13080 MILL CREEK, WA 98082	27-0955525	501(C)(3)	17,500.	0.			GENERAL SUPPORT
SADHANA 409 245TH AVE SE SAMMAMISH, WA 98074	83-4083822	501(C)(3)	17,500.	0.			GENERAL SUPPORT
SALISH SCHOOL OF SPOKANE PO BOX 10271 SPOKANE, WA 99209	27-1126478	501(C)(3)	17,500.	0.			GENERAL SUPPORT
SAVOY SWING CLUB 4917 S ALASKA ST SEATTLE, WA 98118	91-1621371	501(C)(3)	17,500.	0.			GENERAL SUPPORT
SCHOOL OF ACROBATICS & NEW CIRCUS ARTS - 674 S ORCAS ST - SEATTLE, WA 98108	20-0300045	501(C)(3)	17,500.	0.			GENERAL SUPPORT
SEATTLE CHINESE BROADCASTING ASSOCIATION - 5900 92ND AVE SE - MERCER ISLAND, WA 98040	46-5734108	501(C)(3)	17,500.	0.			GENERAL SUPPORT
SEATTLE MONGOLIAN YOUTH CENTER 16125 JUANITA-WOODINVILLE WAY NE 41 BOTHELL, WA 98011	82-3571377	501(C)(3)	17,500.	0.			GENERAL SUPPORT
SNOQUALMIE INDIAN TRIBE PO BOX 969, SNOQUALMIE, WA 98065-09 SNOQUALMIE, WA 98065	91-2084464	SNOQUALMIE INDIA	17,500.	0.			GENERAL SUPPORT

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STRAWBERRY THEATRE WORKSHOP 417 HARVARD AVE E #7 SEATTLE, WA 98102	20-0353181	501(C)(3)	17,500.	0.			GENERAL SUPPORT
TACOMA LITTLE THEATRE 210 N I ST TACOMA, WA 98403	91-0485763	501(C)(3)	17,500.	0.			GENERAL SUPPORT
TEAM GLEAM 12815 S FAIRWAY RIDGE LN SPOKANE, WA 99224	85-0674901	501(C)(3)	17,500.	0.			GENERAL SUPPORT
TEMPLE OF MUSIC 603 234TH PL NE SAMMAMISH, WA 98074	82-4834747	501(C)(3)	17,500.	0.			GENERAL SUPPORT
TERRAIN PROGRAMS 304 W PACIFIC AVE, SUITE 210 SPOKANE, WA 99201	46-2565099	501(C)(3)	17,500.	0.			GENERAL SUPPORT
THE DOLLS DRILL TEAM 2716 S 269TH ST KENT, WA 98032	13-4312857	501(C)(3)	17,500.	0.			GENERAL SUPPORT
THE ESOTERICS 800 COLUMBIA ST #701 SEATTLE, WA 98104	91-1617663	501(C)(3)	17,500.	0.			GENERAL SUPPORT
THE HAWK FOUNDATION 816 ADAMS ST OLYMPIA, WA 98501	83-2157920	501(C)(3)	17,500.	0.			GENERAL SUPPORT
THE JAZZ PROJECT 413 MOREY AVE BELLINGHAM, WA 98225	91-1777187	501(C)(3)	17,500.	0.			GENERAL SUPPORT

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE RESIDENCY C/O MEZZANINE PO BOX 9642 SEATTLE, WA 98121	84-4232460	501(C)(3)	17,500.	0.			GENERAL SUPPORT
THE RHAPSODY PROJECT 12817 SE 186TH PL RENTON, WA 98058	87-3845851	501(C)(3)	17,500.	0.			GENERAL SUPPORT
TIETON ARTS & HUMANITIES PO BOX 171 TIETON, WA 98947	26-0587575	501(C)(3)	17,500.	0.			GENERAL SUPPORT
TURKISH AMERICAN CULTURAL ASSOCIATION OF WASHINGTON - PO BOX 255 - BELLEVUE, WA 98009	20-5426812	501(C)(3)	17,500.	0.			GENERAL SUPPORT
UBUNTU NERUDO AFRICAN HERITAGE 12601 109TH CT NE APT K202 KIRKLAND, WA 98034	87-3026240	501(C)(3)	17,500.	0.			GENERAL SUPPORT
UMOJA PEACE CENTER PO BOX 22328 SEATTLE, WA 98122	46-3934123	501(C)(3)	17,500.	0.			GENERAL SUPPORT
UNDERGROUND WRITING PO BOX 1043 MOUNT VERNON, WA 98273	83-2570377	501(C)(3)	17,500.	0.			GENERAL SUPPORT
UNION CULTURAL CENTER PO BOX 14273 SEATTLE, WA 98114	45-0510149	501(C)(3)	17,500.	0.			GENERAL SUPPORT
URBAN ARTWORKS 815 SEATTLE BLVD S, SUITE B7 SEATTLE, WA 98134	91-1939910	501(C)(3)	17,500.	0.			GENERAL SUPPORT

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WALLA WALLA SUMMER THEATER 129 E ALDER ST SUITE B WALLA WALLA, WA 99362	87-3872074	501(C)(3)	17,500.	0.			GENERAL SUPPORT
WINDOW SEAT MEDIA PO BOX 2733 OLYMPIA, WA 98507	81-1200465	501(C)(3)	17,500.	0.			GENERAL SUPPORT
WOMEN UNITED 12214 75TH AVE SO SEATTLE, WA 98178	30-0750143	501(C)(3)	17,500.	0.			GENERAL SUPPORT
WONDER OF WOMEN 115 PREFONTAINE PL S SUITE 510 SEATTLE, WA 98104	81-4221805	501(C)(3)	17,500.	0.			GENERAL SUPPORT
WOODLAND PARK PLAYERS 411 N 64TH ST SEATTLE, WA 98103	81-1271699	501(C)(3)	17,500.	0.			GENERAL SUPPORT
WRITE253 1102 TACOMA AVE S, SUITE 208 TACOMA, WA 98402	81-3531110	501(C)(3)	17,500.	0.			GENERAL SUPPORT
YOUTH IN FOCUS 2100 24TH AVE S SUITE 310 SEATTLE, WA 98144	91-1821137	501(C)(3)	17,500.	0.			GENERAL SUPPORT
ARTSWEST 4711 CALIFORNIA AVE SW SEATTLE, WA 98116	91-1440032	501(C)(3)	17,140.	0.			GENERAL SUPPORT
TAPROOT THEATRE PO BOX 30946 SEATTLE, WA 98113	91-0971237	501(C)(3)	16,980.	0.			GENERAL SUPPORT

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SEATTLE REPERTORY JAZZ ORCHESTRA PO BOX 45592 SEATTLE, WA 98145	91-1928901	501(C)(3)	16,720.	0.			GENERAL SUPPORT
AFRICATOWN COMMUNITY LAND TRUST 1601 EAST YESLER WAY SEATTLE, WA 98122	82-1710458	501(C)(3)	12,500.	0.			GENERAL SUPPORT
ALKI ART FAIR 6523 CALIFORNIA AVE SW, #280 SEATTLE, WA 98136	45-3730135	501(C)(3)	12,500.	0.			GENERAL SUPPORT
ALL ABOARD OF AMERICA 1 PO BOX 5281 EVERETT, WA 98201	20-4315421	501(C)(3)	12,500.	0.			GENERAL SUPPORT
AMERICAN ASIAN PERFORMING ARTS THEATRE - 14821 SE 16TH ST - BELLEVUE, WA 98007	84-1709790	501(C)(3)	12,500.	0.			GENERAL SUPPORT
ANCORA 7400 WOODLAWN AVE, NE SEATTLE, WA 98115	20-2570638	501(C)(3)	12,500.	0.			GENERAL SUPPORT
ARCHIPELAGO COLLECTIVE 3015 NW 77TH ST SEATTLE, WA 98117	81-2876277	501(C)(3)	12,500.	0.			GENERAL SUPPORT
ART/NOT TERMINAL GALLERY 305 HARRISON ST SEATTLE, WA 98109	91-1454550	501(C)(3)	12,500.	0.			GENERAL SUPPORT
ARTS CORPS 4408 DELRIDGE WAY SW SUITE 110 SEATTLE, WA 98106	91-2044679	501(C)(3)	12,500.	0.			GENERAL SUPPORT

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ARTS FIRST 4065 PACIFIC AVE TACOMA, WA 98418	88-2167699	501(C)(3)	12,500.	0.			GENERAL SUPPORT
ARTS IMPACT 1911 SW CAMPUS DRIVE FEDERAL WAY, WA 98023	83-4390508	501(C)(3)	12,500.	0.			GENERAL SUPPORT
ARTS OF SNOHOMISH 1024 FIRST ST, SUITE 104 SNOHOMISH, WA 98290	20-0302049	501(C)(3)	12,500.	0.			GENERAL SUPPORT
ASIA PACIFIC CULTURAL CENTER 3513 EAST PORTLAND AVE TACOMA, WA 98404	91-1854410	501(C)(3)	12,500.	0.			GENERAL SUPPORT
BAINBRIDGE ISLAND JAPANESE AMERICAN EXCLUSION MEMORIAL ASSOCIATION - 221 WINSLOW WAY W, SUITE 102 - BAINBRIDGE ISLAND, WA	26-3504475	501(C)(3)	12,500.	0.			GENERAL SUPPORT
BASE 6520 5TH AVE SOUTH #122 SEATTLE, WA 98108	30-0894683	501(C)(3)	12,500.	0.			GENERAL SUPPORT
BEACON ARTS PO BOX 28418 SEATTLE, WA 98118	80-0494495	501(C)(3)	12,500.	0.			GENERAL SUPPORT
BEACON HILL MERCHANTS ASSOCIATION DBA BEACON BUSINESS ALLIANCE - 3434 16TH AVE S - SEATTLE, WA 98118	45-0844084	501(C)(3)	12,500.	0.			GENERAL SUPPORT
BELLINGHAM ARTS ACADEMY FOR YOUTH 1059 NORTH STATE ST BELLINGHAM, WA 98225	38-3868071	501(C)(3)	12,500.	0.			GENERAL SUPPORT

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BELLTOWN ART WALK 2301 1ST AVE SEATTLE, WA 98121	83-4315025	501(C)(3)	12,500.	0.			GENERAL SUPPORT
BLACKPAST 4616 25TH AVE NE, PMB 222 SEATTLE, WA 98105	26-1625373	501(C)(3)	12,500.	0.			GENERAL SUPPORT
BRAZIL CENTER 23308 59TH PL S KENT, WA 98033	04-3785890	501(C)(3)	12,500.	0.			GENERAL SUPPORT
BYRD ENSEMBLE 4722 FAUNTLEROY WAY SW UNIT 123 SEATTLE, WA 98116	20-8070213	501(C)(3)	12,500.	0.			GENERAL SUPPORT
C895/KNHC PUBLIC RADIO ASSOCIATION 10750 30TH AVE NE SEATTLE, WA 98125	20-5402402	501(C)(3)	12,500.	0.			GENERAL SUPPORT
CARNEGIE PICTURE LAB INFO@PICTURELABORG WALLA WALLA, WA 99362	91-0864854	501(C)(3)	12,500.	0.			GENERAL SUPPORT
CASCADE SYMPHONY ORCHESTRA PO BOX 876 EDMONDS, WA 98020	91-2072869	501(C)(3)	12,500.	0.			GENERAL SUPPORT
CLALLAM MOSAIC 129 W 1ST ST PORT ANGELES, WA 98362	91-1941022	501(C)(3)	12,500.	0.			GENERAL SUPPORT
COLUMBIA GORGE MUSEUM 990 SW ROCK CREEK DRIVE STEVENSON, WA 98648	93-0955648	501(C)(3)	12,500.	0.			GENERAL SUPPORT

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COYOTE CENTRAL 2300 E CHERRY ST SEATTLE, WA 98122	91-1444797	501(C)(3)	12,500.	0.			GENERAL SUPPORT
CREATOR ZONE 127 E LAKE SUITEVENS RD LAKE STEVENS, WA 98258	92-0846911	501(C)(3)	12,500.	0.			GENERAL SUPPORT
CULTIVATE SOUTH PARK 1251 S CLOVERDALE ST, UNIT B SEATTLE, WA 98108	84-4251891	501(C)(3)	12,500.	0.			GENERAL SUPPORT
DABULI 14520 12TH AVE NE SHORELINE, WA 98155	82-3709342	501(C)(3)	12,500.	0.			GENERAL SUPPORT
DACHA THEATRE 4555 39TH AVE SW, APT B-716 SEATTLE, WA 98116	93-4103884	501(C)(3)	12,500.	0.			GENERAL SUPPORT
DANCE THEATRE SEATTLE 3841A 23RD AVE W SEATTLE, WA 98199	92-0257974	501(C)(3)	12,500.	0.			GENERAL SUPPORT
DELRIDGE NEIGHBORHOODS DEVELOPMENT ASSOCIATION - 4408 DELRIDGE WAY SW - SEATTLE, WA 98106	91-1741016	501(C)(3)	12,500.	0.			GENERAL SUPPORT
DENSHO 1416 S JACKSON ST SEATTLE, WA 98144	91-2164150	501(C)(3)	12,500.	0.			GENERAL SUPPORT
DRAMA DOCK PO BOX 294 VASHON, WA 98070	91-0979775	501(C)(3)	12,500.	0.			GENERAL SUPPORT

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EDMONDS DRIFTWOOD PLAYERS PO BOX 385 EDMONDS, WA 98020	91-6060943	501(C)(3)	12,500.	0.			GENERAL SUPPORT
EDMONDS HEIGHTS K-12 PTSO 23200 100TH AVE W EDMONDS, WA 98020	47-5302513	501(C)(3)	12,500.	0.			GENERAL SUPPORT
EL CENTRO DE LA RAZA 2524 16 AVE SOUTH SEATTLE, WA 98144	91-0899927	501(C)(3)	12,500.	0.			GENERAL SUPPORT
ELLENSBURG DANCE ENSEMBLE PO BOX 35 ELLENSBURG, WA 98926	86-1471122	501(C)(3)	12,500.	0.			GENERAL SUPPORT
EMERALD CITY MUSIC PO BOX 31917 SEATTLE, WA 98103	47-4275662	501(C)(3)	12,500.	0.			GENERAL SUPPORT
ETHNIC CULTURAL HERITAGE EXCHANGE 2442 NW MARKET ST #77 SEATTLE, WA 98107	84-4638673	501(C)(3)	12,500.	0.			GENERAL SUPPORT
FINNISH AMERICAN FOLK FESTIVAL PO BOX 156 NASELLE, WA 98638	91-1249695	501(C)(3)	12,500.	0.			GENERAL SUPPORT
FIRE MOUNTAIN ARTS COUNCIL PO BOX 781 MORTON, WA 98356	42-1571555	501(C)(3)	12,500.	0.			GENERAL SUPPORT
FOREST FOR THE TREES, INC. 2220 E UNION ST, #228 SEATTLE, WA 98122	47-4056319	501(C)(3)	12,500.	0.			GENERAL SUPPORT

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FREE2LUV 4701 SW ADMIRAL WAY SUITE 378 SEATTLE, WA 98116	45-4158223	501(C)(3)	12,500.	0.			GENERAL SUPPORT
FREEHOLD THEATRE LAB/STUDIO PO BOX 14183 SEATTLE, WA 98114	91-1707113	501(C)(3)	12,500.	0.			GENERAL SUPPORT
FRIENDS OF GLADISH 115 NW STATE ST PULLMAN, WA 99163	91-1714482	501(C)(3)	12,500.	0.			GENERAL SUPPORT
GEORGETOWN STEAM PLANT COMMUNITY DEVELOPMENT AUTHORITY - 6555 5TH AVE S - SEATTLE, WA 98108	84-4207491	501(C)(3)	12,500.	0.			GENERAL SUPPORT
GRAND ILLUSION CINEMA 4730 UNIVERSITY WAY NE #1330 SEATTLE, WA 98105	13-4273973	501(C)(3)	12,500.	0.			GENERAL SUPPORT
HAIDA ROOTS PO BOX 78075 SEATTLE, WA 98178	84-2997493	501(C)(3)	12,500.	0.			GENERAL SUPPORT
HEDGEBROOK PO BOX 1231 FREELAND, WA 98249	80-0012629	501(C)(3)	12,500.	0.			GENERAL SUPPORT
HIP HOP IS GREEN PO BOX 26742 FEDERAL WAY, WA 98093	83-1742878	501(C)(3)	12,500.	0.			GENERAL SUPPORT
HMONG ASSOCIATION OF WASHINGTON PO BOX 84601 SEATTLE, WA 98124	91-1259521	501(C)(3)	12,500.	0.			GENERAL SUPPORT

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HOLLOW EARTH RADIO PO BOX 21066 SEATTLE, WA 98111	26-2168801	501(C)(3)	12,500.	0.			GENERAL SUPPORT
INDIAN AMERICAN COMMUNITY SERVICES PO BOX 404 BELLEVUE, WA 98004	91-1268802	501(C)(3)	12,500.	0.			GENERAL SUPPORT
INSPIRE WASHINGTON PO BOX 806 SEATTLE, WA 98111	91-0994462	501(C)(3)	12,500.	0.			GENERAL SUPPORT
ISLAND COUNTY HISTORICAL SOCIETY PO BOX 305 COUPEVILLE, WA 98239	91-6071155	501(C)(3)	12,500.	0.			GENERAL SUPPORT
IU MIEN AMERICAN ASSOCIATION 3925 S BOZEMAN ST SEATTLE, WA 98118	26-0881681	501(C)(3)	12,500.	0.			GENERAL SUPPORT
JAPANESE CULTURAL & COMMUNITY CENTER OF WASHINGTON - 1414 S WELLER ST - SEATTLE, WA 98144	20-0062363	501(C)(3)	12,500.	0.			GENERAL SUPPORT
JAZZ CENTER OF BELLINGHAM PO BOX 312 BELLINGHAM, WA 98227	81-2953833	501(C)(3)	12,500.	0.			GENERAL SUPPORT
JEFFERSON COUNTY HISTORICAL SOCIETY - 540 WATER ST - PORT TOWNSEND, WA 98368	91-6013489	501(C)(3)	12,500.	0.			GENERAL SUPPORT
JOYAS MESTIZAS 408 SW 153RD ST BURIEN, WA 98166	91-1664796	501(C)(3)	12,500.	0.			GENERAL SUPPORT

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KE KUKUI FOUNDATION 8600 E MILI PLAIN BLVD, SUITE C VANCOUVER, WA 98664	20-4578663	501(C)(3)	12,500.	0.			GENERAL SUPPORT
KENT INTERNATIONAL FESTIVAL PO BOX 6434 KENT, WA 98064	83-2641455	501(C)(3)	12,500.	0.			GENERAL SUPPORT
KHAMBATTA DANCE COMPANY 5609 34TH AVE SW SEATTLE, WA 98126	13-3761279	501(C)(3)	12,500.	0.			GENERAL SUPPORT
KIDS IN CONCERT PO BOX 11623 BAINBRIDGE ISLAND, WA 98110	80-0652894	501(C)(3)	12,500.	0.			GENERAL SUPPORT
KIRKLAND ARTS CENTER 620 MARKET ST KIRKLAND, WA 98033	91-6059395	501(C)(3)	12,500.	0.			GENERAL SUPPORT
KOREAN MUSIC ASSOCIATION 12400 SE 38TH ST #52873 BELLEVUE, WA 98015	37-1550649	501(C)(3)	12,500.	0.			GENERAL SUPPORT
LAKE STEVENS ARTS AND PARKS FOUNDATION - PO BOX 1441 - LAKE STEVENS, WA 98258	30-0345225	501(C)(3)	12,500.	0.			GENERAL SUPPORT
LIVE MUSIC PROJECT 140 LAKESIDE AVE SUITE A #20 SEATTLE, WA 98122	81-2029807	501(C)(3)	12,500.	0.			GENERAL SUPPORT
LIVING WITH CONVICTION PO BOX 17392 SEATTLE, WA 98107	92-0979547	501(C)(3)	12,500.	0.			GENERAL SUPPORT

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MASTERWORKS CHORAL ENSEMBLE PO BOX 1091 OLYMPIA, WA 98507	91-1240717	501(C)(3)	12,500.	0.			GENERAL SUPPORT
MAX HIGBEE CENTER 1400 N STATE ST #101 BELLINGHAM, WA 98225	91-1275451	501(C)(3)	12,500.	0.			GENERAL SUPPORT
METHOW ARTS ALLIANCE PO BOX 723 TWISP, WA 98856	91-1207629	501(C)(3)	12,500.	0.			GENERAL SUPPORT
METHOW VALLEY INTERPRETIVE CENTER PO BOX 771 TWISP, WA 98856	91-1626127	501(C)(3)	12,500.	0.			GENERAL SUPPORT
METROPOLITAN PERFORMING ARTS 6403 E MILL PLAIN BLVD VANCOUVER, WA 98661	27-0769037	501(C)(3)	12,500.	0.			GENERAL SUPPORT
MI CENTRO 1208 SOUTH 10TH ST TACOMA, WA 98405	91-1488193	501(C)(3)	12,500.	0.			GENERAL SUPPORT
MUSICFEST NORTHWEST 1305 N NAPA ST SPOKANE, WA 99203	91-6033096	501(C)(3)	12,500.	0.			GENERAL SUPPORT
NATIONAL FILM FESTIVAL FOR TALENTED YOUTH - 24 ROY ST #195 - SEATTLE, WA 98109	20-8536377	501(C)(3)	12,500.	0.			GENERAL SUPPORT
NEW OLD TIME CHAUTAUQUA PO BOX 70173 SEATTLE, WA 98127	91-1478816	501(C)(3)	12,500.	0.			GENERAL SUPPORT

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NORTHWEST CHAMBER CHORUS PO BOX 45312 SEATTLE, WA 98145	51-0186273	501(C)(3)	12,500.	0.			GENERAL SUPPORT
NORTHWEST COMMUNITY CENTER (NWCC) PO BOX 39021 LAKEWOOD, WA 98496	91-2025901	501(C)(3)	12,500.	0.			GENERAL SUPPORT
NORTHWEST NATIVE AMERICAN BASKETWEAVERS ASSOCIATION - 29265 218TH PL SE - BLACK DIAMOND, WA 98010	91-1750718	501(C)(3)	12,500.	0.			GENERAL SUPPORT
NOT AN ALTERNATIVE PO BOX 2482 VASHON, WA 98070	20-4018630	501(C)(3)	12,500.	0.			GENERAL SUPPORT
NUMERICA PERFORMING ARTS CENTER 123 WENATCHEE AVE WENATCHEE, WA 98801	91-1185129	501(C)(3)	12,500.	0.			GENERAL SUPPORT
OLYMPIA LAMPLIGHTERS PO BOX 11321 OLYMPIA, WA 98507	85-3857419	501(C)(3)	12,500.	0.			GENERAL SUPPORT
OLYMPIA MUSICAL THEATRE 1009 6TH AVE SW OLYMPIA, WA 98502	46-4277293	501(C)(3)	12,500.	0.			GENERAL SUPPORT
OLYMPIC STRINGS PO BOX 2995 PORT ANGELES, WA 98362	85-3466093	501(C)(3)	12,500.	0.			GENERAL SUPPORT
ORQUESTA NORTHWEST 2839 NW 73RD ST SEATTLE, WA 98117	83-3348856	501(C)(3)	12,500.	0.			GENERAL SUPPORT

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OTHERWORLD CHILDREN'S MEDIA PO BOX 566 FREELAND, WA 98249	91-1144123	501(C)(3)	12,500.	0.			GENERAL SUPPORT
PARC FOUNDATION OF THURSTON COUNTY 120 STATE AVE NE #1463 OLYMPIA, WA 98501	91-1928020	501(C)(3)	12,500.	0.			GENERAL SUPPORT
PEYVAND 10034 NE 139TH ST KIRKLAND, WA 98034	83-3242149	501(C)(3)	12,500.	0.			GENERAL SUPPORT
PIERCE COUNTY LIBRARY FOUNDATION 3005 112TH ST E TACOMA, WA 98446	51-0180293	501(C)(3)	12,500.	0.			GENERAL SUPPORT
PORT ANGELES FINE ARTS CENTER 1203 E LAURIDSEN BLVD PORT ANGELES, WA 98362	94-3029546	501(C)(3)	12,500.	0.			GENERAL SUPPORT
PORT GAMBLE S'KLALLAM TRIBE 31912 LITTLE BOSTON RD NE KINGSTON, WA 98346	91-0875163	PORT GAMBLE S'KL	12,500.	0.			GENERAL SUPPORT
POWER HOUSE THEATRE WALLA WALLA 111 N 6TH AVE WALLA WALLA, WA 99362	32-0498056	501(C)(3)	12,500.	0.			GENERAL SUPPORT
PUGET SOUND REVELS 917 PACIFIC AVE TACOMA, WA 98402	91-1570242	501(C)(3)	12,500.	0.			GENERAL SUPPORT
RED CURTAIN FOUNDATION FOR THE ARTS - 9315 STATE AVE, SUITE J - MARYSVILLE, WA 98270	27-0316697	501(C)(3)	12,500.	0.			GENERAL SUPPORT

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REDMOND ACADEMY OF THEATRE ARTS 18001 NE 76TH ST #100 REDMOND, WA 98052	46-1623407	501(C)(3)	12,500.	0.			GENERAL SUPPORT
REFUGEE ARTISAN INITIATIVE PO BOX 25813 SEATTLE, WA 98165	82-0961407	501(C)(3)	12,500.	0.			GENERAL SUPPORT
REUSE WORKS DBA RAGFINERY PO BOX 262 BELLINGHAM, WA 98227	20-0899220	501(C)(3)	12,500.	0.			GENERAL SUPPORT
ROXY BREMERTON 270 4TH ST BREMERTON, WA 98337	81-0977391	501(C)(3)	12,500.	0.			GENERAL SUPPORT
SALAAM CULTUAL MUSEUM 3806 WHITMAN AVE N SEATTLE, WA 98103	91-1481782	501(C)(3)	12,500.	0.			GENERAL SUPPORT
SARATOGA ORCHESTRA OF WHIDBEY ISLAND - PO BOX 1524 - LANGLEY, WA 98260	26-1984716	501(C)(3)	12,500.	0.			GENERAL SUPPORT
SAWHORSE REVOLUTION 801 2ND AVE, SUITE 501 SEATTLE, WA 98104	45-3131515	501(C)(3)	12,500.	0.			GENERAL SUPPORT
SEATTLE CENTER FOUNDATION 305 HARRISON ST SEATTLE, WA 98109	91-1003385	501(C)(3)	12,500.	0.			GENERAL SUPPORT
SEATTLE CHERRY BLOSSOM AND JAPANESE CULTURAL FESTIVAL - PO BOX 9311 - SEATTLE, WA 98109	91-1182937	501(C)(3)	12,500.	0.			GENERAL SUPPORT

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SEATTLE CHILDREN'S MUSEUM 305 HARRISON ST SEATTLE, WA 98109	91-1112778	501(C)(3)	12,500.	0.			GENERAL SUPPORT
SEATTLE CLASSIC GUITAR SOCIETY PO BOX 30167 SEATTLE, WA 98113	23-7282893	501(C)(3)	12,500.	0.			GENERAL SUPPORT
SEATTLE JAZZED 380 BOREN AVE N SEATTLE, WA 98109	27-1440873	501(C)(3)	12,500.	0.			GENERAL SUPPORT
SEATTLE LIVE ALOHA HAWAIIAN CULTURAL FESTIVAL - PO BOX 9841 - SEATTLE, WA 98109	83-1556927	501(C)(3)	12,500.	0.			GENERAL SUPPORT
SEATTLE MUSICIANS ACCESS TO SUSTAINABLE HEALTHCARE - PO BOX 60204 - SEATTLE, WA 98160	81-1717061	501(C)(3)	12,500.	0.			GENERAL SUPPORT
SEATTLE PRINT ARTS PO BOX 14452 409 MAYNARD AVE SEATTLE, WA 98104	91-2010683	501(C)(3)	12,500.	0.			GENERAL SUPPORT
SEQUIM CITY BAND PO BOX 1745 SEQUIM, WA 98382	91-2113961	501(C)(3)	12,500.	0.			GENERAL SUPPORT
SHORT RUN SEATTLE 5628 AIRPORT WAY S SUITE 175 SEATTLE, WA 98108	30-0806862	501(C)(3)	12,500.	0.			GENERAL SUPPORT
SOUTH END STORIES PO BOX 81211 SEATTLE, WA 98108	99-2175972	501(C)(3)	12,500.	0.			GENERAL SUPPORT

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOUTH SOUND DANCE ACCESS 5739 LITTLEROCK RD SW TUMWATER, WA 98512	92-0454392	501(C)(3)	12,500.	0.			GENERAL SUPPORT
SPEAK WITH PURPOSE 315 NW 2ND PLACE RENTON, WA 98001	85-4312183	501(C)(3)	12,500.	0.			GENERAL SUPPORT
SPOKANE CHILDREN'S THEATRE 2727 N MADELIA SPOKANE, WA 98001	23-7425807	501(C)(3)	12,500.	0.			GENERAL SUPPORT
SPOKANE WORD 19 E QUEEN AVE SUITE 300 SPOKANE, WA 99207	85-1758643	501(C)(3)	12,500.	0.			GENERAL SUPPORT
SPOTLIGHT REPERTORY NW 704 228TH AVE NE SAMMAMISH, WA 98074	82-1308484	501(C)(3)	12,500.	0.			GENERAL SUPPORT
STONE SOUP THEATRE 1414 N 42ND ST SEATTLE, WA 98103	90-0312893	501(C)(3)	12,500.	0.			GENERAL SUPPORT
TACOMA MUSIC COLLABORATIVE 2522 N PROCTOR ST #302 TACOMA, WA 98406	81-3418745	501(C)(3)	12,500.	0.			GENERAL SUPPORT
TACOMA REFUGEE CHOIR PO BOX 2321 TACOMA, WA 98401	82-2515143	501(C)(3)	12,500.	0.			GENERAL SUPPORT
TACOMA SISTER CITIES 1118 E D ST TACOMA, WA 98421	91-1563963	501(C)(3)	12,500.	0.			GENERAL SUPPORT

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEENTIX 305 HARRISON ST SEATTLE, WA 98109	81-2736337	501(C)(3)	12,500.	0.			GENERAL SUPPORT
TT IN SEATTLE PO BOX 80721 SEATTLE, WA 98108	91-2111237	501(C)(3)	12,500.	0.			GENERAL SUPPORT
THE 14/48 PROJECTS PO BOX 80325 SEATTLE, WA 98108	47-1204467	501(C)(3)	12,500.	0.			GENERAL SUPPORT
THE 234 PROJECT FOUNDATION 914 COPPER LAKE RD CEDAR PARK, WA 78613	82-3840573	501(C)(3)	12,500.	0.			GENERAL SUPPORT
THE BACKSTAGE FOUNDATION 7304 LAKEWOOD DR W SUITE 8 LAKEWOOD, WA 98499	84-3667489	501(C)(3)	12,500.	0.			GENERAL SUPPORT
THE CIRCLE 160 NW GILMAN BLVD, SUITE 326 ISSAQUAH, WA 98027	87-2582353	501(C)(3)	12,500.	0.			GENERAL SUPPORT
THE FEELS FOUNDATION 1143 MLK JR WAY MAILBOX 14 SEATTLE, WA 98122	86-1747756	501(C)(3)	12,500.	0.			GENERAL SUPPORT
THE SHATTERED GLASS PROJECT 3201 E REPUBLICAN ST ROOM 109 SEATTLE, WA 98112	83-4303095	501(C)(3)	12,500.	0.			GENERAL SUPPORT
THE SOUND OF THE NORTHWEST PO BOX 28921 SEATTLE, WA 98118	85-0998701	501(C)(3)	12,500.	0.			GENERAL SUPPORT

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THEATRE33 243 169TH AVE NE BELLEVUE, WA 98008	46-4280740	501(C)(3)	12,500.	0.			GENERAL SUPPORT
THURSTON COMMUNITY MEDIA 440 YAUGER WAY SW OLYMPIA, WA 98502	91-1269977	501(C)(3)	12,500.	0.			GENERAL SUPPORT
UTTORON 2008 216TH PL NE SAMMAMISH, WA 98074	51-0455339	501(C)(3)	12,500.	0.			GENERAL SUPPORT
VANCOUVER BALLET FOLKLORICO 12400 SE 11TH ST VANCOUVER, WA 98683	87-4094024	501(C)(3)	12,500.	0.			GENERAL SUPPORT
VCBYNUM ARTS & EDUCATION 14600 SE 8TH ST BELLEVUE, WA 98007	86-2981609	501(C)(3)	12,500.	0.			GENERAL SUPPORT
VIETNAMESE CULTURAL CENTER 2236 SW ORCHARD ST SEATTLE, WA 98106	20-0163740	501(C)(3)	12,500.	0.			GENERAL SUPPORT
VOICES OF PACIFIC ISLAND NATIONS PO BOX 878 KINGSTON, WA 98346	47-2497194	501(C)(3)	12,500.	0.			GENERAL SUPPORT
WASAT PO BOX 21961 SEATTLE, WA 98111	46-4322594	501(C)(3)	12,500.	0.			GENERAL SUPPORT
WAYZGOOSE KITSAP 602 PACIFIC AVE SUITE 1317 BREMERTON, WA 98337	82-4144657	501(C)(3)	12,500.	0.			GENERAL SUPPORT

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WELLSPRING ENSEMBLE 17208 3RD AVE SE, #A BOTHELL, WA 98012	83-0648877	501(C)(3)	12,500.	0.			GENERAL SUPPORT
WENATCHEE HIGH SCHOOL BAND BOOSTERS - PO BOX 1072 - WENATCHEE, WA 98807	91-2064348	501(C)(3)	12,500.	0.			GENERAL SUPPORT
WENATCHEE YOUTH CIRCUS PO BOX 1733 WENATCHEE, WA 98807	91-0746392	501(C)(3)	12,500.	0.			GENERAL SUPPORT
WHATCOM CHORALE PO BOX 2074 BELLINGHAM, WA 98227	91-1386685	501(C)(3)	12,500.	0.			GENERAL SUPPORT
WOODINVILLE REPERTORY THEATRE PO BOX 2003 WOODINVILLE, WA 98072	31-1597424	501(C)(3)	12,500.	0.			GENERAL SUPPORT
THE CENTRAL DISTRICT FORUM FOR ARTS AND IDEAS - 104 17TH AVE S - SEATTLE, WA 98144	91-1954917	501(C)(3)	11,330.	0.			GENERAL SUPPORT
SEATTLE PUBLIC THEATER 7312 WEST GREEN LAKE DRIVE NORTH SEATTLE, WA 98103	91-1398805	501(C)(3)	10,450.	0.			GENERAL SUPPORT
AUBURN SYMPHONY ORCHESTRA PO BOX 2186 AUBURN, WA 98071	91-1719873	501(C)(3)	10,420.	0.			GENERAL SUPPORT
TACOMA OPERA 2661 N PEARL ST SUITE 416 TACOMA, WA 98407	91-1237511	501(C)(3)	10,390.	0.			GENERAL SUPPORT

Part II **Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments** (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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VASHON CENTER FOR THE ARTS PO BOX 576 VASHON, WA 98070	51-0183051	501(C)(3)	9,750.	0.			GENERAL SUPPORT
KIRKLAND PERFORMANCE CENTER 350 KIRKLAND AVE KIRKLAND, WA 98033	94-3129859	501(C)(3)	9,713.	0.			GENERAL SUPPORT
NORTHWEST SINFONIETTA PO BOX 1154 TACOMA, WA 98401	91-1590964	501(C)(3)	8,420.	0.			GENERAL SUPPORT
EARLY MUSIC SEATTLE PO BOX 25893 SEATTLE, WA 98165	91-0999643	501(C)(3)	7,860.	0.			GENERAL SUPPORT
THE NORTHWEST SCHOOL 1415 SUMMIT AVE SEATTLE, WA 98122	91-1061146	501(C)(3)	5,934.	0.			GENERAL SUPPORT

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

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

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

THE MAJORITY OF THE GRANTS ARE FOR GENERAL OPERATING USE AND, AS SUCH, DO NOT REQUIRE REPORTS BE GIVEN TO ARTSFUND. SOME GRANTS ARE FOR SPECIFIC PROJECTS (DIVERSITY OR YOUTH ACCESS OPPORTUNITIES) AND ARE REPORTED ON AS REQUIRED BY THE DONOR. ARTSFUND'S GRANT-MAKING PROCESS IS CONDUCTED BY THE ALLOCATION COMMITTEE, COMPRISED OF CORPORATE AND PRIVATE GRANT-MAKING EXPERTS. BASED ON GRANT APPLICATIONS AND INTERVIEWS, THEY SYSTEMATICALLY RATE EACH ART ORGANIZATION AGAINST THE SAME KEY EVALUATION POINTS.

SCHEDULE J (Form 990)

(Rev. December 2024)

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

ARTSFUND

Employer identification number

91-0839644

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	☐ First-class or charter travel	☐ Housing allowance or residence for personal use		
	☐ Travel for companions	☐ Payments for business use of personal residence		
	☐ Tax indemnification and gross-up payments	☐ Health or social club dues or initiation fees		
	☐ Discretionary spending account	☐ Personal services (such as 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	**1b**		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	**2**		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	☒ Compensation committee	☐ Written employment contract		
	☐ Independent compensation consultant	☒ Compensation survey or study		
	☐ Form 990 of other organizations	☒ Approval by the board or compensation committee		
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
a	Receive a severance payment or change-of-control payment?	**4a**		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	**4b**		X
c	Participate in or receive payment from an equity-based compensation arrangement?	**4c**		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), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
a	The organization?	**5a**		X
b	Any related organization?	**5b**		X
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
a	The organization?	**6a**		X
b	Any related organization?	**6b**		X
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III	**7**		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	**8**		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	**9**		

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

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

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

(A) Name and Title		**(B)** Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			**(C)** Retirement and other deferred compensation	**(D)** Nontaxable benefits	**(E)** Total of columns (B)(i)-(D)	**(F)** Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	**(ii)** Bonus & incentive compensation	**(iii)** Other reportable compensation				
(1) MICHAEL R. GREER	(i)	261,286.	85,336.	0.	13,169.	12,909.	372,700.	0.
PRESIDENT/CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) KEITH G. EASTER	(i)	132,675.	0.	0.	5,320.	20,947.	158,942.	0.
DIRECTOR OF FINANCE	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 3:
THE ARTSFUND USES THE FOLLOWING METHODS TO DETERMINE THE COMPENSATION THAT
IT PAYS TO MICHAEL GREER:
THE BOARD OF TRUSTEES' EXECUTIVE COMMITTEE AND FINANCE COMMITTEE REVIEWS
THE PERFORMANCE TO DETERMINE THE PRESIDENT/CEO TOTAL COMPENSATION PACKAGE.
THE BOARD VOTES ON THE RECOMMENDED COMPENSATION PACKAGE AND APPROVES
MEASURABLE GOALS AND OBJECTIVES FOR THE PRESIDENT/CEO. THIS PROCESS WAS
LAST COMPLETED OCTOBER 2024.

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, line 29 or 30.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2024

Open to Public Inspection

Name of the organization

ARTSFUND

Employer identification number

91-0839644

Part I Types of Property

		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
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	7	1,849,548.	FMV
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 (KRAKEN TICKETS)	X	1	1,725.	FMV
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 V, Donee Acknowledgement **29** 0

			Yes	No
30a	During the year, did the organization receive by contribution any property reported on Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?	30a		X
b	If "Yes," describe the arrangement in Part II.			
31	Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	31		X
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		X
b	If "Yes," describe in Part II.			
33	If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.			

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B):

NUMBER OF CONTRIBUTIONS

SCHEDULE O (Form 990)
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
ARTSFUND

Employer identification number
91-0839644

FORM 990, PART VI, SECTION A, LINE 7A:
TRUSTEES SHALL BE APPOINTED, AND THE NUMBER OF TRUSTEES DETERMINED, BY THE BOARD OF TRUSTEES OF ARTSFUND, OR BY ANY COMMITTEE THEREFORE AS DESIGNATED BY THE BOARD OF TRUSTEES OF ARTSFUND.

FORM 990, PART VI, SECTION B, LINE 11B:
THE FULL FORM 990 IS REVIEWED BY THE DIRECTOR OF FINANCE AND PRESIDENT/CEO. THE RETURN IS ALSO REVIEWED BY THE EXECUTIVE COMMITTEE AND VOTED TO APPROVE OR DISAPPROVE BY THE FULL BOARD PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C:
UPON OR BEFORE ELECTIONS, HIRING, OR APPOINTMENT, THE INDIVIDUAL WILL MAKE A FULL, WRITTEN DISCLOSURE OF INTERESTS, RELATIONSHIPS, AND HOLDINGS THAT COULD POTENTIALLY RESULT IN A CONFLICT OF INTEREST. THIS WRITTEN DISCLOSURE WILL BE KEPT ON FILE, AND THE INDIVIDUAL WILL UPDATE IT AS APPROPRIATE. IN THE COURSE OF MEETINGS OR ACTIVITIES, THE INDIVIDUAL WILL DISCLOSE ANY INTEREST IN A TRANSACTION OR DECISION WHERE THE INDIVIDUAL, FAMILY, OR SIGNIFICANT OTHER, EMPLOYER, OR CLOSE ASSOCIATES WILL RECEIVE A BENEFIT OR GAIN. AFTER DISCLOSURE, THE INDIVIDUAL WILL BE ASKED TO LEAVE THE ROOM FOR THE DISCUSSION AND WILL NOT BE PERMITTED TO VOTE ON THE QUESTION. BOTH THE INDIVIDUAL DISCLOSURE OF THE INTEREST AND ABSENCE FROM THE DISCUSSION WILL BE RECORDED IN THE MINUTES OF THE MEETING. ARTSFUND MONITORS RELATIONSHIPS REGARDING POSSIBLE CONFLICTS OF INTEREST.

FORM 990, PART VI, SECTION B, LINE 15:
THE EXECUTIVE COMMITTEE DETERMINED AND APPROVED OFFICER WAGES IN ACCORDANCE WITH THE COMPENSATION POLICY. THE PRESIDENT/CEO AND DIRECTOR OF OPERATIONS AND HUMAN RESOURCES COMPARE OFFICERS AND KEY EMPLOYEE WAGES TO THE UNITED WAY KING COUNTY, AND 501 COMMONS WAGE SURVEYS, AND OTHER EMPLOYEE COMPENSATION SURVEY REPORTS.

FORM 990, PART VI, SECTION C, LINE 19:
GOVERNING DOCUMENTS AND CONFLICT OF INTEREST STATEMENTS ARE AVAILABLE UPON REQUEST. AUDITED FINANCIAL STATEMENTS ARE AVAILABLE ON ARTSFUND'S WEBSITE FOR BOARD MEMBERS AND UPON REQUEST.

SCHEDULE R (Form 990)
(Rev. January 2025)
Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
ARTSFUND

Employer identification number
91-0839644

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II **Identification of Related Tax-Exempt Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	(g) No
THE ARTSFUND FOUNDATION - 91-1866831 100 W HARRISON ST, SUITE S-150 SEATTLE, WA 98119	TO SUPPORT ARTSFUND	WASHINGTON	501(C)(3)	LINE 12, TYPE I	ARTSFUND	X	

For Paperwork Reduction Act Notice, see the Instructions for Form 990. **Schedule R (Form 990) (Rev. 1-2025)**

LHA 432161 10-23-24

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity? Yes	(i) No

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

		Yes	No
Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.			
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity	1a		X
b Gift, grant, or capital contribution to related organization(s)	1b		X
c Gift, grant, or capital contribution from related organization(s)	1c	X	
d Loans or loan guarantees to or for related organization(s)	1d		X
e Loans or loan guarantees by related organization(s)	1e		X
f Dividends from related organization(s)	1f		X
g Sale of assets to related organization(s)	1g		X
h Purchase of assets from related organization(s)	1h		X
i Exchange of assets with related organization(s)	1i		X
j Lease of facilities, equipment, or other assets to related organization(s)	1j		X
k Lease of facilities, equipment, or other assets from related organization(s)	1k		X
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	X	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	X	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		X
o Sharing of paid employees with related organization(s)	1o		X
p Reimbursement paid to related organization(s) for expenses	1p		X
q Reimbursement paid by related organization(s) for expenses	1q	X	
r Other transfer of cash or property to related organization(s)	1r		X
s Other transfer of cash or property from related organization(s)	1s		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)	ARTSFUND FOUNDATION	C	1,666,633.	CASH
(2)				
(3)				
(4)				
(5)				
(6)				

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners sec. 501(c)(3) orgs.? Yes	(e) No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) NO	(k) Percentage ownership

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

Form **8868**
(Rev. January 2025)

Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

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

OMB No. 1545-0047

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

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Part I - Identification

Type or Print

File by the due date for filing your return. See instructions.

Name of exempt organization, employer, or other filer, see instructions.	Taxpayer identification number (TIN)
ARTSFUND	91-0839644

Number, street, and room or suite no. If a P.O. box, see instructions.
P.O. BOX 19780

City, town or post office, state, and ZIP code. For a foreign address, see instructions.
SEATTLE, WA 98109-6780

Enter the Return Code for the return that this application is for (file a separate application for each return) 01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 4720 (other than individual)	09
Form 4720 (individual)	03	Form 5227	10
Form 990-PF	04	Form 6069	11
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 8870	12
Form 990-T (trust other than above)	06	Form 5330 (individual)	13
Form 990-T (corporation)	07	Form 5330 (other than individual)	14
Form 1041-A	08	Form 990-T (governmental entities)	15

- After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330.
- If this application is for an extension of time to file Form 5330, you must enter the following information.

Plan Name _____
Plan Number _____
Plan Year Ending (MM/DD/YYYY)

Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions)

The books are in the care of KEITH G EASTER
100 W HARRISON S, SUITE S-150 - SEATTLE, WA 98119

Telephone No. 206-788-3044 Fax No. _____

- If the organization does not have an office or place of business in the United States, check this box ..... ☐
- If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ..... ☐. If it is for part of the group, check this box ... ☐ and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until AUGUST 15, 20 26, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

☐ calendar year 20 _____ or
☒ tax year beginning OCT 1, 20 24, and ending SEP 30, 20 25

2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3a	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	**3a**	$	0.
b	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	**3b**	$	0.
c	**Balance due.** Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	**3c**	$	0.

For Privacy Act and Paperwork Reduction Act Notice, see instructions. Form **8868** (Rev. 1-2025)

LHA 423841 01-02-25