# **Return of Organization Exempt From Income Tax**

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

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

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

A F	For the	e 2020 calendar year, or tax year beginning and	ending	_	
	Check if applicabl	C Name of organization		D Employer identific	cation number
	Addre	e   GREATER COLUMBUS ARTS COUNCIL			
	Name chang	Doing business as		31-08333	84
	□ Initial □ return □ Fiṇal	182 FACT LONG CT	Room/suite	E Telephone number 614-224-	
	⊥return. termin ated			G Gross receipts \$	13,729,635.
	Amen	, , , , , , , , , , , , , , , , , , ,		H(a) Is this a group re	
	Application	F Name and address of principal officer: KAYLA GREEN		for subordinates	
	pendi	182 EAST LONG ST, COLUMBUS, OH 43215		<b>H(b)</b> Are all subordinates in	ncluded? Yes No
		empt status: X 501(c)(3) 501(c) ( ) ( insert no.) 4947(a)(1) c	or 527	If "No," attach a	list. See instructions
		te: > WWW.GCAC.ORG		H(c) Group exemptio	
		organization: X Corporation	<b>L</b> Year	of formation: 1973 N	M State of legal domicile: OH
Pa		Summary			
Governance	1	Briefly describe the organization's mission or most significant activities: ${\tt TO}$ SUAND CULTURAL FABRIC OF COLUMBUS.	JPPORT	AND ADVANCE	E THE ARTS
rnai	2	Check this box  if the organization discontinued its operations or dispos	sed of more	than 25% of its net ass	sets.
ove.	3	Number of voting members of the governing body (Part VI, line 1a)		3	25
		Number of independent voting members of the governing body (Part VI, line 1b)			25
es &	5	Total number of individuals employed in calendar year 2020 (Part V, line 2a)			15
ĬĘį	6	Total number of volunteers (estimate if necessary)			35
Activities &	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	······		0.
			<u> </u>	Prior Year	Current Year
e	8	Contributions and grants (Part VIII, line 1h)		10,811,662.	11,313,891. 382,896.
Revenue	9	Program service revenue (Part VIII, line 2g)		94,510.	44,393.
Вè	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		57,373.	13,585.
	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		12,341,825.	11,754,765.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)  Grants and similar amounts paid (Part IX, column (A), lines 1-3)		7,448,620.	8,582,311.
	1	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
"	45	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,479,398.	1,641,020.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
ber	b	Total fundraising expenses (Part IX, column (D), line 25)			
й	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,875,158.	1,252,307.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		10,803,176.	11,475,638.
	19	Revenue less expenses. Subtract line 18 from line 12		1,538,649.	279,127.
Net Assets or			Ве	ginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)		7,097,829.	7,831,648.
A As	21	Total liabilities (Part X, line 26)		1,498,489.	1,846,655.
Ž.	22	Net assets or fund balances. Subtract line 21 from line 20		5,599,340.	5,984,993.
	art II		and stateme	unto and to the heat of my	Linguilades and balish it is
		lties of perjury, I declare that I have examined this return, including accompanying schedules t, and complete. Declaration of preparer (other than officer) is based on all information of wh			kilowieuge aliu bellei, it is
uue	, correc	is, and complete. Declaration of preparer (other than officer) is based on an information of wil	licii preparei	lias any knowledge.	
Sia	n	Signature of officer		Date	
Sig Her		KAYLA GREEN, DIR. OF FINANCE & ADMINIS	<b>ТРАТТ</b>		
1101	C	Type or print name and title		/11	
		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Paid	i	ALYSS K. CARPENTER, CPA, ALYSS K. CARPENT	rer, 0	3/19/21 if self-employ	P01203359
	parer	Firm's name REA & ASSOCIATES, INC.	· I		34-1310124
-	Only	Firm's address 5775 PERIMETER DRIVE - STE 200			
		DUBLIN, OH 43017-3224		Phone no. 61	4-889-8725
May	the II	RS discuss this return with the preparer shown above? See instructions			X Yes No

Check If Schedule Coordians a response or note to any line in this Part III      Stelly tescribe the organization simulation     MISSION: TO SUPPORT AND ADVANCE THE ARTS AND CULTURAL FABRIC OF COLUMBUS.     VISION: A THRIVING COLUMBUS WHERE THE ARTS MATTER TO ALL OF US.	Form	1 990 (2020) GREATER COLUMBUS ARTS COUNCIL	31-0833384 Page <b>2</b>
Hereiny dissorible the organization's mission:  MISSION: TO SUPPORT AND ADVANCE THE ARTS AND CULTURAL FABRIC OF COLUMBUS.  VISION: A THRIVING COLUMBUS WHERE THE ARTS MATTER TO ALL OF US.  2 Did the organization undertake any significant program services during the year which were not listed on the prior form 1800 or 800 E2?  If "Yes," describe these new services on Schedule 0.  3 Did the organization cease conducting, or make againicant changes in how it conducts, any program services (™ Yes, "Secribe these changes on Schedule 0.  4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 901(s)(3) and 916(s)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if my for each program service separated.  4a (locks	Pa	rt III Statement of Program Service Accomplishments	
MISSION: TO SUPPORT AND ADVANCE THE ARTS AND CULTURAL FABRIC OF COLUMBUS.  VISION: A THRIVING COLUMBUS WHERE THE ARTS MATTER TO ALL OF US.  2 Did the organization undertake any significant program services during the year which were not listed on the prior form \$80 or \$80 E2?  If Yes, 'General these new services on Schedule O.  3 Did the organization cases conducting, or make significant changes in how it conducts, any program services?			X
USION: A THRIVING COLUMBUS WHERE THE ARTS MATTER TO ALL OF US.  2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 980 or 990 E2?    Vive   No   1º Yes   Cacherobe those new services on Schedule O.	1	MISSION: TO SUPPORT AND ADVANCE THE ARTS AND CULTURAL FA	BRIC OF
2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  If "Yes," describe these new services on Schedule 0.  3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?    Yes   X  No			OF IIS
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	40	0 645 600	<u> </u>
Form <b>990</b> (2020)	46	Total program service expenses	Form <b>990</b> (2020)

# Form 990 (2020) GREATER COLUMBUS ARTS COUNCIL 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?	2	Х	
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		Х
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	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
Ū	similar amounts as defined in Revenue Procedure 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	Ť		<del></del>
Ü	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,			
′		7		x
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II			
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			<sub>V</sub>
_	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?		37	
	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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
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
С	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		Х
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
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	<u> </u>		
ızu	•	12a	Х	
h	Schedule D, Parts XI and XII  Was the organization included in consolidated, independent audited financial statements for the tax year?	124		
b	•	12b		V X
13	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional  Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
				X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<del>  ^</del>
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			
		446		x
45	or more? If "Yes," complete Schedule F, Parts I and IV  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b		
15		45		<sub>v</sub>
40	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			<b>.</b>
	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,			\ <sub>3,7</sub>
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	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	Х	<u> </u>
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		<u> </u>
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	

Form	1990 (2020) GREATER COLUMBUS ARTS COUNCIL 31-083	3384	Р	age 4
Pa	rt 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	Х	
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	Х	
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		
С	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		
25 a	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 Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	. 28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV			X
29	Did the organization receive more than \$25,000 in non-cash 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			l
	contributions? If "Yes," complete Schedule M			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			l
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			l
	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	- 1		X
	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		-
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 in Schedule O for Part VI, lines 11b and 19?			
De	Note: All Form 990 filers are required to complete Schedule 0	. 38	X	
Pal	rt 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	<u></u>	 T	
		2	Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	_		
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	<u>0</u>		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			

032004 12-23-20

(gambling) winnings to prize winners?

#### Part V Statements Regarding Other IRS Filings and Tax Compliance 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 Х b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Х 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? За **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)? Х 4a **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). X **5a** Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit Х any contributions that were not tax deductible as charitable contributions? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). Х 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 Х If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required X to file Form 8282? 7с d If "Yes," indicate the number of Forms 8282 filed during the year 7d Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h 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. Did the sponsoring organization make any taxable distributions under section 4966? 9a 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 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 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. Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand X Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or Х excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N. X Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16

Form 990 (2020)

If "Yes," complete Form 4720, Schedule O.

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
Sec	tion 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	25			
	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	25			
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		Х
3	Did the organization delegate control over management duties customarily performed by or under the					
			I	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 9			4		X
5	Did the organization become aware during the year of a significant diversion of the organization's ass			5		X
6	Did the organization have members or stockholders?		Γ	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	point 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, st					
	persons other than the governing body?			7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year					
а	The governing body?			8a	Х	
b	Each committee with authority to act on behalf of the governing body?			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read	ched at the				
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue 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 ch	apters, affiliates	3,			
	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 th	ie form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to conflicts?		12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	'es," describe				
	in 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 approva		nt			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
	The organization's CEO, Executive Director, or top management official			15a	X	
b	Other officers or key employees of the organization			15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangen	nent 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 evaluat		on			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ					
800	exempt status with respect to such arrangements?			16b		
	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed DH	L000 T (0	E04 ( ) (C)	. ,		
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ar	na 990-⊤ (Sectio	on 501(c)(3)s	only)	availal	ole
	for public inspection. Indicate how you made these available. Check all that apply.					
46	` ,	on Schedule O	,	-		
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co	nīlict of interest	policy, and	tinand	cial	
00	statements available to the public during the tax year.	lan ameliar in the				
20	State the name, address, and telephone number of the person who possesses the organization's book KAYLA GREEN - $614-221-8704$	ks and records	<b>-</b>			
	182 EAST LONG ST, COLUMBUS, OH 43215					

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)  Name and title	(B) Average hours per week	(do box	not c	Pos heck i	ition		one n an	(D)  Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) THOMAS KATZENMEYER	40.00	-		.,				240 011	^	20.004
PRESIDENT	40.00			Х				248,811.	0.	30,884.
(2) JAMI GOLDSTEIN	40.00	-				3,7		110 607	_	0 150
OIRECTOR OF MARKETING, COM (3) KAYLA GREEN	40.00					X		118,687.	0.	8,152.
(3) KAYLA GREEN DIRECTOR OF FINANCE & ADMI	40.00	1		х				111,449.	0.	8,152.
(4) ALISON BARRET	40.00			^				111,449.	0.	0,132.
DIRECTOR OF GRANTS & SERVICES	40.00	1				X		108,327.	0.	8,152.
(5) MICHAEL BONGIORNO	1.00							100,327	•	0,132.
CHAIR	1100	х		x				0.	0.	0.
(6) TOM SZYKOWNY	1.00									
IMMEDIATE PAST CHAIR		Х		х				0.	0.	0.
(7) DAVID TEED	1.00									
TREASURER		Х		Х				0.	0.	0.
(8) CHRISTIE ANGEL	1.00									
SECRETARY		Х		Х				0.	0.	0.
(9) BARBARA BRANDT	1.00									
TRUSTEE		Х						0.	0.	0.
(10) MARK CAIN	1.00								_	_
TRUSTEE		Х						0.	0.	0.
(11) SHANNON CRANE	1.00	l								
TRUSTEE		Х						0.	0.	0.
(12) ALEX FROMMEYER	1.00	ļ								•
TRUSTEE	1 00	Х						0.	0.	0.
(13) MICHAEL GONSIOROWSKI	1.00	3,7							_	^
TRUSTEE (14A) DAVIE HERELED	1.00	Х						0.	0.	0.
(14) DAVE HETZLER TRUSTEE	1.00	Х						0.	0.	0.
(15) CHRISTINE KULLBERG	1.00	Δ						· ·	0.	<u> </u>
TRUSTEE	1.00	Х						0.	0.	0.
(16) CATHERINE LANG-CLINE	1.00	-22				$\vdash$			<b>U•</b>	
TRUSTEE	1.00	х						0.	0.	0.
(17) CELESTE MALVAR-STEWART	1.00	_ <u>-</u> _						1		
TRUSTEE		Х						0.	0.	0.
032007 12-23-20	•					•		•		Form <b>990</b> (2020)

032007 12-23-20 Form **990** (2020)

31-0833384

Part VII Section A. Officers, Directors, Tru	stees, Key Em	ploy	ees,	and	l Hig	ghes	st C	ompensated Employee	es (continued)	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average hours per week	box	not c	ss pe	more rson i	than of than of s both or/trus	n an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	In stit utio nal trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(18) EILEEN PALEY	1.00									
TRUSTEE		Х						0.	0.	0.
(19) KIMBER PERFECT TRUSTEE	1.00	X						0.	0.	0.
(20) SHYAM RAJADHYAKSHA	1.00								-	-
TRUSTEE		Х						0.	0.	0.
(21) EMMANUEL REMY	1.00									
TRUSTEE		Х						0.	0.	0.
(22) KARLA ROTHAN TRUSTEE	1.00	Х						0.	0.	0.
(23) MATTHEW SATTERWHITE TRUSTEE	1.00	х						0.	0.	0.
(24) JON SHERMAN TRUSTEE	1.00	х						0.	0.	0.
(25) MARSHALL SHORTS TRUSTEE	1.00	х						0.	0.	0.
(26) JULIE TAGGART	1.00									
TRUSTEE		Х						0.	0.	0.
1b Subtotal							<b></b>	587,274.	0.	55,340.
c Total from continuation sheets to Part \							<b></b>	0.	0.	0.
d Total (add lines 1b and 1c)							<u> </u>	587,274.	0.	55,340.
2 Total number of individuals (including but	not limited to th	ose	liste	d at	ove	) wh	o re	ceived more than \$100	000 of reportable	

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

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

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

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
	Name and business address  PECHNOLOGY PARTNERS GAY ST, UNIT 301, COLUMBUS, OH 43215  Nescription of services  WEBSITE DEVELOPMENT AND MAINTENANCE	
11 E GAY ST, UNIT 301, COLUMBUS, OH 43215	AND MAINTENANCE	176,000.
WOSU		
2003 MILLIKIN RD, COLUMBUS, OH 43215	VIDEO PRODUCTION	142,000.

SEE PART VII, SECTION A CONTINUATION SHEETS

\$100,000 of compensation from the organization

Total number of independent contractors (including but not limited to those listed above) who received more than

Form 990 GREATER O	COLUMBUS	A	RT	'S	CO	UN	CI	L	31-083	3384
Part VII   Section A. Officers, Directors, Tru	ustees, Key En	nplo	yee	s, aı	nd H	lighe	est (	Compensated Employ	rees (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average			Pos	ition			Reportable	Reportable	Estimated
	hours	(cl	heck	all t	that	арр	ly)	compensation	compensation	amount of
	per							from	from related	other
	week					yee		the	organizations	compensation
	(list any	rector				old me		organization	(W-2/1099-MISC)	from the
	hours for	ordi	9			ated 6		(W-2/1099-MISC)		organization
	related	ustee	trust		e e	bens				and related
	organizations	ual tri	ional		ploye	tcom				organizations
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
	· · · · · · · · · · · · · · · · · · ·	드	드	0	ž	Ξ	프			
(27) YOHANNAN TERRELL	1.00									•
TRUSTEE	1 00	Х						0.	0.	0.
(28) AMY TILLINGHAST	1.00									_
TRUSTEE		Х						0.	0.	0.
(29) SARAH TOWNES	1.00									_
TRUSTEE		Х						0.	0.	0.
(30) PRISCILLA TYSON	1.00									
TRUSTEE		Х						0.	0.	0.
-										
		-								
-										
		-								
			L	L		L	L			
Total to Part VII, Section A, line 1c										
									1	

		Check if Schedule O contains a response	e or note to anv lin	e in this Part VIII			
		-	,	(A)	(B)	(C)	(D)
				Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
					function revenue	business revenue	sections 512 - 514
SS	1:	a Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts		b Membership dues 1b					
چ <u>و</u>		c Fundraising events 1c					
fts,		d Related organizations 1d					
ig,		e Government grants (contributions)	10,545,077.				
Sin		f All other contributions, gifts, grants, and					
uti Je	'	similar amounts not included above 1f	768,814.				
ĢË		g Noncash contributions included in lines 1a-1f	, , , , , , , , , , , , , , , , , , , ,				
no.	•	h Total. Add lines 1a-1f		11,313,891.			
0 10		Total. Add lines 1a-11	Business Code				
	2 8	a COLUMBUS ARTS FESTIVAL	900099	327,259.	327,259.		
je	_	b MARKETING CAMPAIGN SPONSORSHIPS	900099	50,000.	50,000.		
Ser	_	c RESCINDED GRANTS	900099	3,480.	3,480.		
m S		d FISCAL SPONSOR	900099	1,177.	1,177.		
gra Re	•	e MISCELLANEOUS PROGRAM	900099	980.	980.		
Program Service Revenue		·		300.	300.		
		f All other program service revenue g Total. Add lines 2a-2f	_	382,896.			
-	3	Investment income (including dividends, inte		002,050.			
	3	other similar amounts)		32,591.			32,591.
	4	Income from investment of tax-exempt bond		02,052.			02,002.
	5	Royalties	•				
	3	(i) Real	(ii) Personal				
	6 -		()				
		b Less: rental expenses 6b					
		c Rental income or (loss) 6c					
		d Net rental income or (loss)					
		a Gross amount from sales of (i) Securities	(ii) Other				
	, ,	assets other than inventory <b>7a</b> 1,966,905	* * * * * * * * * * * * * * * * * * * *				
	ŀ	b Less: cost or other basis					
<u>o</u>	•	and sales expenses <b>7b</b> 1,955,103					
her Revenue	,	c Gain or (loss) 7c 11,802					
Seve		d Net gain or (loss)		11,802.			11,802.
e F		a Gross income from fundraising events (not		, -			,
ğ	•	including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 18	a 23,585.				
	ŀ	l l	<b>b</b> 19,767.				
		c Net income or (loss) from fundraising events	<u> </u>	3,818.			3,818.
		a Gross income from gaming activities. See		,			
		Part IV, line 19	а				
	ŀ		b				
		c Net income or (loss) from gaming activities_	<u> </u>				
		a Gross sales of inventory, less returns					
		•	Da				
	ŀ		Ob				
		c Net income or (loss) from sales of inventory	<u> </u>				
			Business Code				
snc	11 2	a MISC. REVENUE	900099	9,767.			9,767.
nec	ŀ	b		,			,
Miscellaneous Revenue		c					
lsc Be	(	d All other revenue					
2	6	e Total. Add lines 11a-11d		9,767.			
	12	Total revenue. See instructions		11,754,765.	382,896.	0.	57,978.

# Form 990 (2020) GREATER COLUMBUS ARTS COUNCIL 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).
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Da	Check if Schedule O contains a respon	(A)	(B)	(C)	(D)
7b,	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	7,896,161.	7,896,161.		
2	Grants and other assistance to domestic	, ,	, ,		
	individuals. See Part IV, line 22	686,150.	686,150.		
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	399,296.	15,000.	384,296.	
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	892,448.	271,127.	590,063.	31,258
8	Pension plan accruals and contributions (include	,	,	,	
_	section 401(k) and 403(b) employer contributions)	136,449.	16,406.	120,043.	
9	Other employee benefits	125,224.	26,431.	98,793.	
0	Payroll taxes	87,603.	16,806.	70,797.	
1	Fees for services (nonemployees):	0.,,0001			
' a	Management				
b	Legal	14,399.	1,856.	12,543.	
c	Accounting	27,262.	2,049.	25,213.	
d	Lobbying	81,000.	33,000.	48,000.	
e	Professional fundraising services. See Part IV, line 17	01/0001	33,000.	10,0001	
f	Investment management fees	10,523.		10,523.	
	Other. (If line 11g amount exceeds 10% of line 25,	10,525.		10,525.	
g	column (A) amount, list line 11g expenses on Sch 0.)	51,308.	8,068.	43,240.	
0	Advertising and promotion	68,933.	54,300.	14,633.	
2		95,789.	9,385.	86,404.	
3	Office expenses	268,617.	202,158.	66,459.	
4	Information technology	200,017.	202,130.	00,437.	
5	Royalties	153,045.	7,266.	145,779.	
6	Occupancy	12,022.	7,234.	4,788.	
7	Travel	12,022.	7,2540	±,700•	
8	Payments of travel or entertainment expenses				
^	for any federal, state, or local public officials	30,230.	13,671.	16,559.	
9	Conferences, conventions, and meetings	30,230.	15,0/1.	10,339.	
0	Interest  Payments to affiliates				
1	Payments to affiliates	67,082.	44,447.	22,635.	
2	In a company of	30,949.	19,936.	11,013.	
3	Insurance Other expanses, Itamiza expanses not covered	30,343.	19,930.	11,013.	
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.)				
а	COMMUNITY ARTS PROGRAMS	144,832.	144,832.		
b	BROAD & HIGH CONTENT	132,000.	132,000.		
C	COLUMBUS ARTS FESTIVAL	23,130.	23,130.		
d	DUES/SUBSCRIPTIONS	21,687.	12,050.	9,637.	
	All other expenses	19,499.	2,220.	17,279.	
5	Total functional expenses. Add lines 1 through 24e	11,475,638.	9,645,683.	1,798,697.	31,258
<u>.5</u> :6	Joint costs. Complete this line only if the organization	, _, _, _, _, _, _, _, _, _, _, _, _,	2,020,000	_,,	02,230
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2020)

Part X | Balance Sheet

Par	<u>t X</u>	Balance Sheet					
		Check if Schedule O contains a response or r	note to an	line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			1,707,862.	1	3,853,053.
	2	Savings and temporary cash investments		2,957,515.	2	2,317,235.	
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			1,343,577.	4	137,140
	5	Loans and other receivables from any current	or former	officer, director,			
		trustee, key employee, creator or founder, su	ostantial c	ontributor, or 35%			
		controlled entity or family member of any of the	nese perso	ons		5	
	6	Loans and other receivables from other disqu	alified per	sons (as defined			
		under section 4958(f)(1)), and persons describ				6	
ţ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			23,268.	8	23,268
⋖	9	Prepaid expenses and deferred charges			76,741.	9	78,463
	10a	Land, buildings, and equipment: cost or other		<b></b>			
		basis. Complete Part VI of Schedule D		748,678.	404 600		0.50 4.04
	b	Less: accumulated depreciation		480,494.	134,670.		268,184
	11	Investments - publicly traded securities			823,196.	11	1,078,142
	12	Investments - other securities. See Part IV, lin				12	
	13	Investments - program-related. See Part IV, lir				13	
	14	Intangible assets			21 000	14	EC 163
	15	Other assets. See Part IV, line 11			31,000.	15	76,163
	16	Total assets. Add lines 1 through 15 (must e			7,097,829.	16	7,831,648
	17	Accounts payable and accrued expenses	164,020.	17	118,844		
	18	Grants payable		1,145,516. 173,372.	18	1,502,575	
	19	Deferred revenue			1/3,3/4.	19	213,003
	20	Tax-exempt bond liabilities				20	
	21 22	Escrow or custodial account liability. Comple				21	
Liabilities	22	Loans and other payables to any current or for					
≣		trustee, key employee, creator or founder, sul				22	
Lia	23	controlled entity or family member of any of these persons  Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrela				24	
	25	Other liabilities (including federal income tax,	-				
	20	·	-				
		parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D			15,581.	25	11,433.
	26	Total liabilities. Add lines 17 through 25			1,498,489.	26	1,846,655
		Organizations that follow FASB ASC 958, or			,		
es		and complete lines 27, 28, 32, and 33.		,			
Net Assets or Fund Balances	27	Net assets without donor restrictions			3,761,276.	27	3,879,043.
Bal	28	Net assets with donor restrictions			1,838,064.	28	2,105,950.
미		Organizations that do not follow FASB ASC					
ᆲ		and complete lines 29 through 33.					
ρ̈́	29	Capital stock or trust principal, or current fun-	ds			29	
set	30	Paid-in or capital surplus, or land, building, or				30	
As	31	Retained earnings, endowment, accumulated				31	
₽ 	32	Total net assets or fund balances			5,599,340.	32	5,984,993.
	33	Total liabilities and net assets/fund balances			7,097,829.	33	7,831,648.

Pa	rt 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			4,7	
2	Total expenses (must equal Part IX, column (A), line 25)	2	11		5,6	
3	Revenue less expenses. Subtract line 2 from line 1	3			9,1	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	5	, 59	9,3	40.
5	Net unrealized gains (losses) on investments	5		3	5,1	48.
6	Donated services and use of facilities	6		7	1,3	<u>78.</u>
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	5	, 98	4,9	93.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					X
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Э.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	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					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	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:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho	edule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit	t			
	Act and OMB Circular A-133?			За		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		
				Form	990	(2020)

032012 12-23-20

#### SCHEDULE A

(Form 990 or 990-EZ)

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

Open to Public Inspection

Name of the organization **Employer identification number** GREATER COLUMBUS ARTS COUNCIL 31-0833384 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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: 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). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 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. 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. 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. 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. 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. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed in your governing document? (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

# 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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	7081678.	7292729.	7411674.	10811562.	11055061.	43652704.
2	Tax revenues levied for the organ-						
	ization'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	7081678.	7292729.	7411674.	10811562.	11055061.	43652704.
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)						
	Public support. Subtract line 5 from line 4.						43652704.
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7	Amounts from line 4	7081678.	7292729.	7411674.	<u> 10811562.</u>	<u> 11055061.</u>	43652704.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	14,701.	34,480.	56,787.	63,833.	32,591.	202,392.
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	<b>Total support.</b> Add lines 7 through 10						43855096.
12	Gross receipts from related activities,	•	,				5,216,031.
13	First 5 years. If the Form 990 is for the	-			•		
	organization, check this box and stop	here					<b>&gt;</b>
	ction C. Computation of Publi						00 54
14	Public support percentage for 2020 (li					14	99.54 %
15	Public support percentage from 2019					15	99.54 %
16a	33 1/3% support test - 2020. If the o	· ·		•		•	
	stop here. The organization qualifies		-				
b	33 1/3% support test - 2019. If the c						
	and <b>stop here.</b> The organization qual						
17a	10% -facts-and-circumstances test						
	and if the organization meets the facts				•	VI how the organi	zation
	meets the facts-and-circumstances te	-		*	-		
b	10% -facts-and-circumstances test	-					10% or
	more, and if the organization meets the				-		<b>.</b> —
	organization meets the facts-and-circu						<b>₽</b> ;
18	Private foundation. If the organization	n did not check a	box on line 13, 16a	i, 16b, 1/a, or 17b	o, check this box a	na see instruction	s

Schedule A (Form 990 or 990-EZ) 2020

# 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.)

Se	ction A. Public Support	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
Cale	ndar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization'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						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	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						
(	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6						
	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties,						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
(	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	01(c)(3) organization	on,
	check this box and stop here						<b>&gt;</b>
Se	ction C. Computation of Publi	c Support Per	centage				
15	Public support percentage for 2020 (I	ine 8, column (f), d	livided by line 13, o	column (f))		15	%
	Public support percentage from 2019					16	%
	ction D. Computation of Inves					1 1	
17	Investment income percentage for 20					17	%
18	Investment income percentage from					18	%
198	33 1/3% support tests - 2020. If the	organization did r	not check the box	on line 14, and line	e 15 is more than 3	3 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box ar	nd <b>stop here.</b> The	organization quali	fies as a publicly s	supported organiza	tion	▶□
k	33 1/3% support tests - 2019. If the	organization did r	not check a box on	line 14 or line 19a	a, and line 16 is mo	ore than 33 1/3%, a	and
	line 18 is not more than 33 1/3%, che	ck this box and st	t <b>op here.</b> The orga	nization qualifies a	as a publicly suppo	orted organization	▶∐
20	Private foundation. If the organization	n did not check a	box on line 14, 19a	a, or 19b, check th	nis box and see ins	tructions	

# Part IV | Supporting Organizations

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

### Section A. All Supporting Organizations

- 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.
- 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).
- **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.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **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.
- **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.
- 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.
- 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).
- **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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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.
- 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 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
4		
1		
2		
3a		
3b		
3с		
_		
4a		
4b		
4-		
4c		
5a		
Eh		
5b 5c		
6		
6		
7		
8		
9a		
9b		
0		
9c		
10a		
10b		

Pai	rt IV   Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described in line 11a above?	11b		
С	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion 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		
Sec	tion 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		100	110
•	or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control			
	, , , , , , , , , , , , , , , , , , ,			
	or management of the supporting organization was vested in the same persons that controlled or managed	1		
Sec	the supported organization(s). tion D. All Type III Supporting Organizations			<u> </u>
	<u></u>		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		163	140
•	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			
		1		
•	organization's governing documents in effect on the date of notification, to the extent not previously provided?	-		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
_	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	3		
Sec	supported organizations played in this regard. tion 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)	i <b>-</b>		
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 in	struction		
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	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 in line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	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		

Pai	¹t V Type III Non-Functionally Integrated 509(a)(3) Supportin	ng Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust on N	ov. 20, 1970 ( <i>explain in</i>	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus		·	
Sect	ion 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		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
_7_	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion 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-functiona	lly integrated	d Type III supporting orga	nization (see
	instructions).	. •		•

Schedule A (Form 990 or 990-EZ) 2020

Par	T V   Type III Non-Functionally integrated 509	(a)(3) Supporting Orga	inizations <sub>(continue</sub>	<u>ed)</u>			
<u>Secti</u>	on D - Distributions				Current Year		
_1_	Amounts paid to supported organizations to accomplish exe	mpt purposes		1			
2	Amounts paid to perform activity that directly furthers exemp						
	organizations, in excess of income from activity		2				
3	Administrative expenses paid to accomplish exempt purpose	s	3				
4	Amounts paid to acquire exempt-use assets		4				
5	Qualified set-aside amounts (prior IRS approval required - pri		5				
6	Other distributions (describe in Part VI). See instructions.		6				
7	Total annual distributions. Add lines 1 through 6.						
8	Distributions to attentive supported organizations to which the	he organization is responsive	,				
	(provide details in Part VI). See instructions.			8			
9	Distributable amount for 2020 from Section C, line 6						
10	Line 8 amount divided by line 9 amount			10			
		(i)	(ii)		(iii)		
Secti	Section E - Distribution Allocations (see instructions)  Excess Distributions  Underdistributions  Pre-2020				Distributable Amount for 2020		
_1_	Distributable amount for 2020 from Section C, line 6						
2	Underdistributions, if any, for years prior to 2020 (reason-						
	able cause required - explain in Part VI). See instructions.						
_3_	Excess distributions carryover, if any, to 2020						
<u>a</u>	From 2015						
<u>       b</u>	rrom 2016						
c	From 2017						
d	d From 2018						
e	From 2019						
f_	Total of lines 3a through 3e						
<u>g</u>	Applied to underdistributions of prior years						
<u>h</u>	Applied to 2020 distributable amount						
i_	Carryover from 2015 not applied (see instructions)						
<u>_i</u>	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.						
4	Distributions for 2020 from Section D,						
	line 7: \$						
<u>a</u>	Applied to underdistributions of prior years						
<u>       b</u>	Applied to 2020 distributable amount						
c	Remainder. Subtract lines 4a and 4b from line 4.						
5	Remaining underdistributions for years prior to 2020, 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 2020. Subtract lines 3h						
	and 4b from line 1. For result greater than zero, explain in						
	Part VI. See instructions.						
7	Excess distributions carryover to 2021. Add lines 3j						
	and 4c.						
8_	Breakdown of line 7:						
<u>a</u>	Excess from 2016						
<u>b</u>	Excess from 2017						
c	Excess from 2018						
d	Excess from 2019						

Schedule A (Form 990 or 990-EZ) 2020

e Excess from 2020

# Schedule B

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

Department of the Treasury Internal Revenue Service

# **Schedule of Contributors**

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

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**2020** 

OMB No. 1545-0047

Name of the organization

GREATER COLUMBUS ARTS COUNCIL

Employer identification number

31-0833384

Organiza	ation type (check or	ie):
Filers of	:	Section:
Form 990	or 990-EZ	X 501(c)( 3 ) (enter number) organization
		4947(a)(1) nonexempt charitable trust <b>not</b> 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
		covered by the <b>General Rule</b> or a <b>Special Rule</b> .  7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.
General	Rule	
	-	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special I	Rules	
	sections 509(a)(1) a any one contributor	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under nd 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from , 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; line 1. Complete Parts I and II.
	contributor, during literary, or educatio	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, nal purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering instead of the contributor name and address), II, and III.
	year, contributions is checked, enter he purpose. Don't com	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., aplete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively etc., contributions totaling \$5,000 or more during the year
		at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF),

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

Name of organization

Employer identification number

#### GREATER COLUMBUS ARTS COUNCIL 31-0833384 Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (d) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 1 CITY OF COLUMBUS X Person **Payroll** 90 WEST BROAD STREET 6,286,251. Noncash (Complete Part II for COLUMBUS, OH 43215 noncash contributions.) (a) (c) (d) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** 2 FRANKLIN COUNTY X Person **Payroll** 373 S HIGH STREET 4,000,000. Noncash (Complete Part II for COLUMBUS, OH 43215 noncash contributions.) (a) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person **Payroll** Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Type of contribution Name, address, and ZIP + 4 **Total contributions** No. Person Payroll Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) (c) (d) (a) (b) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

# GREATER COLUMBUS ARTS COUNCIL

31-0833384

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
		-	
023453 11-25-		\$Sahadula B /Farm	990, 990-EZ, or 990-PF) (2020

Name of organization **Employer identification number** GREATER COLUMBUS ARTS COUNCIL 31-0833384 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 (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

#### SCHEDULE C

(Form 990 or 990-EZ)

# **Political Campaign and Lobbying Activities**

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

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

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

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

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- 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) organizat	ions: Complete Part III.			
Nan	ne of organization			Emp	loyer identification number
		COLUMBUS ARTS C			31-0833384
Pa	art I-A Complete if the org	anization is exempt und	er section 501(c)	or is a section 527 or	ganization.
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	ures		<b>&gt;</b> \$	·
Pa	art I-B Complete if the org	anization is exempt und	er section 501(c)(	3).	
1	Enter the amount of any excise tax	incurred by the organization und	der section 4955	<b>&gt;</b> \$	·
	Enter the amount of any excise tax				
3	If the organization incurred a sectio	n 4955 tax, did it file Form 4720	for this year?		Yes No
4a	Was a correction made?				Yes No
	If "Yes," describe in Part IV.				1(0)
_	art I-C Complete if the org	<u>-</u>			
	Enter the amount directly expended	, , ,	·		
2	Enter the amount of the filing organ				
•	exempt function activities				
3	Total exempt function expenditures				
4	line 17b  Did the filing organization file <b>Form</b>				
5	Enter the names, addresses and en				
Ŭ	made payments. For each organiza				
	contributions received that were pro				•
	political action committee (PAC). If	additional space is needed, prov	vide information in Part	IV.	
	<b>(a)</b> 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

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

Schedule C (Form 990 or 990-EZ) 2020

LHA

032041 12-02-20

Schedule C (Form 990 or 990-EZ) 2020

c Total lobbying expenditures

 d Grassroots nontaxable amount
 e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

# Schedule C (Form 990 or 990-EZ) 2020 GREATER COLUMBUS ARTS COUNCIL 31-08333 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)).

or e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a	)	(k	o)
of the	lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state, or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:				
а	Volunteers?		Х		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X		
С	Media advertisements?		X		
d	Mailings to members, legislators, or the public?		X		
е	Publications, or published or broadcast statements?		X		
f	Grants to other organizations for lobbying purposes?		X		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	X		48	3,000.
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X		
i	Other activities?		X		
j	Total. Add lines 1c through 1i			48	3,000.
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X		
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	F04/-)/5			
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 504(c)(c)	on 501(c)(s	), or sec	tion	
	501(c)(6).			V	NI.
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section 501 (c)(4), section 501			tion	
ı uı	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered		•		3 is
	answered "Yes."	NO OII	b) i diti		0, 13
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)				
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
b	Carryover from last year				
С	Total				
3	A server and a server and a discounting OCCO(a)(d)(A) and the server and a destillation of the server at the serve				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	cess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	oolitical			
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (See instructions)		5		
Par	t IV Supplemental Information				
rov	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	o list); Part II-	A, lines 1 ar	nd 2 (See	
	ctions); and Part II-B, line 1. Also, complete this part for any additional information.				
	, , , , , , , , , , , , , , , , , , , ,				
OI	BYING SERVICES PROVIDED BY CONTRACT COMPANIES INCL	JDED: P	ROVID	ING	
INI	ORMATION AND INTRODUCTIONS TO ELECTED OFFICIALS; K	DISTAGE	~~~~		
	ORMATION AND INTRODUCTIONS TO ELECTED OFFICIALS; K	FELING	GCAC		
TATE	ORMATION AND INTRODUCTIONS TO ELECTED OFFICIALS; K	EEPING	GCAC		
TIAT	ORMATION AND INTRODUCTIONS TO ELECTED OFFICIALS; KI			ND	
	·			ND	
	·	S FUNDI	NG; Al	ND	
	ORMED OF PENDING LEGISLATION THAT COULD IMPACT ART	S FUNDI	NG; Al	ND	

## **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

GREATER COLUMBUS ARTS COUNCIL

**Employer identification number** 31-0833384

Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds o	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	ne 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	d 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 a	dvisors in writing that grant funds can be us	sed only
	for charitable purposes and not for the benefit of the donor of	r donor advisor, or for any other purpose co	onferring
Par	t II Conservation Easements. Complete if the or	ganization answered "Yes" on Form 990, Pa	art IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that appl <u>y).</u>	
	Preservation of land for public use (for example, recrea	tion or education) Preservation of a	a historically important land area
	Protection of natural habitat	Preservation of a	a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quality	fied conservation contribution in the form of	f a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
	,		
	Number of conservation easements on a certified historic str		
d	Number of conservation easements included in (c) acquired a		
	listed in the National Register		
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the c	organization during the tax
	year ▶		
4	Number of states where property subject to conservation eas		
5	Does the organization have a written policy regarding the per		
_	violations, and enforcement of the conservation easements if		
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing conse	rvation easements during the year
_			
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservation	on easements during the year
•			(4)(D)(:)
8	Does each conservation easement reported on line 2(d) above		
9	and section 170(h)(4)(B)(ii)?  In Part XIII, describe how the organization reports conservati		
9	balance sheet, and include, if applicable, the text of the footr	•	
	organization's accounting for conservation easements.	lote to the organization's infancial statemen	its that describes the
Par	t III Organizations Maintaining Collections of	f Art, Historical Treasures, or Oth	er Similar Assets.
	Complete if the organization answered "Yes" on Form		
	If the organization elected, as permitted under FASB ASC 95		d balance sheet works
	of art, historical treasures, or other similar assets held for put	•	
	service, provide in Part XIII the text of the footnote to its final	, ,	•
b	If the organization elected, as permitted under FASB ASC 95		
	art, historical treasures, or other similar assets held for public		
	provide the following amounts relating to these items:	,	,
	(i) Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
2	If the organization received or held works of art, historical tre		
	the following amounts required to be reported under FASB A		
а	Revenue included on Form 990, Part VIII, line 1	_	<b>&gt;</b> \$
	Assets included in Form 990, Part X		
LHA	For Paperwork Reduction Act Notice, see the Instructions	s for Form 990.	Schedule D (Form 990) 2020

032051 12-01-20

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

	t III   Organizations Maintaining C	ollections of Art			her S		· Assets			ige Z
3	Using the organization's acquisition, accession							(COITIIII	<u>ucu)</u>	
•	collection items (check all that apply):	ori, aria ouror rocorac	, criccit any or the i	onowing that man	to olgili	nodine e	100 01 110			
а										
b	Scholarly research  e Other									
с 4	Preservation for future generations  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									
•	to be sold to raise funds rather than to be ma		•	•			[	Yes		No
Par	t IV Escrow and Custodial Arrang									
	reported an amount on Form 990, Par		3				,	,		
1a	Is the organization an agent, trustee, custodia	an or other intermedia	arv for contributions	s or other assets	not incl	uded				
	on Form 990, Part X?							Yes	X	No
b	If "Yes," explain the arrangement in Part XIII a	and complete the foll	owing table:							
	g		- · · · · · · · · · · · · · · · · · · ·					Amount		
С	Beginning balance					1c				
	Additions during the year					1d				
	Distributions during the year					1e				
f	Ending balance					1f				
2a	Did the organization include an amount on Fo					$\overline{}$		Yes	X	No
	If "Yes," explain the arrangement in Part XIII.				-			_		ĺ
Par										
	· ·	(a) Current year	(b) Prior year	(c) Two years ba		Three v	ears back	(e) Four	vears	back
1a	Beginning of year balance	2,788,062.	1,905,661.	1,973,57			28,965.		296,9	
	Contributions	9,331,546.	8,684,094.	5,812,48	2.	5,8	66,237.	<u>'</u>		794.
	Net investment earnings, gains, and losses					-				
	Grants or scholarships									
	Other expenditures for facilities									
	and programs	9,313,660.	7,801,693.	5,880,39	5.	5,4	21,628.	5,	022,	799.
f	Administrative expenses					-				
	End of year balance	2,805,948.	2,788,062.	1,905,66	1.	1,9	73,574.	1,	528,9	965.
2	Provide the estimated percentage of the curre	ent vear end balance	(line 1g. column (a)	) held as:		-				
а	Board designated or quasi-endowment	,	%	,						
	Permanent endowment	%	_							
		<del></del> %								
	The percentages on lines 2a, 2b, and 2c shou	uld equal 100%.								
За	Are there endowment funds not in the posses	ssion of the organizat	ion that are held ar	nd administered fo	or the o	rganiza	ation			
	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 organization	tions listed as require	ed on Schedule R?					3b		
4	Describe in Part XIII the intended uses of the	organization's endov	vment funds.							
Par	t VI Land, Buildings, and Equipm	ent.								
	Complete if the organization answered	d "Yes" on Form 990,	Part IV, line 11a. S	ee Form 990, Pai	t X, line	e 10.				
	Description of property	(a) Cost or ot	her (b) Cost	or other (	<b>c)</b> Accı	ımulate	ed	(d) Book	value	•
		basis (investm	ent) basis	(other)	depre	ciation				
1a	Land									
	Buildings									
	Leasehold improvements			8,006.		4,38			3,61	
	Equipment			7,596.	17	3,79	92.		3,80	
	Other		31	3,076.	30	2,3	13.		76	
Total	. Add lines 1a through 1e. (Column (d) must ed	gual Form 990. Part X	(. column (B). line 1	0c.)			<b></b>	268	3,18	34.

	UMBUS ARTS CO	UNCIL 31	-0833384 Page
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes" of			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	d-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, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of			d = <b>f</b>
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1)			
(2)			
(2) (3)			
(2) (3) (4)			
(2) (3) (4) (5)			
(2) (3) (4) (5) (6)			
(2) (3) (4) (5) (6) (7)			
(2) (3) (4) (5) (6) (7) (8)			
(2) (3) (4) (5) (6) (7) (8) (9)			
(2) (3) (4) (5) (6) (7) (8) (9)  Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
(2) (3) (4) (5) (6) (7) (8) (9)  Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)  Part IX Other Assets.			
(2) (3) (4) (5) (6) (7) (8) (9)  Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶  Part IX Other Assets.  Complete if the organization answered "Yes" of the state of the organization answered "Yes" of the organization and the organization answered "Yes" of the organization answered "Yes" of the organization answered "Yes" of the organization and the organi		11d. See Form 990, Part X, line 15.	(b) Pook value
(2) (3) (4) (5) (6) (7) (8) (9)  Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶  Part IX Other Assets.  Complete if the organization answered "Yes" (a)	on Form 990, Part IV, line Description	11d. See Form 990, Part X, line 15.	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9)  Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶  Part IX Other Assets.  Complete if the organization answered "Yes" (a) (1)		11d. See Form 990, Part X, line 15.	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9)  Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)  Part IX Other Assets.  Complete if the organization answered "Yes" (a) (1) (2)		11d. See Form 990, Part X, line 15.	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9)  Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶  Part IX Other Assets.  Complete if the organization answered "Yes" (a) I (1) (2) (3)		11d. See Form 990, Part X, line 15.	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9)  Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)  Part IX Other Assets.  Complete if the organization answered "Yes" (a) (1) (2)		11d. See Form 990, Part X, line 15.	(b) Book value

(6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)

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.

<u>1.                                    </u>	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	LONG TERM LEASE PAYABLE	11,433.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	11,433.

Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the X 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

Part XI	Recon	ciliation of Revenue per Audited Financial Statements With Revenue per Return

Pa	rt XI Reconciliation of Revenue per Audited Financial Stat				
	Complete if the organization answered "Yes" on Form 990, Part IV, lir	ne 12a.			
1	Total revenue, gains, and other support per audited financial statements			1	11,870,538.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	35,148.		
b	Donated services and use of facilities	2b	71,378.		
С	Recoveries of prior year grants	2c			
d			19,770.		
е	Add lines 2a through 2d			2e	126,296.
3	Subtract line 2e from line 1			3	11,744,242.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	10,523.		
b					
_	Add lines 4a and 4b			4c	10,523.
С	7 dd iiriod 14 drid 16			-10	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.	)		5	11,754,765.
5		)		5	11,754,765.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.	) atements With		5	11,754,765. n.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12, rt XII Reconciliation of Expenses per Audited Financial Sta	atements With ne 12a.	Expenses per F	5	11,754,765.
5 Pa	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12, rt XII Reconciliation of Expenses per Audited Financial Sta	atements With ne 12a.	Expenses per F	5 Retur	11,754,765. n.
5 Pa	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12, rt XII   Reconciliation of Expenses per Audited Financial Sta  Complete if the organization answered "Yes" on Form 990, Part IV, line  Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25:	atements With	Expenses per F	5 Retur	11,754,765. n.
5 Pa 1 2	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I. line 12.  rt XII   Reconciliation of Expenses per Audited Financial Sta  Complete if the organization answered "Yes" on Form 990, Part IV, line  Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25:  Donated services and use of facilities	atements With ne 12a.	Expenses per F	5 Retur	11,754,765. n.
5 Pa	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12, rt XII   Reconciliation of Expenses per Audited Financial State   Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25:  Donated services and use of facilities	2a 2b	Expenses per F	5 Retur	11,754,765. n.
1 2 a b	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12, rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25:  Donated services and use of facilities  Prior year adjustments  Other losses	2a 2b 2c	Expenses per F	5 Retur	11,754,765. n.
1 2 a b c	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12 rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25:  Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIII.)	2a 2b 2c 2d	Expenses per F	5 Retur	11,754,765. n. 11,484,888. 19,773.
Pa 1 2 a b c	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12, rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25:  Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIII.)  Add lines 2a through 2d	2a 2b 2c 2d	Expenses per F	5 Return	11,754,765. n. 11,484,888.
Pa 1 2 a b c d e	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12 rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25:  Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIII.)	2a 2b 2c 2d	Expenses per F	5 Return	11,754,765. n. 11,484,888. 19,773.
5 Pa 1 2 a b c d e 3	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I. line 12.  rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25:  Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIII.)  Add lines 2a through 2d  Subtract line 2e from line 1  Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d	Expenses per F	5 Return	11,754,765. n. 11,484,888. 19,773.
1 2 a b c d e 3 4	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I. line 12.  rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25:  Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIII.)  Add lines 2a through 2d  Subtract line 2e from line 1  Amounts included on Form 990, Part IX, line 25, but not on line 1:  Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d	Expenses per F	5 Return	11,754,765. n. 11,484,888. 19,773.
1 2 a b c d e 3 4 a	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12, rt XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25:  Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIII.)  Add lines 2a through 2d  Subtract line 2e from line 1  Amounts included on Form 990, Part IX, line 25, but not on line 1:  Investment expenses not included on Form 990, Part VIII, line 7b  Other (Describe in Part XIII.)	2a   2b   2c   2d	19,773. 10,523.	5 Return	11,754,765. n. 11,484,888. 19,773.

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 IV, LINE 2B:

GCAC AGREED TO HOLD, MANAGE, AND DISBURSE FUNDS, ACTING AS FISCAL AGENT

FOR VARIOUS ORGANIZATIONS. GCAC HAS NOT REPORTED THE RECEIPT OF THESE

FUNDS AS CONTRIBUTIONS SINCE THE TRANSFERS ARE SUBJECT TO RESPECTIVE

ORGANIZATION'S UNILATERAL RIGHT TO REDIRECT THE USE OF THESE ASSETS TO

OTHER BENEFICIARIES. AS OF DECEMBER 31, 2020 GCAC HELD \$3,860 IN ASSETS

HELD FOR OTHERS. AS OF DECEMBER 31, 2019 GCAC DID NOT HAVE ANY ASSETS HELD

FOR OTHERS.

#### PART V, LINE 4:

THE GREATER COLUMBUS ARTS COUNCIL HAD BOTH BOARD DESIGNATED AND

TEMPORARILY RESTRICTED NET ASSETS.

Part XIII | Supplemental Information (continued)

THE BOARD DESIGNATED FUNDS HAVE BEEN DESIGNATED FOR THE PURPOSES OF OPERATING RESERVES AND OFFICE RELOCATION PURCHASES.

THE TEMPORARILY RESTRICTED NET ASSETS ARE COMPOSED OF FOUR SEPARATE TEMPORARILY RESTRICTED FUNDS, WHICH INCLUDE FISCALLY SPONSORED

ORGANIZATIONS, COMMUNITY FUNDING, FILM COLUMBUS, AND CAPITAL FUNDING.

THESE SEPARATE FUNDS ARE RESTRICTED TO FUND THE DESIGNATED PROGRAMS.

PART X, LINE 2:

FIN 48 FOOTNOTE:

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

PART XI, LINE 2D - OTHER ADJUSTMENTS:

EVENT EXPENSES INCLUDED ON STATEMENT OF REVENUE 19,767.

ROUNDING 3.

TOTAL TO SCHEDULE D, PART XI, LINE 2D 19,770.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

EVENT EXPENSES INCLUDED ON STATEMENT OF REVENUE 19,767.

ROUNDING

032055 12-01-20

#### **SCHEDULE G**

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

### **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	٦

GREATER COLUMBUS ARTS COUNCIL

Employer identification number

GREATER	COLUMBUS ARTS COU	NCII	<u>.</u>		31-0833	384
Part I Fundraising Activities.	Complete if the organization answe	red "Y	es" or	n Form 990, Part IV, I	ine 17. Form 990-EZ	filers are not
required to complete this part						
1 Indicate whether the organization rais	ed funds through any of the followin	g activ	ities. (	Check all that apply.		
a Mail solicitations				overnment grants		
b Internet and email solicitations				nment grants		
c Phone solicitations	g Special	fundra	iising (	events		
d In-person solicitations						
2 a Did the organization have a written o						
key employees listed in Form 990, Pa					Yes	
<b>b</b> If "Yes," list the 10 highest paid indiv		ant to	agreer	ments under which th	ne fundraiser is to be	•
compensated at least \$5,000 by the	organization.					
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have con	ustody	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser	(vi) Amount paid to (or retained by)
or ormity (ramanalout)		contrib	utions?	nom detivity	listed in col. (i)	organization
		Yes	No			
Total			<b>•</b>			
3 List all states in which the organizatio or licensing.			utions	or has been notified	it is exempt from re	gistration
or noonang.						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule G (Form 990 or 990-EZ) 2020

Pa	rt I	Fundraising Events. Complete if the of fundraising event contributions and ground fundraising event contributions and ground fundraising event contributions.	-		· ·	
		<u> </u>	(a) Event #1 CAP LUNCHEON	<b>(b)</b> Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
			(event type)	(event type)	(total number)	col. <b>(c)</b> )
Revenue						
Reve	1	Gross receipts	23,585.			23,585.
_	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)	23,585.			23,585.
	4	Cash prizes	12,500.			12,500.
S	5	Noncash prizes				
xpense	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses				7,267.
	10	Direct expense summary. Add lines 4 through			<b>&gt;</b>	19,767.
		Net income summary. Subtract line 10 from li				3,818.
Pa	rt I		answered "Yes" on Form	990, Part IV, line 19, or	reported more than	
$\overline{}$		\$15,000 on Form 990-EZ, line 6a.	I	(b) Dull tabe/instant	Ι	(d) Total gaming (add
ne			(a) Bingo	<b>(b)</b> Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue				0 1 0		( ) ( )
Ŗ	1	Gross revenue				
nses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direc	4	Rent/facility costs				
	5	Other direct expenses				
			Yes %	Yes %	Yes %	
	6	Volunteer labor	No No	No No	No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)		<b>&gt;</b>	
	•	Not receive in a large of the Alline 7	form Proc. 4. and home (al)		_	
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)		<u>P</u>	
9	Fnt	er the state(s) in which the organization condu	icts gaming activities:			
		he organization licensed to conduct gaming ac	_	states?		Yes No
		No," explain:				
	_					
		re any of the organization's gaming licenses re			year?	Yes No
b	It "	Yes," explain:				
	_					
	_					

Schedule G (Form 990 or 990-EZ) 2020

032082 11-25-20

Schedule G (Form 990 or 990-EZ) 2020 GREATER COLUMBUS ARTS COUNCIL	31-0833384 Page 3
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	<b>13a</b>   %
<b>b</b> An outside facility	
14 Enter the name and address of the person who prepares the organization's gaming/special events books and record	
Name	
Address >	
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes No
<b>b</b> If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue received by the organization ▶ \$ and \$	ount
of gaming revenue retained by the third party ▶\$	
c If "Yes," enter 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	□ vaa □ Na
retain the state gaming license?	
<b>b</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 IVI   Supplemental Information   Part IVI   Part IVI	
<b>Supplemental Information.</b> Provide the explanations required by Part I, line 2b, columns (iii) and (v) 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	; and Part III, lines 9, 9b, 10b,

Schedule G	i (Form 990 or 990-EZ)	GREATER	COLUMBUS	ARTS	COUNCIL	31-0833384	Page 4
Part IV	(Form 990 or 990-EZ) <b>Supplemental Infor</b>	mation <sub>(contin</sub>	ued)				

## SCHEDULE I (Form 990)

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 the latest information.

2020

OMB No. 1545-0047

Open to Public Inspection

**Employer identification number** Name of the organization 31-0833384 GREATER COLUMBUS ARTS COUNCIL Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection 1 X Yes criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 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. (f) Method of 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of (e) Amount of (g) Description of (h) Purpose of grant valuation (book, or government (if applicable) cash grant non-cash noncash assistance or assistance FMV, appraisal, assistance other) BALLET METROPOLITAN, INC. 322 MOUNT VERNON AVE GRANTS TO PROMOTE ART AND 31-0858562 501(C)(3) 401,918. 0 CULTURE IN COLUMBUS COLUMBUS, OH 43215 THE CENTER OF SCIENCE AND INDUSTRY 333 WEST BROAD STREET GRANTS TO PROMOTE ART AND 31-4383802 501(C)(3) CULTURE IN COLUMBUS COLUMBUS, OH 43215 411,576. 0. COLUMBUS MUSEUM OF ART 480 EAST BROAD STREET GRANTS TO PROMOTE ART AND 31-4379447 501(C)(3) COLUMBUS, OH 43215 398,977. 0 CULTURE IN COLUMBUS FRIENDS OF THE CONSERVATORY 1777 EAST BROAD STREET GRANTS TO PROMOTE ART AND CULTURE IN COLUMBUS COLUMBUS OH 43203 31-1657027 501(C)(3) 890 577 0. WEXNER CENTER FOR THE ARTS 1871 NORTH HIGHT ST GRANTS TO PROMOTE ART AND 31-1306419 501(C)(3) CULTURE IN COLUMBUS COLUMBUS, OH 43210 353 201 0. COLUMBUS SYMPHONY ORCHESTRA, INC. 55 E. STATE STREET GRANTS TO PROMOTE ART AND COLUMBUS OH 43215 31-6402408 501(C)(3) 415 776 0 CULTURE IN COLUMBUS 65. 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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

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

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	- tugo
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE COLUMBUS ASSOCIATION FOR THE							
PERFORMING ARTS, INC 55 E.							GRANTS TO PROMOTE ART AND
STATE STREET - COLUMBUS, OH 43215	31-0749884	501(C)(3)	407,376.	0.			CULTURE IN COLUMBUS
SHADOART PRODUCTIONS							
503 S. FRONT ST, SUITE 260							GRANTS TO PROMOTE ART AND
COLUMBUS, OH 43215	31-1340461	501(C)(3)	356,979.	0.			CULTURE IN COLUMBUS
THE JAZZ ARTS GROUP OF COLUMBUS							
400 S FIFTH ST, SUITE 103							GRANTS TO PROMOTE ART AND
COLUMBUS, OH 43215	31-0852944	501(C)(3)	252,751.	0.			CULTURE IN COLUMBUS
·							
PRO MUSICA CHAMBER ORCHESTRA OF							
COLUMBUS, INC 620 E BROAD ST.							GRANTS TO PROMOTE ART AND
SUITE 300 - COLUMBUS, OH 43215	31-0952873	501(C)(3)	236,721.	0.			CULTURE IN COLUMBUS
THE COMMUNITY ARTS PROJECT, INC.							
867 MT VERNON AVENUE							GRANTS TO PROMOTE ART AND
COLUMBUS, OH 43203	23-7065803	501(C)(3)	314,141.	0.			CULTURE IN COLUMBUS
CONTEMPORARY AMERICAN THEATER							
COMPANY - 55 E STATE ST -				_			GRANTS TO PROMOTE ART AND
COLUMBUS, OH 43215	31-1168461	501(C)(3)	190,273.	0.			CULTURE IN COLUMBUS
COLUMBUS CHILDRENS THEATRE							
177 E. NAGHTEN STREET							GRANTS TO PROMOTE ART AND
COLUMBUS, OH 43215	31-0671802	501(C)(3)	178,010.	0.			CULTURE IN COLUMBUS
OPERA COLUMBUS							
55 E STATE ST		504 (5) (0)		_			GRANTS TO PROMOTE ART AND
COLUMBUS, OH 43215	31-1020676	501(C)(3)	204,082.	0.			CULTURE IN COLUMBUS
OHIO DESIGNER CRAFTSMEN							
1665 w 5TH AVENUE							GRANTS TO PROMOTE ART AND
COLUMBUS, OH 43212	31-0677681	501(C)(3)	146,924.	0.			CULTURE IN COLUMBUS

Part II Continuation of Grants and Oth	ner Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	_ ruge
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SHORT NORTH STAGE							
PO BOX 10689							GRANTS TO PROMOTE ART AND
COLUMBUS, OH 43201	20-1617421	501(C)(3)	138,307.	0.			CULTURE IN COLUMBUS
GLASS AXIS							
610 W. TOWN ST							GRANTS TO PROMOTE ART AND
COLUMBUS, OH 43215	31-1237593	501(C)(3)	87,116.	0.			CULTURE IN COLUMBUS
GATEWAY FILM FOUNDATION							
1550 N HIGH ST							GRANTS TO PROMOTE ART AND
COLUMBUS, OH 43201	47-3178799	501(C)(3)	264,428.	0.			CULTURE IN COLUMBUS
THE THURBER HOUSE, INC.							
77 JEFFERSON AVENUE							GRANTS TO PROMOTE ART AND
COLUMBUS, OH 43215	31-1136182	501(C)(3)	96,710.	0.			CULTURE IN COLUMBUS
COLUMBUS GAY MEN'S CHORUS							
51 JEFFERSON AVENUE	21 1206160	501/61/21	60.000				GRANTS TO PROMOTE ART AND
COLUMBUS, OH 43215	31-1306169	501(C)(3)	68,279.	0.			CULTURE IN COLUMBUS
CHAMBER MUSIC COLUMBUS							
PO BOX 14445							GRANTS TO PROMOTE ART AND
COLUMBUS, OH 43214	31-0679936	501(C)(3)	31,168.	0.			CULTURE IN COLUMBUS
ACTOR'S THEATRE OF COLUMBUS							
1000 CITY PARK AVENUE							GRANTS TO PROMOTE ART AND
COLUMBUS, OH 43206	31-1054953	501(C)(3)	43,412.	0.			CULTURE IN COLUMBUS
COLUMBUS CIVIC THEATER							
3837 INDIANOLA AVE							GRANTS TO PROMOTE ART AND
COLUMBUS, OH 43214	26-3424315	501(C)(3)	20,650.	0.			CULTURE IN COLUMBUS
ASIAN FESTIVAL							
1367 WINGATE DR							GRANTS TO PROMOTE ART AND
DELAWARE, OH 43015	31-0813672	501(C)(3)	30,000.	0.			CULTURE IN COLUMBUS

(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of	(e) Amount of	(f) Method of	(g) Description of	(h) Purpose of grant
organization or government	(8) = 11	if applicable	cash grant	non-cash assistance	valuation (book, FMV, appraisal, other)	non-cash assistance	or assistance
OHIO HISTORICAL SOCIETY							
800 E 17TH AVE							GRANTS TO PROMOTE ART AN
COLUMBUS, OH 43211	31-4389673	501(C)(3)	243,496.	0.			CULTURE IN COLUMBUS
COLUMBUS MUSIC COMMISSION							
277 WEST NATIONWIDE BLVD							GRANTS TO PROMOTE ART AN
COLUMBUS, OH 43215	81-1531218	501(C)(3)	125,000.	0.			CULTURE IN COLUMBUS
COLUMBUS LANDMARKS FOUNDATION							
57 JEFFERSON AVENUE							GRANTS TO PROMOTE ART AN
COLUMBUS, OH 43215	31-0914612	501(C)(3)	57,490.	0.			CULTURE IN COLUMBUS
OHIO ALLIANCE FOR ARTS EDUCATION							
77 SOUTH HIGHT ST, FLOOR 2							GRANTS TO PROMOTE ART AN
COLUMBUS, OH 43215	31-1017260	501(C)(3)	300,000.	0.			CULTURE IN COLUMBUS
CARTOON CROSSROADS							
4364 N HIGH ST #141404							GRANTS TO PROMOTE ART AND
COLUMBUS, OH 43214	47-1706241	501(C)(3)	28,500.	0.			CULTURE IN COLUMBUS
COLUMBUS & CENTRAL OHIO CHILDREN'S							
CHORUS & FOUNDATION - 760 EAST							GRANTS TO PROMOTE ART AN
BROAD ST - COLUMBUS, OH 43205	31-1455959	501(C)(3)	49,400.	0.			CULTURE IN COLUMBUS
ALL PEOPLE ARTS							
946 PARONS AVE							GRANTS TO PROMOTE ART AN
COLUMBUS, OH 43206	81-5475792	501(C)(3)	8,400.	0.			CULTURE IN COLUMBUS
EVOLUTION THEATRE INC							
PO BOX 21072							GRANTS TO PROMOTE ART AN
COLUMBUS, OH 43221	45-2747793	501(C)(3)	25,500.	0.			CULTURE IN COLUMBUS
OPERA PROJECT COLUMBUS							
PO BOX 14185							GRANTS TO PROMOTE ART AN
COLUMBUS, OH 43214	45-2324535	501(C)(3)	21,000.	0.			CULTURE IN COLUMBUS

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WILD GOOSE CREATIVE							
401 WEST TOWN ST							GRANTS TO PROMOTE ART AN
COLUMBUS, OH 43215	26-3180268	501(C)(3)	35,843.	0.			CULTURE IN COLUMBUS
VAUD-VILLITIES PRODUCTIONS							
4411 TAMARACK BLVD							GRANTS TO PROMOTE ART AN
COLUMBUS, OH 43229	31-1120828	501(C)(3)	19,950.	0.			CULTURE IN COLUMBUS
RED HERRING PRODUCTIONS							
3723 S HIGH ST							GRANTS TO PROMOTE ART AND
COLUMBUS, OH 43207	46-1455994	501(C)(3)	21,000.	0.			CULTURE IN COLUMBUS
MADLAB THEATRE							
227 NORTH 3RD ST							GRANTS TO PROMOTE ART AN
COLUMBUS, OH 43215	31-1635762	501(C)(3)	27,000.	0.			CULTURE IN COLUMBUS
OHIOANA LIBRARY ASSOCIATION							
274 E FIRST AVE, SUITE 300							GRANTS TO PROMOTE ART AN
COLUMBUS, OH 43201	31-4379616	501(C)(3)	25,500.	0.			CULTURE IN COLUMBUS
FRIENDS OF EARLY MUSIC, INC.							
1 COLLEGE AND MAIN							GRANTS TO PROMOTE ART AND
COLUMBUS, OH 43209	31-1242710	501(C)(3)	18,900.	0.			CULTURE IN COLUMBUS
OHIODANCE							
77 SOUTH HIGH STREET							GRANTS TO PROMOTE ART AN
COLUMBUS, OH 43215	31-1222044	501(C)(3)	17,900.	0.			CULTURE IN COLUMBUS
ART POSSIBLE OHIO							
77 SOUTH HIGHT STREET, 2ND FLOOR							GRANTS TO PROMOTE ART AN
COLUMBUS, OH 43215	31-1255393	501(C)(3)	9,800.	0.			CULTURE IN COLUMBUS
COLUMBUS SONGWRITERS ASSOCIATION							
3830 SADDLEBROOK CT							GRANTS TO PROMOTE ART AN
COLUMBUS, OH 43221	46-2535230	501(C)(3)	7,400.	0.			CULTURE IN COLUMBUS

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	- Tuge
(a) Name and address of organization or government	( <b>b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMMUNITY PARTNERS YOUTH							
DEVELOPMENT ORG - 1580 KENWICK RD							GRANTS TO PROMOTE ART AND
- COLUMBUS, OH 43209	31-1617513	501(C)(3)	6,000.	0.			CULTURE IN COLUMBUS
LINCOLN THEATRE ASSOCIATION							
55 E STATE ST							GRANTS TO PROMOTE ART AND
COLUMBUS, OH 43215	20-5886656	501(C)(3)	50,000.	0.			CULTURE IN COLUMBUS
COMMUNITY SHARES OF MID OHIO							
1699 WEST MOUND STREET							GRANTS TO PROMOTE ART AND
COLUMBUS, OH 43223	31-1363943	501(C)(3)	7,125.	0.			CULTURE IN COLUMBUS
SUMMER JAM WESTGATE							
3195 PARKSIDE RD							GRANTS TO PROMOTE ART AND
COLUMBUS, OH 43204	47-2350863	501(C)(3)	13,900.	0.			CULTURE IN COLUMBUS
CAMILLE CATHERINE							
1436 CHELMSFORD COURT							GRANTS TO PROMOTE ART AND
COLUMBUS, OH 43229	01-0692587	501(C)(3)	5,550.	0.			CULTURE IN COLUMBUS
ECLIPSE THEATRE COMPANY							
915 SCHROCK RD							GRANTS TO PROMOTE ART AND
COLUMBUS, OH 43229	47-5636302	501(C)(3)	8,000.	0.			CULTURE IN COLUMBUS
MAROON ARTS GROUP							
PO BOX 83454							GRANTS TO PROMOTE ART AND
COLUMBUS, OH 43203	81-0802458	501(C)(3)	24,948.	0.			CULTURE IN COLUMBUS
EDUCATION FOUNDATION FOR FREEDOM							
484 STONE SHADOW DR							GRANTS TO PROMOTE ART AND
BLACKLICK, OH 43004	81-2922887	501(C)(3)	6,375.	0.			CULTURE IN COLUMBUS
HIXON DANCE							
PO BOX 82630							GRANTS TO PROMOTE ART AND
COLUMBUS, OH 43202	81-3313035	501(C)(3)	6,750.	0.			CULTURE IN COLUMBUS

Part II Continuation of Grants and Other	er Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	_ ruge
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL VETERANS MEMORIAL AND							
MUSEUM - 300 W BROAD ST -							GRANTS TO PROMOTE ART AND
COLUMBUS, OH 43215	84-3880595	501(C)(3)	25,500.	0.			CULTURE IN COLUMBUS
COLUMBUS GOSPELFEST							
PO BOX 32318							GRANTS TO PROMOTE ART AND
COLUMBUS, OH 43232	31-1284873	501(C)(3)	10,236.	0.			CULTURE IN COLUMBUS
STAGE RIGHT THEATRICS							
2095 STANCREST RD	01 2042020	E01/G)/2)	6 000				GRANTS TO PROMOTE ART AND
DUBLIN, OH 43016	81-3042839	501(C)(3)	6,000.	0.			CULTURE IN COLUMBUS
THE FUSE FACTORY							
295 OLENTANGY STREET							GRANTS TO PROMOTE ART AND
COLUMBUS, OH 43202	26-0208894	501(C)(3)	6,000.	0.			CULTURE IN COLUMBUS
			1,222				
ROY G. BIV							
435 W RICH ST							GRANTS TO PROMOTE ART AND
COLUMBUS, OH 43215	31-1306238	501(C)(3)	17,500.	0.			CULTURE IN COLUMBUS
GIV GENTINGS GONGERE							
SIX STRINGS CONCERT P O BOX 9330							GRANTS TO PROMOTE ART AND
COLUMBUS, OH 43209	31-1277720	501(C)(3)	5,600.	0.			CULTURE IN COLUMBUS
COLUMBOS, OR 43209	31-12///20	501(0)(3)	3,000.	0.			COLIORE IN COLOMBOS
URBAN CULTURAL ARTS FOUNDATION							
1270 BRYDEN RD							GRANTS TO PROMOTE ART AND
COLUMBUS, OH 43205	31-1270223	501(C)(3)	6,000.	0.			CULTURE IN COLUMBUS
•			,				
URBAN STRINGS COLUMBUS							
191 MELYERS CT							GRANTS TO PROMOTE ART AND
COLUMBUS, OH 43235	83-1233959	501(C)(3)	6,000.	0.			CULTURE IN COLUMBUS
VIVO MUSIC FEST							
PO BOX 21514							GRANTS TO PROMOTE ART AND
COLUMBUS, OH 43221	82-2261173	501(C)(3)	21,000.	0.			CULTURE IN COLUMBUS
	02 22011/3	201(0)(3)	1 21,000.	ı	1	1	COLUMBOS

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 non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
SPOTLIGHT COLUMBUS										
3102 ABBEY KNOLL DR							GRANTS TO PROMOTE ART ANI			
LEWIS CENTER, OH 43035	81-5317152	501(C)(3)	6,375.	0.			CULTURE IN COLUMBUS			
•			,							
WE AMPLIFY VOICES										
421 WEST STATE STREET							GRANTS TO PROMOTE ART ANI			
COLUMBUS, OH 43215	27-4261320	501(C)(3)	6,150.	0.			CULTURE IN COLUMBUS			
ALL PEOPLE ARTS							GRANTS TO PROMOTE ORGS			
946 PARONS AVE	04 545500	504 (5) (0)	10.00				LED BY & SERVING PEOPLE			
COLUMBUS, OH 43206	81-5475792	501(C)(3)	10,000.	0.			OF COLOR			
MAROON ARTS GROUP							GRANTS TO PROMOTE ORGS			
PO BOX 83454							LED BY & SERVING PEOPLE			
COLUMBUS, OH 43203	81-0802458	501(C)(3)	10,000.	0.			OF COLOR			
	01 0002130	301(0)(3)	10,000.	•			01 00201			
STATE OF THE ARTS PRODUCTIONS							GRANTS TO PROMOTE ORGS			
80 VILLA CREEK DR							LED BY & SERVING PEOPLE			
REYNOLDSBURG, OH 43068	45-2582455	501(C)(3)	10,000.	0.			OF COLOR			
							<u> </u>			

(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
NDIVIDUAL GRANT RECIPIENTS	593	671,779 <b>.</b>	0.		INDIVIDUAL ARTIST GRANTS & FELLOWSHIPS
NOTIFICIAL GRANT RECTIFINED	333	0/1,//3.	•		LEDONDIIII
Part IV   Supplemental Information. Provide the information	ion required in Part I, line	e 2; Part III, column	ı (b); and any other ac	lditional information.	
PART I, LINE 2:					
THE ORGANIZATION APPROVAL OF GR	ANTS IS DEPE	NDENT ON A	A REVIEW BY	THE STAFF	
AND BOARD GRANT COMMITTEE. REC	IPIENTS OF G	RANTS ARE	REQUIRED T	O SUBMIT	
FINAL REPORTS. GRANTS ARE ACCR	UED AND DIST	RIBUTED ON	N A SCHEDUL	E APPROVED	
BY THE BOARD AS PART OF THE MON	THLY FINANCI	AL STATEME	ints.		

## SCHEDULE J (Form 990)

**Compensation Information** 

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

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

➤ Attach to Form 990.

QUQU
Open to Public

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

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

GREATER COLUMBUS ARTS COUNCIL

Employer identification number 31-0833384

Pa	art I Questions Regarding Compensation			
			Yes	No
<b>1</b> a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel 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 X Written employment contract			
	Independent compensation consultant Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
С		4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section E01(a)(2) E01(a)(4) and E01(a)(90) symmetricing must complete lines E.O.			
_	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:	En		y
a h	The organization?	5a		X
D	Any related organization?	5b		<u> </u>
6	If "Yes" on line 5a or 5b, describe in Part III.  For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
О	contingent on the net earnings of:			
_		6a		х
	The organization?	6b		X
D	Any related organization?	OD		
7	If "Yes" on line 6a or 6b, describe in Part III.  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		х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	<b>–</b>		
J	I	8		х
9	Initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III  If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	3		
•		9		
	Regulations section 53.4958-6(c)?	9		

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

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.

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Derients	(6)(1)-(0)	reported as deferred on prior Form 990
(1) THOMAS KATZENMEYER	(i)	218,468.	30,343.	0.	30,343.	541.	279,695.	0.
PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(ii)							
-	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(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.

#### **SCHEDULE 0**

(Form 990 or 990-EZ)

# Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

GREATER COLUMBUS ARTS COUNCIL

Employer identification number 31-0833384

OMB No. 1545-0047

FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:

THE GREATER COLUMBUS FILM COMMISSION (FILM COLUMBUS) AIMS TO GROW THE

FILM INDUSTRY IN COLUMBUS AND CENTRAL OHIO BY CREATING JOBS AND

PROVIDING SIGNIFICANT ECONMIC IMPACT FOR THE AREA. FILM COLUMBUS

STRIVES TO BUILD COLUMBUS AS A TOP CITY FOR FILM EDUCATION, EXHIBITION,

AND PRODUCTION. BEGINNING IN 2020, FILM COLUMBUS BECAME A DIVISION OF

THE GREATER COLUMBUS ART COUNCIL AND IS PRIMARILY SUPPORTED BY FUNDS

PROVIDED BY THE CITY OF COLUMBUS.

FORM 990, PART III, LINE 4A, DESCRIPTION OF PROGRAM SERVICE:

COMMUNITY FUNDING:

GCAC, THROUGH GRANT MAKING GUIDELINES AND PROCEDURES, SUPPORTS

NONPROFIT ART ORGANIZATIONS AND PROFESSIONAL ARTISTS THAT PROVIDE ARTS

AND CULTURAL PROGRAMMING TO THE RESIDENTS OF AND VISITORS TO COLUMBUS

INCLUDING, WITHOUT LIMITATIONS, ARTS EXHIBITS, CONCERTS, AND OTHER

PROGRAMS FOR THE VISUAL AND PERFORMING ARTS.

GCAC USES FUNDS IT RECEIVES FROM THE CITY OF COLUMBUS HOTEL/MOTEL

EXCISE TAX AND ADMISSIONS TAX (FROM VENUES OTHER THAN NATIONWIDE ARENA)

TO SUPPORT A BROAD ARRAY OF PROGRAMS. IN ACCORDANCE WITH ITS CONTRACT,

GCAC HAS TO DIRECT AT LEAST 75% OF ALL CITY MONIES IT RECEIVES FOR

COMMUNITY FUNDING. GRANTS ARE AWARDED TO LOCAL ARTS ORGANIZATIONS FOR

GENERAL OPERATING SUPPORT, PROJECTS, AND THRIVE. FUNDING CAN ALSO BE

USED FOR INDIVIDUAL ARTIST GRANTS/FELLOWSHIPS, INTERNATIONAL ARTIST

EXCHANGE, ARTIST WORKSHOPS AND DESIGNATED PROJECT SUPPORT. IF ELIGIBLE

EXPENDITURES DO NOT TOTAL 75%, THE FUNDS WILL BE RESERVED AND CARRIED

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) 2020

032211 11-20-20

**Employer identification number** Name of the organization 31-0833384 GREATER COLUMBUS ARTS COUNCIL OVER TO THE NEXT CONTRACT YEAR FOR ALLOCATION. GCAC USES FUNDS IT RECEIVES FROM FRANKLIN COUNTY TO SUPPORT LOCAL ARTS ORGANIZATIONS FOR GENERAL OPERATING SUPPORT, PROJECTS, AND THRIVE. FUNDING CAN ALSO BE USED FOR INDIVIDUAL ARTIST GRANTS. IN ACCORDANCE WITH ITS CONTRACT, GCAC HAS TO DIRECT AT LEAST 95% OF COUNTY MONIES IT RECEIVES FOR COMMUNITY FUNDING EXPENSES. IF ELIGIBLE EXPENDITURES DO NOT TOTAL 95%, THE FUNDS WILL BE RESERVED AND CARRIED OVER TO THE NEXT CONTRACT YEAR FOR ALLOCATION. FORM 990, PART III, LINE 4B, DESCRIPTION OF PROGRAM SERVICE: COLUMBUS ARTS FESTIVAL: GCAC ORGANIZES THE ANNUAL COLUMBUS ARTS FESTIVAL, WHICH IS HELD IN EARLY JUNE. THE FESTIVAL PROVIDES OPPORTUNITIES FOR THE COMMUNITY TO VIEW AND PURCHASE WORK OF LOCAL AND NATIONAL ARTISTS, LISTEN TO CONTINUOUS LIVE MUSIC, AND PARTICIPATE IN ART ACTIVITIES FREE OF CHARGE. THE REVENUES OF THE FESTIVAL REPRESENT CORPORATE SPONSORSHIPS, CONTRIBUTIONS, AND BOOTH AND TENT RENTALS, AS WELL AS REVENUES FROM CONCESSIONS. FUNDS RECEIVED FROM THE CITY OF COLUMBUS HOTEL/MOTEL EXCISE TAX ARE NOT USED TO SUPPORT THE COLUMBUS ARTS FESTIVAL. FESTIVAL EXPENSES ARE FOR OPERATIONAL AND ADMINISTRATIVE EXPENSES, PROGRAMMING, EQUIPMENT, MATERIALS, AND SUPPLIES. DUE TO COVID-19, THERE WAS NO FESTIVAL HELD DURING THE FISCAL YEAR 2020.

FORM 990, PART III, LINE 4C, DESCRIPTION OF PROGRAM SERVICE:

Name of the organization  GREATER COLUMBUS ARTS COUNCIL	Employer identification number 31-0833384
FILM COLUMBUS:	
THE GREATER COLUMBUS FILM COMMISSION (FILM COLUMBUS) AIMS	TO GROW THE
FILM INDUSTRY IN COLUMBUS AND CENTRAL OHIO BY CREATING JOB	S AND
PROVIDING SIGNIFICANT ECONOMIC IMPACT FOR THE AREA. FILM C	OLUMBUS
STRIVES TO BUILD COLUMBUS AS A TOP CITY FOR FILM EDUCATION	, EXHIBITION,
AND PRODUCTION. BEGINNING IN 2020, FILM COLUMBUS BECAME A	DIVISION OF
THE GREATER COLUMBUS ARTS COUNCIL AND IS PRIMARILY SUPPORT	ED BY FUNDS
PROVIDED BY THE CITY OF COLUMBUS.	
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:	
COMMUNITY ARTS PROGRAMS:	
PROGRAMS TRANSFERRED TO OHIO ALLIANCE FOR ARTS EDUCATION D	URING 2012:
THE ART IN THE HOUSE PROGRAM DELIVERS AFTERSCHOOL AND SUMM	ER ARTS
PROGRAMMING TO STUDENTS THROUGH THE YOUTH PROGRAMS OF THE	COLUMBUS
FEDERATION OF SETTLEMENTS AND COMMUNITY DEVELOPMENT FOR AL	L PEOPLE.
WORKING IN PARTNERSHIP WITH LOCAL TEEN PROGRAM TRANSIT ART	S, ART IN THE
HOUSE IS ABLE TO OFFER A NETWORK OF ARTS OPPORTUNITIES FOR	K-12
STUDENTS IN COLUMBUS. THE ARTISTS IN SCHOOLS PROGRAM CONNE	CTS
PROFESSIONAL ARTISTS AND ARTS GROUPS WITH K-12 SCHOOLS AND	OTHER
EDUCATIONAL VENUES ACROSS THE STATE. THE TEACHING ARTISTS	OFFER
PROGRAMS RANGING FROM CLASSROOM WORKSHOPS TO LONG-TERM RES	IDENCIES. THE
PROGRAM PROVIDES A WAY FOR SCHOOLS, PARKS AND RECREATION C	ENTERS,
SENIOR FACILITIES, CORRECTIONAL FACILITIES, LIBRARIES, AS	WELL AS
PRIVATE SECTOR BUSINESSES AND INDIVIDUALS, TO ACCESS ARTIS	
THE FRANKLIN COUNTY NEIGHBORHOOD ARTS PROGRAM SUPPORTS ART	

032212 11-20-20

Schedule O (Form 990 or 990-EZ) 2020

Rame of the organization

GREATER COLUMBUS ARTS COUNCIL

PROGRAMMING WITHIN A WIDE VARIETY OF ORGANIZATIONS ACROSS FRANKLIN

COUNTY. THIS SMALL GRANT PROGRAM IS DESIGNED TO SUPPORT

COMMUNITY-MINDED PROJECTS THAT MAY HAVE DIFFICULTY ACCESSING

TRADITIONAL ARTS FUNDING SOURCES. DURING THE YEARS ENDED DECEMBER 31,

2020 AND 2019, GCAC PROVIDED SUPPORT TO ASSIST THESE PROGRAMS.

#### JUNIOR ACHIEVEMENT:

THE PROGRAM IS THE WORLD'S LARGEST ORGANIZATION DEDICATED TO EDUCATING

STUDENTS ABOUT WORKFORCE READINESS, ENTREPRENEURSHIP, AND FINANCIAL

LITERACY THROUGH EXPERIENCED, HANDS ON PROGRAMS. JUNIOR ACHIEVEMENT

PROGRAMS HELP PREPARE YOUNG PEOPLE FOR THE REAL WORLD BY SHOWING THEM

HOW TO GENERATE WEALTH AND EFFECTIVELY MANAGE IT, HOW TO CREATE JOBS

WHICH MAKE THEIR COMMUNITIES MORE ROBUST, AND HOW TO APPLY

ENTREPRENEURIAL THINKING TO THE WORKFORCE. STUDENTS PUT THESE LESSONS

INTO ACTION AND LEARN THE VALUE OF CONTRIBUTING TO THEIR COMMUNITIES.

DURING THE YEARS ENDED DECEMBER 31, 2020 AND 2019, GCAC SPONSORED THIS

PROGRAM.

## LOCAL ART PROJECTS:

TO PROVIDE SERVICES AND/OR FUNDING FOR LOCAL ART PROJECTS. DUE TO

COVID-19, NO FUNDING WAS PROVIDED TO SUPPORT THIS PROGRAM DURING THE

YEAR ENDED DECEMBER 31, 2020. DURING 2019, GCAC WAS CONTRACTED BY

KROGER COMPANY TO HELP FACILITATE THEIR ART MURAL PROJECT FOR A STORE.

GCAC HELPED NARROW DOWN THE SEARCH FOR QUALIFIED ARTISTS AND ENSURED

ALL MURALS WERE CREATED WITHIN KROGER'S GUIDELINES.

### FISCAL SPONSOR

**Employer identification number** Name of the organization GREATER COLUMBUS ARTS COUNCIL 31-0833384 IN 2013, GCAC BEGAN A FISCAL SPONSOR PROGRAM TO SUPPORT ORGANIZATIONS ENGAGED IN ACTIVITIES RELATED TO GCAC'S MISSION THAT ARE APPLYING FOR TAX EXEMPT STATUS. THE ORGANIZATIONS OPERATE AS A PROJECT OF GCAC UNTIL OBTAINING TAX EXEMPT STATUS. GCAC RECEIVES GRANTS, TAX-DEDUCTIBLE CONTRIBUTIONS, AND OTHER REVENUES THAT ARE MADE AVAILABLE TO THE FISCALLY SPONSORED ORGANIZATION FOR THE PURPOSE OF CARRYING OUT THE PROJECT. GCAC RECEIVES AN ADMINISTRATIVE FEE FOR THE SERVICES PROVIDED. EXPENSES \$ 51,124. INCLUDING GRANTS OF \$ 0. REVENUE \$ 1,177. FORM 990, PART VI, SECTION A, LINE 7A: PER GCAC'S ANNUAL CONTRACT WITH THE CITY OF COLUMBUS, THE CITY WILL BE REPRESENTED BY FIVE MEMBERS TO THE GCAC BOARD OF TRUSTEES: TWO MEMBERS APPOINTED BY THE MAYOR, TWO MEMBERS APPOINTED BY CITY COUNCIL, AND ONE MEMBER RECOMMENDED BY THE MAYOR AND APPROVED BY CITY COUNCIL. PER GCAC'S ANNUAL CONTRACT WITH FRANKLIN COUNTY, THE COUNTY WILL BE REPRESENTED BY THREE MEMBERS APPOINTED TO THE GCAC BOARD OF TRUSTEES. FORM 990, PART VI, SECTION B, LINE 11B: THE FORM 990 IS PREPARED BY AN OUTSIDE CPA FIRM AND THEN IS REVIEWED BY THE AUDIT COMMITTEE. THE CPA FIRM PRESENTS THE FORM 990 TO THE FULL BOARD FOR APPROVAL. FORM 990, PART VI, SECTION B, LINE 12C: THE MEMBERS OF THE BOARD OF TRUSTEES COMPLETE A CONFLICT OF INTEREST STATEMENT AT THE BEGINNING OF EVERY BOARD YEAR, JULY 1ST. STAFF COMPLETES A CONFLICT OF INTEREST STATEMENT AT THE DATE OF HIRE AND EACH YEAR

THEREAFTER AT THE BEGINNING OF THE BOARD YEAR, JULY 1ST.

THESE DOCUMENTS Schedule O (Form 990 or 990-EZ) 2020

GREATER COLUMBUS ARTS COUNCIL	31-0833384	
ARE THEN REVIEWED AND KEPT ON FILE.		
FORM 990, PART VI, SECTION B, LINE 15:		
THE COMPENSATION OF THE PRESIDENT IS REVIEWED BY THE EXECU	TIVE COMMITTEE	
ANNUALLY USING COMPARABILITY DATA IN MAKING THAT DECISION.	THE PRESIDENT	
REVIEWS AND APPROVES COMPENSATION RANGES FOR OTHER STAFF W	ITHIN THE	
ORGANIZATION AND USES COMPARABILITY DATA IN CONJUCTION WITH COMPENSATION		
DECISIONS. ALL DECISIONS REGARDING COMPENSATION ARE PROPE	RLY DOCUMENTED BY	
THE ORGANIZATION.		
FORM 990, PART VI, SECTION C, LINE 19:		
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND CONFLIC	T OF INTEREST	
POLICY AVAILABLE TO THE PUBLIC UPON REQUEST. FINANCIAL ST	ATEMENTS ARE	
POSTED WITHIN THE ANNUAL REPORT ON THE ORGANIZATION'S WEBS	ITE.	
FORM 990, PART XII, LINE 2C, OVERSIGHT OF FINANCIAL STATEM	ENT AUDIT:	
THE ORGANIZATION HAS A COMMITTEE THAT ASSUMES RESPONSIBILI	TY FOR	
OVERSIGHT OF THE AUDIT AND SELECTION OF THE INDEPENDENT AC	COUNTANT.	
THE PROCESS BY WHICH THE ORGANIZATION OVERSEES THE AUDIT A	ND SELECTS	
THE INDEPENDENT ACCOUNTANT HAS NOT CHANGED FROM PRIOR YEAR	s.	