Form **990**

Department of the Treasury

** PUBLIC DISCLOSURE COPY ** Return of Organization Exempt From Income Tax

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

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

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

OMB No. 1545-0047
2023

Open to Public Inspection

2024 A For the 2023 calendar year, or tax year beginning JUL 1, 2023 and ending JUN Check if applicable: C Name of organization D Employer identification number Address change SPRINGBOARD FOR THE ARTS Name change 41-1690483 Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ termin-ated 262 UNIVERSITY AVENUE WEST 651-292-4381 6,192,903. City or town, state or province, country, and ZIP or foreign postal code **G** Gross receipts \$ Amended return 55103 SAINT PAUL, MN H(a) Is this a group return Applica-tion pending F Name and address of principal officer: LAURA ZABEL for subordinates? Yes X No SAME AS C ABOVE **H(b)** Are all subordinates included? Yes Tax-exempt status: X = 501(c)(3) = 501(c)(insert no.) 4947(a)(1) or If "No," attach a list. See instructions WWW.SPRINGBOARDFORTHEARTS.ORG H(c) Group exemption number K Form of organization: X Corporation Other L Year of formation: 1991 M State of legal domicile: MN Trust Association Part I Summary Briefly describe the organization's mission or most significant activities: TO CULTIVATE VIBRANT ARTS **Activities & Governance** COMMUNITIES BY CONNECTING ARTISTS WITH THE SKILLS, INFORMATION AND if the organization discontinued its operations or disposed of more than 25% of its net assets. 11 3 Number of voting members of the governing body (Part VI, line 1a) $\overline{11}$ Number of independent voting members of the governing body (Part VI, line 1b) 4 5 Total number of individuals employed in calendar year 2023 (Part V, line 2a) Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 0. 7h **Prior Year Current Year** $10,9\overline{56,724}$ 5,389,992. Contributions and grants (Part VIII, line 1h) 8 653,600. 623,991. Program service revenue (Part VIII, line 2g) 42,093. 167,491. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 29,677. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 6,089. 11 6,187,563. 11,682,094. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 403,180. 3,056,600. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 1,980,748. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1,820,620. 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 1,962,881. 1,830,333. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 6,867,681. 4,186,681. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 7,495,413. -680,118. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 5 16,056,163. 15,272,169. Total assets (Part X, line 16) 1,862,723. 2,091,488. 21 Total liabilities (Part X, line 26) 三年 14,193,440. 13,180,681 22 Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. <u> 2UBI</u> Signature of officer Date Sign LAURA ZABEL, EXECUTIVE DIRECTOR Here Type or print name and title Date PTIN Preparer's signature Print/Type preparer's name 01/30/25 self-employed P00046853 NEAL EVERT Paid NEAL EVERT Firm's name CARPENTER, EVERT & ASSOCIATES, LTD. Firm's EIN 41-1534805 Preparer 7760 FRANCE AVE S, SUITE 940 Use Only Firm's address Phone no. (952) 831-0085BLOOMINGTON, MN 55435

May the IRS discuss this return with the preparer shown above? See instructions

X Yes

| Pai | t III Statement of Program Service Accomplishments |
|-----------|--|
| | Check if Schedule O contains a response or note to any line in this Part III |
| 1 | Briefly describe the organization's mission: |
| | TO CULTIVATE VIBRANT ARTS COMMUNITIES BY CONNECTING ARTISTS WITH THE |
| | SKILLS, INFORMATION AND SERVICES THEY NEED TO MAKE A LIVING AND A |
| | LIFE. |
| | |
| 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 O. |
| 3 | Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No |
| | If "Yes," describe these changes on Schedule O. |
| 4 | Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. |
| | Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and |
| | revenue, if any, for each program service reported. |
| 4a | (Code:) (Expenses \$3, 435, 621. including grants of \$3, 056, 600.) (Revenue \$) |
| | |
| | THE RURAL PROGRAM SUPPORTS RURAL ARTISTS AND COMMUNITIES IN THE UPPER |
| | MIDWEST THROUGH CAREER DEVELOPMENT WORKSHOPS AND CONSULTATIONS, A |
| | RESOURCE CENTER, A VISITING ARTIST PROGRAM AND COMMUNITY SPACE IN |
| | FERGUS FALLS, A RURAL ARTIST FELLOWSHIP, CONVENINGS THAT SUPPORT |
| | GEOGRAPHIC EXCHANGE, AND CUSTOMIZED SUPPORT FOR RURAL LEADERS |
| | INTERESTED IN COLLABORATING WITH THEIR CREATIVE COMMUNITY. |
| | |
| | OUR LOCAL PROGRAMS FOR ARTISTS IN OTTER TAIL COUNTY FOCUS ON DIRECT |
| | RESOURCES AND SUPPORT, INCLUDING A RESOURCE CENTER AND COMMUNITY SPACE |
| | IN DOWNTOWN FERGUS FALLS, AN EQUIPMENT LENDING LIBRARY, A GUARANTEED |
| | MINIMUM INCOME PROGRAM, AND ONGOING WORKSHOPS AND CONSULTATIONS FOR |
| 4b | |
| | OUR COMMUNITY DEVELOPMENT PROGRAM FOSTERS VIBRANT, EQUITABLE, AND |
| | INCLUSIVE ENVIRONMENTS BY FORGING VITAL CONNECTIONS BETWEEN ARTISTS AND |
| | THEIR COMMUNITIES. OPERATING BOTH LOCALLY AND NATIONALLY, WE |
| | COLLABORATE WITH CITY GOVERNMENTS, NEIGHBORHOOD ORGANIZATIONS, PRIVATE |
| | INSTITUTIONS, AND COMMUNITY-CENTRIC GROUPS TO HARNESS ARTISTS' POWER IN |
| | COMMUNITY DEVELOPMENT, CREATIVE PLACEMAKING, AND INNOVATIVE |
| | PROBLEM-SOLVING. |
| | |
| | OVER THE PAST YEAR, OUR COMMUNITY DEVELOPMENT TEAM HAS LED A RANGE OF |
| | WORKSHOPS, ACTIVATIONS, AND GATHERINGS THAT ENGAGED LOCAL NEIGHBORHOODS |
| | LIKE FROGTOWN AND RONDO, AS WELL AS RURAL AND URBAN AREAS SUCH AS THE |
| | IRON RANGE, CHICAGO, AND RAPID CITY. WE TRAINED AND SUPPORTED ARTISTS |
| 4c | (Code:) (Expenses \$1, 409, 200. including grants of \$) (Revenue \$) |
| | SPRINGBOARD FOR THE ARTS' ECONOMIC OPPORTUNITY PROGRAMMING ENCOMPASSES |
| | PROFESSIONAL DEVELOPMENT RESOURCES FOR ARTISTS, ECONOMIC OPPORTUNITY |
| | PROGRAMS, ACCESS TO HEALTH AND LEGAL RESOURCES, AND PHYSICAL RESOURCE |
| | CENTERS. IN FY24, WE CONTINUED TO BUILD THE CAPACITY OF OUR RESOURCE CENTER FOR |
| | |
| | ARTISTS, OFFERING COMPUTER WORKSTATIONS OUTFITTED WITH GRAPHIC AND |
| | SLIDE SCANNERS, ADOBE CREATIVE CLOUD, MICROSOFT OFFICE, A PUBLICATIONS |
| | LIBRARY, AND OTHER GRANT-MAKING AND OPPORTUNITY DATABASES. WE EXPANDED |
| | ON OUR IN-PERSON 1:1 TA AND MONTHLY SPECIAL TOPIC CLINICS AND DEVELOPED |
| | A CURRICULUM AROUND IN-PERSON PHOTODOCUMENTARY SESSIONS. OUR A/V CLOSET |
| | ALLOWS ARTISTS TO CHECK OUT ART TECHNOLOGY SUCH AS CAMERAS AND LIGHTS. |
| | WE'VE CONTINUED OUR LEGAL REFERRAL SERVICE, CONNECTING OVER 100 ARTISTS |
| 4d | Other program services (Describe on Schedule O.) |
| <u> </u> | (Expenses \$ 590,422. including grants of \$) (Revenue \$) Total program service expenses 6,156,041. |
| <u>4e</u> | Total program service expenses 6,156,041. |
| | Form 990 (2023) |

Form 990 (2023) SPRINGBOARD FOR THE ARTS
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_ | Х | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? See instructions | 2 | X | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for | | | |
| | public office? If "Yes," complete Schedule C, Part I | 3 | | X |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect | | | |
| | during the tax year? If "Yes," complete Schedule C, Part II | 4 | | Х |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or | | | |
| | similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III | 5 | | Х |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to | | | |
| | provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I | 6 | | Х |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, | ۰ | | |
| ' | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | | X |
| | Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i> | - '- | | 1 |
| 8 | , , | | | x |
| • | Schedule D, Part III | 8 | | |
| 9 | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for | | | |
| | amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? | | | |
| | If "Yes," complete Schedule D, Part IV | 9 | | <u> </u> |
| 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 | | <u> X</u> |
| 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 | X | |
| b | Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total | | | |
| | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | | X |
| 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 | | X |
| d | Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in | | | |
| | Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | | X |
| 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 | | | |
| | Schedule D, Parts XI and XII | 12a | Х | |
| h | Was the organization included in consolidated, independent audited financial statements for the tax year? | | | |
| - | If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 12b | | X |
| 13 | 1 | 13 | | X |
| 14a | Did the appropriation projection of the construction of the Helical Obstace | 14a | | X |
| 14a b | Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, | 1 1 a | | |
| D | investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 | | | |
| | | 14b | | x |
| 45 | or more? If "Yes," complete Schedule F, Parts I and IV | 140 | | |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any | 4- | | _v |
| 40 | foreign organization? If "Yes," complete Schedule F, Parts II and IV | 15 | | <u> </u> |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to | | | |
| | or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV | 16 | | X |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, | | | ,, |
| | column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions | 17 | | <u> </u> |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines | | | |
| | 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | X | — |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," | | | l _ |
| | complete Schedule G, Part III | 19 | | X |
| 20 a | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | | X |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | |
| 21 | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or | | | |
| | domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 21 | X | |

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|-------|---|---------|-----|----------|
| Form | 990 (2023) SPRINGBOARD FOR THE ARTS 41-169 t IV Checklist of Required Schedules (continued) | 0483 | Р | age 4 |
| 1 0.1 | 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 |
| | 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 | | |
| | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | | | |
| 25a | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit | | | x |
| | transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | |
| D | 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 | 25b | | x |
| 26 | Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current | 250 | | |
| 20 | 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 | | х |
| 27 | Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, | . 20 | | |
| | 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 | | х |
| 28 | Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, | | | |
| | instructions for applicable filing thresholds, conditions, and exceptions): | | | |
| 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 | | Х |
| | A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If | | | |
| | "Yes," complete Schedule L, Part IV | 28c | | X |
| 29 | Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M | . 29 | Х | |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation | | | |
| | contributions? If "Yes," complete Schedule M | | | <u>X</u> |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I | . 31 | | X |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete | | | |
| | Schedule N, Part II | 32 | | X |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | | | ٦, |
| 0.4 | sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I | 33 | | <u> </u> |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and | | | v |
| OE - | Part V, line 1 | 34 | | X |
| | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | |
| a | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity | 254 | | |
| | within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | 35b | | \vdash |

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

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

Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?

Note: All Form 990 filers are required to complete Schedule O

38 X

Part V Statements Regarding Other IRS Filings and Tax Compliance

| Check it Schedule O contains a response of note to any line in this Part v | | | | | | | | |
|--|--|----|-----|----|-----|----|--|--|
| | | | | | Yes | No | | |
| 1a | Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable | 1a | 359 | | | | | |
| b | Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable | 1b | 0 | | | | | |
| С | c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming | | | | | | | |
| | (gambling) winnings to prize winners? | | | 1c | X | | | |

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Form 990 (2023) SPRINGBOARD FOR THE ARTS 41-1690483 Page 5
Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)
Yes No

| | | | | 162 | INO | | | |
|----|--|------------------------------|-----|-----|-----|--|--|--|
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, | | | | | | | |
| | filed for the calendar year ending with or within the year covered by this return | 2a 25 | | 7.7 | | | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax return | ns? | 2b | Х | | | | |
| За | · · · · · · · · · · · · · · · · · · · | | 3a | | X | | | |
| | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule | | 3b | | | | | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other a | | | | ٦, | | | |
| | financial account in a foreign country (such as a bank account, securities account, or other financial a | ccount)? | 4a | | X | | | |
| b | If "Yes," enter the name of the foreign country | (50.4.5) | | | | | | |
| _ | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ad | | _ | | v | | | |
| | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | | 5a | | X | | | |
| | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction. | | 5b | | | | | |
| | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | | 5c | | | | | |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the | | 60 | | х | | | |
| h | any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions. | one or gifte | 6a | | -25 | | | |
| b | and the state of t | | 6b | | | | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | | | | | | |
| a | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser | vices provided to the payor? | 7a | | х | | | |
| | | payor. | 7b | | | | | |
| | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was | | | | | | | |
| Ū | to file Form 8282? | | 7c | | х | | | |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | 7d | | | | | | |
| е | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co | | 7e | | | | | |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra | | 7f | | | | | |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Fo | | 7g | | | | | |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiza | tion file a Form 1098-C? | 7h | | | | | |
| 8 | 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the | | | | | | | |
| | sponsoring organization have excess business holdings at any time during the year? | | 8 | | | | | |
| 9 | Sponsoring organizations maintaining donor advised funds. | | | | | | | |
| а | Did the sponsoring organization make any taxable distributions under section 4966? | | 9a | | | | | |
| b | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? \dots | | 9b | | | | | |
| 10 | Section 501(c)(7) organizations. Enter: | 1 1 | | | | | | |
| а | Initiation fees and capital contributions included on Part VIII, line 12 | 10a | | | | | | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | 10b | | | | | | |
| 11 | Section 501(c)(12) organizations. Enter: | 1 1 | | | | | | |
| а | Gross income from members or shareholders | 11a | | | | | | |
| b | Gross income from other sources. (Do not net amounts due or paid to other sources against | | | | | | | |
| | amounts due or received from them.) | 11b | | | | | | |
| | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form | | 12a | | | | | |
| | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | 12b | | | | | | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? | | 13a | | | | | |
| а | Note: See the instructions for additional information the organization must report on Schedule O. | | isa | | | | | |
| h | Enter the amount of reserves the organization is required to maintain by the states in which the | | | | | | | |
| | organization is licensed to issue qualified health plans | 13b | | | | | | |
| c | Enter the amount of reserves on hand | 13c | | | | | | |
| | | 100 | 14a | | Х | | | |
| | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul | | 14b | | | | | |
| 15 | Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner | | | | | | | |
| | excess parachute payment(s) during the year? | | 15 | | х | | | |
| | If "Yes," see the instructions and file Form 4720, Schedule N. | | | | | | | |
| 16 | Is the organization an educational institution subject to the section 4968 excise tax on net investment | income? | 16 | | Х | | | |
| | If "Yes," complete Form 4720, Schedule O. | | | | | | | |
| 17 | Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac | tivities | | | | | | |
| | that would result in the imposition of an excise tax under section 4951, 4952 or 4953? | | 17 | | | | | |
| | If "Yes," complete Form 6069. | | | | | | | |
| | | | | ~~~ | | | | |

332005 12-21-23

SPRINGBOARD FOR THE ARTS 41-1690483 Form 990 (2023) 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. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 11 **1a** Enter the number of voting members of the governing body at the end of the tax year 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. 11 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 6 Х 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Х 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 Did the organization have a written document retention and destruction policy? 14 Х 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Х The organization's CEO, Executive Director, or top management official 15a

Section C. Disclosure

| 17 | List the states with which a copy of this Form 990 is required to be filed | MN |
|----|--|----|

If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.

Other officers or key employees of the organization

exempt status with respect to such arrangements?

262 UNIVERSITY AVENUE WEST,

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

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

SAINT

b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's

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

taxable entity during the year?

20 State the name, address, and telephone number of the person who possesses the organization's books and records JOHN BELL - 651-789-0163

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a

Form **990** (2023)

Х

Х

15b

16a

16h

PAUL,

MN

55103

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

| (A) | (B) | (C) | | (D) | (E) | (F) | | | | |
|---------------------------------|-------------------|--------------------------------|--|---------|--------------|---------------------------------|-----------|----------------------|------------------------------|-----------------|
| Name and title | Average | (do | Position (do not check more than one box, unless person is both an | | Reportable | Reportable | Estimated | | | |
| | hours per week | | , unle: cer ar | | | | | compensation from | compensation from related | amount of other |
| | (list any | tor | | | | | | the | organizations | compensation |
| | hours for | direc | | | | pg. | | organization | (W-2/1099-MISC/ | from the |
| | related | tee or | ustee | | | ensat | | (W-2/1099-MISC/ | 1099-NEC) | organization |
| | organizations | al trus | nal tr | | loyee | comp | | 1099-NEC) | | and related |
| | below line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | organizations |
| (1) LAURA ZABEL | 40.00 | 드 | 트 | Ó | 포 | 工高 | Ľ. | | | |
| EXECUTIVE DIRECTOR | | | | Х | | | | 223,807. | 0. | 17,325. |
| (2) JUN-LI WANG | 40.00 | | | | | | | | | |
| ASSOCIATE DIRECTOR | | | | | | Х | | 133,308. | 0. | 13,372. |
| (3) AMANDA KALER | 40.00 | | | | | | | | | |
| ADVANCEMENT DIRECTOR | | | | | | Х | | 101,769. | 0. | 3,519. |
| (4) WILLIAM PIERCE II | 40.00 | | | | | | | | | |
| OPERATIONS AND FINANCE DIRECTOR | | | | X | | | | 70,769. | 0. | 9,054. |
| (5) ANDRIANA ABARIOTES | 1.00 | | | | | | | | | |
| TREASURER | | Х | | Х | | | | 0. | 0. | 0. |
| (6) ANISHA MURPHY | 1.00 | | | | | | | _ | _ | _ |
| DIRECTOR | | Х | | | | | | 0. | 0. | 0. |
| (7) JARRETT REED | 2.00 | 1 | | | | | | | | |
| PRESIDENT | | Х | | Х | | | | 0. | 0. | 0. |
| (8) MADDE GIBBA | 1.00 | | | | | | | | | |
| DIRECTOR | 1 00 | Х | | | | | | 0. | 0. | 0. |
| (9) MAUREEN RAMIREZ | 1.00 | | | | | | | | • | • |
| DIRECTOR | 1 00 | Х | | | | | | 0. | 0. | 0. |
| (10) ROBERT RANSICK | 1.00 | ., | | | | | | | | • |
| DIRECTOR | 1 00 | Х | | | | | | 0. | 0. | 0. |
| (11) ROSE TENG DIRECTOR | 1.00 | х | | | | | | 0. | 0. | • |
| (12) SARAH SWEDBURG | 1.00 | Λ | | | | | | 0. | 0. | 0. |
| DIRECTOR | 1.00 | Х | | х | | | | 0. | 0. | 0. |
| (13) SARINA OTAIBI | 1.00 | Δ | | ^ | | | | 0. | 0. | 0. |
| DIRECTOR | 1.00 | Х | | | | | | 0. | 0. | 0. |
| (14) SHANNON PETTITT | 1.00 | 22 | | | | | | 0. | 0. | <u></u> |
| DIRECTOR | 1.00 | х | | | | | | 0. | 0. | 0. |
| 211201011 | | 25 | | | | | | • | • | |
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| Part | Geotion A. Omoero, Birectoro, True | | ыоу | ees, | | | gnes | st C | | , | $\overline{}$ | | (F) | |
|------------|--|--------------------------|--------------------------------|-----------------------|------------------|--------------|------------------------------|----------|--------------------------|-------------------------|--|----------|--------------------|------------|
| | (A) | (B) (C) Average Position | | | | | | | (D) | (E) | | _ | (F) | |
| | Name and title | hours per | | not c | heck | more | than | | Reportable compensation | Reportable compensation | - 1 | | timate nount | |
| | | week | | | ss per nd a d | | | | from | from related | - 1 | | other | Oi |
| | | (list any | ctor | | | | | | the | organization | ons compensations from the companization compensation compensation companization compensations compensation compensations compensations compensations compensations compensations compensations compensations compensations compensation compensations compensation compensation compensations compensat | | | tion |
| | | hours for | r dire | , | | | ted | | organization | (W-2/1099-MIS | | | om th | е |
| | | related | stee c | truste | | | pensa | | (W-2/1099-MISC/ | 1099-NEC) | | | | |
| | | organizations below | ual tru | ional | | ploye | t com | ١. | 1099-NEC) | | | | d relat anizati | |
| | | line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | | orga | ııızalı | OHS |
| | | | = | <u>=</u> | 0 | ~ | T 0 | - | | | \neg | | | |
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| | | | | | | | | | F20 (F2 | | $\overline{}$ | | 2 2 | 7.0 |
| | ubtotal | | | | | | | | 529,653. | | 0. | 4 | 3,2 | 0. |
| | otal from continuation sheets to Part VI | | | | | | | | 529,653. | | 0. | 1 | 3,2 | |
| | otal (add lines 1b and 1c)otal number of individuals (including but n | | | | | | | | | 000 of reportable | | | J , <u>L</u> | 70. |
| | ompensation from the organization | ot illilited to th | 030 | 11310 | u ac | JOVC | , vvi | 10 11 | cccived more than \$100, | ooo or reportable | , | | | 3 |
| | omponeumen men une er gan naanen | | | | | | | | | | | | Yes | No |
| 3 D | old the organization list any former officer | , director, trust | ee, ł | кеу е | empl | loye | e, or | hiç | ghest compensated emp | loyee on | | | | |
| li | ne 1a? If "Yes," complete Schedule J for s | uch individual | | | | | | | - | | [| 3 | | Х |
| | or any individual listed on line 1a, is the su | | | | | | | | | | | | | |
| а | nd related organizations greater than \$150 | 0,000? If "Yes, | " co | mple | ete S | Sche | edule | e J | for such individual | | | 4 | X | |
| | olid any person listed on line 1a receive or a | • | | | | • | | | • | | | | | 7.7 |
| | endered to the organization? If "Yes," com | nplete Schedule | e J f | or su | ıch <u>ı</u> | pers | on | | | | <u></u> | 5 | | Х |
| | on B. Independent Contractors | mnanaatad ina | ممما | . n d a . | nt 0. | | o o t o | ۲0 t | hat received more than | 100,000 of some | | ion fre | | |
| | Complete this table for your five highest co ne organization. Report compensation for | | | | | | | | | | Jensai | .ion irc | OITI | |
| | (A) | tric calcindar y | Jai | JII GII | ig w | 1011 | J1 VVI | CI III | (B) | cai. | | (C | :) | |
| | Name and business | address | | | | | | | Description of s | ervices | С | omper | | n |
| EMEF | GING CURATORS INSTITU | JTE | | | | | | | | | | | | |
| | UNIVERSITY AVE. W., | | | | | | | 4 | NONPROFIT CO | NSULTING | | 10 | 5,7 | 75. |
| | TIPPING PRESS, 1400 V | | N | ST | • | NE | | | FISCAL SPONS | ORSHIP | | | | |
| #200 | , MINNEAPOLIS, MN 554 | 13 | | | | | | | PARTNER | | | 10 | 0,0 | <u>32.</u> |
| | | | | | | | | | | | | | | |
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Form **990** (2023)

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

\$100,000 of compensation from the organization

Form 990 (2023) SPRINGB
Part VIII Statement of Revenue

| | | Check if Schedule O contains a response of | or note to any 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 : | Federated campaigns 1a | | | | | |
| Contributions, Gifts, Grants and Other Similar Amounts | | | | | | | |
| ية ق | | Membership dues 1b 1c | | | | | |
| ffs, | | Related organizations 1d | | | | | |
| ية إق | | Government grants (contributions) 1e | 322,413. | | | | |
| Sir | | | <u> </u> | | | | |
| utic er | • | All other contributions, gifts, grants, and similar amounts not included above 1f 5, | 067,579. | | | | |
| ĕ₽ | _ | | 001,313. | | | | |
| on Dd | | | | 5,389,992. | | | |
| Oa | | Total. Add lines 1a-1f | Business Code | 5,505,552. | | | |
| | • | FISCAL SPONSORSHIP | 711300 | 200,134. | 200,134. | | |
| ice | | PROJECT MANAGEMENT | 711300 | 189,739. | 189,739. | | |
| Program Service Revenue | | ARTIST CONSULTATIONS | 711300 | 98,926. | 98,926. | | |
| m S | | CONTRACT WORKSHOPS | 711300 | 48,972. | 48,972. | | |
| gra Re | | RESOURCE CTR | 711300 | 25,347. | 25,347. | | |
| ľo | | | 711300 | | 60,873. | | |
| ъ | | All other program service revenue | | 60,873. | 00,073. | | |
| - | | Total. Add lines 2a-2f | | 623,991. | | | |
| | 3 | Investment income (including dividends, interes | | 167 401 | | | 167 /01 |
| | | other similar amounts) | | 167,491. | | | 167,491. |
| | 4 | Income from investment of tax-exempt bond pr | | | | | |
| | 5 | Royalties(i) Real | (ii) Personal | | | | |
| | _ | | (II) Personal | | | | |
| | | Gross rents 6a | | | | | |
| | | Less: rental expenses 6b | | | | | |
| | | Rental income or (loss) 6c | | | | | |
| | | Net rental income or (loss) | (ii) Othor | | | | |
| | 7 8 | Gross amount from sales of (i) Securities | (ii) Other | | | | |
| | | assets other than inventory 7a | | | | | |
| • | ľ | Less: cost or other basis | | | | | |
| nu | | and sales expenses | | | | | |
| eve | | Gain or (loss) | | | | | |
| her Revenue | | Net gain or (loss) | | | | | |
| | 8 8 | Gross income from fundraising events (not including \$ 16 , 101 of | | | | | |
| δ | | | | | | | |
| | | contributions reported on line 1c). See | 5,340. | | | | |
| | | Part IV, line 18 8a 8b 8b | 5,340. | | | | |
| | | | 3,340. | 0. | | | |
| | | Net income or (loss) from fundraising events | | 0. | | | |
| | 9 8 | Gross income from gaming activities. See | | | | | |
| | | Part IV, line 19 9a Less: direct expenses 9b | | | | | |
| | | | | | | | |
| | | Net income or (loss) from gaming activities | | | | | |
| | 10 2 | Gross sales of inventory, less returns | | | | | |
| | | and allowances 10a Less: cost of goods sold 10b | | | | | |
| | | J | | | | | |
| - | | Net income or (loss) from sales of inventory | Business Code | | | | |
| sn | 11 - | OTHER INCOME | 711300 | 6,089. | 6,089. | | |
| eo Te | 116 | | ,11500 | 0,009. | 0,009. | | |
| Miscellaneous Revenue | k | | | | | | |
| Sce Be | | All other revenue | | | | | |
| Ē | | Total. Add lines 11a-11d | | 6,089. | | | |
| | 12 | Total revenue. See instructions | | 6,187,563. | 630,080. | 0. | 167,491. |
| | 14 | ו טומו ו כעבוועב. טבל וווטנו עלווטווט | | o, -o, , , , , , , , , , , , , , , , , , | 1 000,000. | ı • | <i>, _</i> |

332009 12-21-23

Form 990 (2023) SPRINGBOARD FOR THE ARTS Part IX Statement of Functional Expenses

| | ion 501(c)(3) and 501(c)(4) organizations must compl Check if Schedule O contains a respons | | | | X |
|---------|---|-----------------------|---|-------------------------------------|---------------------------------------|
| | not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
| 1 | Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 | 2,453,184. | 2,453,184. | | |
| 2 | Grants and other assistance to domestic individuals. See Part IV, line 22 | 603,416. | 603,416. | | |
| 3 | Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 | 000,220 | | | |
| 4 | Benefits paid to or for members | | | | |
| 5 | Compensation of current officers, directors, trustees, and key employees | | | | |
| 6 | Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | | | | |
| 7 | Other salaries and wages | 1,654,613. | 1,290,715. | 248,192. | 115,706. |
| 8 | Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | | | | |
| 9 | Other employee benefits | 191,469. | 146,361. | 45,108. | |
| 10 | Payroll taxes | 134,666. | 114,466. | 20,200. | |
| 11 a | Fees for services (nonemployees): | | | | |
| b | | 2,700. | 450. | 2,250. | |
| С | Accounting | 38,899. | 18,046. | 20,853. | |
| | Lobbying | • | , | | |
| | Professional fundraising services. See Part IV, line 17 Investment management fees | | | | |
| g | | | | | |
| Ŭ | column (A), amount, list line 11g expenses on Sch O.) | 1,094,493. | 1,041,360. | 44,667. | 8,466. |
| 12 | Advertising and promotion | 15,926. | 3,032. | 12,894. | |
| 13 | Office expenses | 46,681. | 40,334. | 6,347. | |
| 14 | Information technology | 82,940. | 63,330. | 19,610. | |
| 15 | Royalties | | | | |
| 16 | Occupancy | 90,275. | 82,521. | 7,754. | |
| 17 | Travel | 48,067. | 36,631. | 2,921. | 8,515. |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | | | | |
| 20 | Interest | 4,604. | 3,156. | 1,448. | |
| 21 | Payments to affiliates | 100 207 | 107 000 | 21 564 | |
| 22 | Depreciation, depletion, and amortization | 129,387. | 107,823. | 21,564. | |
| 23 | Insurance | 16,013. | 11,009. | 5,004. | |
| 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 0.) | | | | |
| а | MEALS AND ENTERTAINMENT | 107,102. | 80,851. | 26,251. | |
| b | PRINTING AND COPYING | 50,373. | 22,135. | 22,136. | 6,102. |
| С | EQUIPMENT REPAIR & MAIN | 41,438. | 931. | 40,507. | |
| d | MISCELLANEOUS | 39,426. | 28,809. | 10,617. | 4 805 |
| | All other expenses | 22,009. | 7,481. | 12,793. | 1,735. |
| 25 | Total functional expenses. Add lines 1 through 24e | 6,867,681. | 6,156,041. | 571,116. | 140,524. |
| 26 | Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. | | | | |
| | Check here if following SOP 98-2 (ASC 958-720) | | | | |

Form 990 (2023)

Part X | Balance Sheet

| Pai | rt X | Balance Sheet | | | | | |
|-----------------------------|------|--|------------|---------------------|---------------------------------|------------------------|---------------------------|
| | | Check if Schedule O contains a response or no | te to any | line in this Part X | | | |
| | | | | | (A) Beginning of year | | (B) End of year |
| | 1 | Cash - non-interest-bearing | | 1,903,137. | 1 | 1,175,067. | |
| | 2 | Savings and temporary cash investments | | | | 2 | |
| | 3 | Pledges and grants receivable, net | | 6,138,288. | 3 | 2,840,102. 190,721. | |
| | 4 | Accounts receivable, net | | 127,753. | 4 | 190,721. | |
| | 5 | Loans and other receivables from any current of | | | | | |
| | | trustee, key employee, creator or founder, sub- | | | | | |
| | | controlled entity or family member of any of the | | 5 | | | |
| | 6 | Loans and other receivables from other disqua | | | | | |
| | | under section 4958(f)(1)), and persons describe | ed in sect | ion 4958(c)(3)(B) | | 6 | |
| s, | 7 | Notes and loans receivable, net | | | | 7 | |
| Assets | 8 | Inventories for sale or use | | | | 8 | |
| ¥ | 9 | Description of the second second state of the second secon | | | 55,873. | 9 | 107,818. |
| | 10a | Land, buildings, and equipment: cost or other | | | | | |
| | | basis. Complete Part VI of Schedule D Less: accumulated depreciation | 10a | 4,439,968. | | | |
| | b | Less: accumulated depreciation | 10b | 415,049. | 4,120,403. | 10c | 4,024,919. 6,933,542. |
| | 11 | Investments - publicly traded securities | | 3,710,709. | 11 | 6,933,542. | |
| | 12 | Investments - other securities. See Part IV, line | | 12 | | | |
| | 13 | Investments - program-related. See Part IV, line | | 13 | | | |
| | 14 | Intangible assets | | 14 | | | |
| | 15 | Other assets. See Part IV, line 11 | | 15 | | | |
| | 16 | Total assets. Add lines 1 through 15 (must eq | | | 16,056,163. | 16 | 15,272,169. 238,162. |
| | 17 | Accounts payable and accrued expenses | | 330,033. | 17 | 238,162. | |
| | 18 | Grants payable | 40.505 | 18 | 4 - 54 | | |
| | 19 | Deferred revenue | | | 13,505. | 19 | 1,501. |
| | 20 | Tax-exempt bond liabilities | | | | 20 | |
| | 21 | Escrow or custodial account liability. Complete | | | | 21 | |
| es | 22 | Loans and other payables to any current or for | | | | | |
| Liabilities | | trustee, key employee, creator or founder, sub- | | | | | |
| ja p | | controlled entity or family member of any of the | - | | | 22 | |
| _ | 23 | Secured mortgages and notes payable to unre | | | | 23 | |
| | 24 | Unsecured notes and loans payable to unrelate | | | | 24 | |
| | 25 | Other liabilities (including federal income tax, p | | | | | |
| | | parties, and other liabilities not included on line | • | | 1,519,185. | 0.5 | 1,851,825. |
| | 06 | of Schedule D | | | 1,862,723. | 25 26 | 2,091,488. |
| | 26 | Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, ch | ook bore | <u>X</u> | 1,002,725. | 20 | 2,001,400. |
| S | | and complete lines 27, 28, 32, and 33. | eck nere | | | | |
| ü | 27 | • , , , | | | 7,103,092. | 27 | 6,243,827. |
| ala | 28 | | | | 7,090,348. | 28 | 6,936,854. |
| D D | 20 | Organizations that do not follow FASB ASC | | ck here | 7,050,540. | 20 | 0,330,034. |
| 臣 | | and complete lines 29 through 33. | 330, CHE | CK Here | | | |
| <u></u> | 29 | Capital stock or trust principal, or current fund | 2 | | | 29 | |
| ets | 30 | Paid-in or capital surplus, or land, building, or e | | | | 30 | |
| Ass | 31 | Retained earnings, endowment, accumulated i | | | | 31 | |
| Net Assets or Fund Balances | 32 | | | | 14,193,440. | 32 | 13,180,681. |
| Z | 33 | | | | 16,056,163. | 33 | 15,272,169. |
| | , 55 | . Star nabilities and flot abouts/fully balarioes | | I | , , | 55 | Form 990 (2023) |

| Pa | rt XI Reconciliation of Net Assets | | | | |
|----|---|----------|-------|------------|------------|
| | Check if Schedule O contains a response or note to any line in this Part XI | | | | X |
| | | | | | |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | 6,18 | | |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 6,86 | | |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | -68 | | |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) | 4 | 14,19 | <u>3,4</u> | <u>40.</u> |
| 5 | Net unrealized gains (losses) on investments | 5 | | | |
| 6 | Donated services and use of facilities | 6 | | | |
| 7 | Investment expenses | 7 | | | |
| 8 | Prior period adjustments | 8 | | | |
| 9 | Other changes in net assets or fund balances (explain on Schedule O) | 9 | -33 | 2,6 | 40. |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, | | | | |
| | column (B)) | 10 | 13,18 | 0,6 | 82. |
| Pa | rt XII Financial Statements and Reporting | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII | | | | |
| | | | | Yes | No |
| 1 | Accounting method used to prepare the Form 990: Cash X Accrual Other | | _ | | |
| | If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule | Ο. | | | |
| 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 Sche | 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 | | | | |
| | Uniform Guidance, 2 C.F.R. Part 200, Subpart F? | | 3a | | Х |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required | | | | |
| | or audits, explain why on Schedule O and describe any steps taken to undergo such audits | | 3b | | |
| | | | Form | 990 | (2023) |

332012 12-21-23

SCHEDULE A

(Form 990)

Total

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.

Open to Public

Inspection

OMB No. 1545-0047

Name of the organization

SPRINGBOARD FOR THE ARTS

Employer identification number

41-1690483 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 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).) 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.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. 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 (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes 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 | 71 | | , | | | |
|---------|---|-----------------------|-----------------|------------------|---------------|--------------------|-----------------|
| Cale | ndar year (or fiscal year beginning in) | (a) 2019 | (b) 2020 | (c) 2021 | (d) 2022 | (e) 2023 | (f) Total |
| | Gifts, grants, contributions, and | , , | ` , | ` , | | • • | |
| | membership fees received. (Do not | | | | | | |
| | include any "unusual grants.") | 2566054. | 4579877. | 1383412. | 10263371. | 2507969. | 21300683. |
| 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 | 2566054. | 4579877. | 1383412. | 10263371. | 2507969. | 21300683. |
| 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) | | | | | | 11543324. |
| 6 | Public support. Subtract line 5 from line 4. | | | | | | 9757359. |
| | ction B. Total Support | | | | | | |
| Cale | ndar year (or fiscal year beginning in) | (a) 2019 | (b) 2020 | (c) 2021 | (d) 2022 | (e) 2023 | (f) Total |
| | Amounts from line 4 | 2566054. | 4579877. | | 10263371. | 2507969. | 21300683. |
| | Gross income from interest, | | | | | | |
| | dividends, payments received on | | | | | | |
| | securities loans, rents, royalties, | | | | | | |
| | and income from similar sources | 3,312. | 2,834. | 2,206. | 42,092. | 167,491. | 217,935. |
| 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.) | 5,709. | 34,279. | 20,753. | 29,677. | 6,089. | 96,507. |
| 11 | Total support. Add lines 7 through 10 | 7,100 | <u> </u> | | | | 21615125. |
| | Gross receipts from related activities, | etc. (see instruction | ns) | | | | ,297,800. |
| | First 5 years. If the Form 990 is for the | | | | | | 7-2-7-2-2- |
| | organization, check this box and stor | | | • | | | |
| Sec | ction C. Computation of Publi | | | | | | |
| | Public support percentage for 2023 (I | | | column (f)) | | 14 | 45.14 % |
| | Public support percentage from 2022 | | | | | 15 | 37.07 % |
| | 33 1/3% support test - 2023. If the o | | | | | | |
| | stop here. The organization qualifies | | | | | | |
| r | 33 1/3% support test - 2022. If the o | | | | | | |
| | | | | | | | |
| 17a | and stop here. The organization qualifies as a publicly supported organization | | | | | | |
| | and if the organization meets the fact | _ | | | | | |
| | meets the facts-and-circumstances te | | · | • | | ū | |
| r | 10% -facts-and-circumstances test | - | • | | - | 7a. and line 15 is | |
| | more, and if the organization meets the | _ | | | | | / 0 - 0 - 0 |
| | organization meets the facts-and-circu | | | | - | | |
| 18 | Private foundation. If the organization | | - | • | • • • | | s |
| <u></u> | The second of the organization | s.sot shook a l | | ,, 11 4, 01 17 6 | , 5 and box a | | (Form 990) 2023 |

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) 2019 | (b) 2020 | (c) 2021 | (d) 2022 | (e) 2023 | (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 | | | | | | |
| b | Amounts included on lines 2 and 3 received from other than disqualified persons that | | | | | | |
| | exceed the greater of \$5,000 or 1% of the | | | | | | |
| | amount on line 13 for the year | | | | | | |
| | Add lines 7a and 7b | | | | | | |
| 8 | Public support. (Subtract line 7c from line 6.) | | | | | | |
| Sec | ction B. Total Support | 1 | 1 | Т | Т | T | 1 |
| | ndar year (or fiscal year beginning in) | (a) 2019 | (b) 2020 | (c) 2021 | (d) 2022 | (e) 2023 | (f) Total |
| | Amounts from line 6 | | | | | | |
| 10a | 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 | | | | | | |
| 11 | Net income from unrelated business activities not included on line 10b, | | | | | | |
| | whether or not the business is | | | | | | |
| | regularly carried on | | | | | | |
| 12 | Other income. Do not include gain or loss from the sale of capital | | | | | | |
| | assets (Explain in Part VI.) | | | | 1 | 1 | |
| | Total support. (Add lines 9, 10c, 11, and 12.) | | | | | 1 | |
| 14 | First 5 years. If the Form 990 is for the | ŭ | | • | • | | · — |
| 800 | check this box and stop hereetion C. Computation of Publi | | | | | | <u></u> |
| | • | | | (0) | | Tae T | 0/ |
| | Public support percentage for 2023 (I | , | , | (// | | 15 | % |
| | Public support percentage from 2022 ction D. Computation of Inves | | | | | 16 | % |
| | Investment income percentage for 20 | | | ne 13 column (fi) | | 17 | 0.4 |
| | Investment income percentage for 20 | | | | | 18 | <u>%</u> |
| | 33 1/3% support tests - 2023. If the | | | | e 15 is more than 1 | | |
| 196 | more than 33 1/3%, check this box ar | | | | | | |
| L | 33 1/3% support tests - 2022. If the | | | | | | |
| Ĺ | line 18 is not more than 33 1/3%, che | | | | | | |
| 20 | Private foundation If the organization | | | | | | |

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Schedule A (Form 990) 2023

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 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).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7?

 If "Yes." complete Part I of Schedule L (Form 990).
- 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 on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 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 |
|-----|------|-----|----|
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| Par | t IV | Supporting Organizations (continued) | | | |
|------|--------|---|----------|-----|----|
| | | | | Yes | No |
| 11 | Has t | the organization accepted a gift or contribution from any of the following persons? | | | |
| а | A per | rson who directly or indirectly controls, either alone or together with persons described on lines 11b and | | | |
| | 11c b | below, the governing body of a supported organization? | 11a | | |
| b | A fan | nily member of a person described on line 11a above? | 11b | | |
| С | A 359 | % controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide | | | |
| | detail | il in Part VI. | 11c | | |
| Sect | ion | B. Type I Supporting Organizations | | | |
| | | | | Yes | No |
| | | he governing body, members of the governing body, officers acting in their official capacity, or membership of one or | | | |
| | | e supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, | | | |
| | | etors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) etively operated, supervised, or controlled the organization's activities. If the organization had more than one supported | | | |
| | | nization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the | | | |
| | | orted organizations and what conditions or restrictions, if any, applied to such powers during the tax year. | 1 | | |
| 2 | Did th | he organization operate for the benefit of any supported organization other than the supported | | | |
| | orgar | nization(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, | | | |
| | supe | rvised, or controlled the supporting organization. | 2 | | |
| Sect | ion | C. Type II Supporting Organizations | | | |
| | | | | Yes | No |
| | | e a majority of the organization's directors or trustees during the tax year also a majority of the directors | | | |
| | or tru | ustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control | | | |
| | or ma | anagement of the supporting organization was vested in the same persons that controlled or managed | | | |
| C1 | the s | upported organization(s). | 1 | | |
| Seci | .1011 | D. All Type III Supporting Organizations | | 1 | |
| | D: 1.1 | | | Yes | No |
| | | he organization provide to each of its supported organizations, by the last day of the fifth month of the | | | |
| | | nization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax | | | |
| | | (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the | 4 | | |
| | - | nization's governing documents in effect on the date of notification, to the extent not previously provided? e any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported | 1 | | |
| | | nization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how | | | |
| | | organization maintained a close and continuous working relationship with the supported organization(s). | 2 | | |
| | | eason of the relationship described on line 2, above, did the organization's supported organizations have a | | | |
| | | ficant voice in the organization's investment policies and in directing the use of the organization's | | | |
| | • | me or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's | | | |
| | | norted organizations played in this regard. | 3 | | |
| Sect | | E. Type III Functionally Integrated Supporting Organizations | | | |
| 1 | Chec | ck the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). | | | |
| а | | 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. | | | |
| С | | The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see ins | truction | s). | |
| 2 | Activ | rities Test. Answer lines 2a and 2b below. | | Yes | No |
| а | Did s | substantially all of the organization's activities during the tax year directly further the exempt purposes of | | | |
| | | supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify | | | |
| | those | e supported organizations and explain how these activities directly furthered their exempt purposes, | | | |
| | how i | the organization was responsive to those supported organizations, and how the organization determined | | | |
| | | these activities constituted substantially all of its activities. | 2a | | |
| | | he activities described on line 2a, above, constitute activities that, but for the organization's involvement, | | | |
| | _ | or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in | | | |
| | | VI the reasons for the organization's position that its supported organization(s) would have engaged in | CI. | | |
| | | e activities but for the organization's involvement. | 2b | | |
| | | nt of Supported Organizations. Answer lines 3a and 3b below. | | | |
| | | he organization have the power to regularly appoint or elect a majority of the officers, directors, or | 20 | | |
| | | ees of each of the supported organizations? If "Yes" or "No" provide details in Part VI. he organization exercise a substantial degree of direction over the policies, programs, and activities of each | 3a | | |
| D | | supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard. | 3b | | |
| | ٠, ١٤٥ | - Sapportos Significación II Tes, describe III : Mix * I tre role piayed by the Organization III this regard. | | | |

Schedule A (Form 990) 2023

instructions).

Schedule A (Form 990) 2023

e Excess from 2023

Schedule B

(Form 990)

Attach to Form 990, 990-EZ, or 990-PF. Department of the Treasury Internal Revenue Service

OMB No. 1545-0047

Schedule B (Form 990) (2023)

Name of the organization

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

Schedule of Contributors

Employer identification number

| S | PRINGBOARD FOR THE ARTS | 41-1690483 |
|--|---|---|
| Organization type (check | one): | |
| Filers of: | Section: | |
| Form 990 or 990-EZ | X 501(c)(3) (enter number) organization | |
| | 4947(a)(1) nonexempt charitable trust not treated as a private foundation | |
| | 527 political organization | |
| Form 990-PF | 501(c)(3) exempt private foundation | |
| | 4947(a)(1) nonexempt charitable trust treated as a private foundation | |
| | 501(c)(3) taxable private foundation | |
| | is covered by the General Rule or a Special Rule . c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special | Rule. See instructions. |
| General Rule | | |
| - | on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totally one contributor. Complete Parts I and II. See instructions for determining a contribution | - · · · · · · · · · · · · · · · · · · · |
| Special Rules | | |
| sections 509(a)(1) contributor, durin | on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, ag the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on Z, line 1. Complete Parts I and II. | and that received from any one |
| contributor, durin literary, or educat | on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from the year, total contributions of more than \$1,000 exclusively for religious, charitable tional purposes, or for the prevention of cruelty to children or animals. Complete Parts (b) instead of the contributor name and address), II, and III. | , scientific, |
| For an organization year, contribution is checked, enter purpose. Don't co | on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from sections exclusively for religious, charitable, etc., purposes, but no such contributions totaled there the total contributions that were received during the year for an exclusively religion properties any of the parts unless the General Rule applies to this organization because ole, etc., contributions totaling \$5,000 or more during the year | I more than \$1,000. If this box lous, charitable, etc., et received nonexclusively |
| answer "No" on Part IV, lin | that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule Ene 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-ng requirements of Schedule B (Form 990). | |

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

Schedule B (Form 990) (2023) Page **2**

Name of organization

Employer identification number

SPRINGBOARD FOR THE ARTS

41-1690483

| Part I | Contributors (see instructions). Use duplicate copies of Part I if additional | space is needed. | |
|------------|---|----------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | | \$ 530,000. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 2 | | \$ <u>460,000</u> . | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 3 | | \$ 180,000. | Person X Payroll |
| (a) | (b) | (c) | (d) |
| | Name, address, and ZIP + 4 | * 150,000. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 5 | | \$\$ | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 6 | | \$\$ | Person X Payroll Noncash (Complete Part II for noncash contributions.) |

Name of organization Employer identification number

SPRINGBOARD FOR THE ARTS

41-1690483

| Part II | Noncash Property (see instructions). Use duplicate copies of Part I | I 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 |
| | | | |
| 323453 12-26 | | <u></u> | Schedule B (Form 990) (2023) |

Name of organization **Employer identification number** SPRINGBOARD FOR THE ARTS 41-1690483 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 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 Inspection

Name of the organization

SPRINGBOARD FOR THE ARTS

Employer identification number 41-1690483

| Pai | organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, lin- | | Similar Fund | s or Acc | counts. Complete if the |
|-----|--|----------------------------|------------------------|-----------------|---------------------------------|
| | | (a) Donor advis | sed 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 v | writing that the assets h | neld in donor adv | rised funds | |
| | are the organization's property, subject to the organization's | - | | | |
| 6 | Did the organization inform all grantees, donors, and donor a | | | | |
| | for charitable purposes and not for the benefit of the donor or | r donor advisor, or for a | any other purpos | e conferrin | g |
| | impermissible private benefit? | | | | |
| Par | t II Conservation Easements. Complete if the org | ganization answered "Y | es" on Form 990 | , Part IV, li | ne 7. |
| 1 | Purpose(s) of conservation easements held by the organization | on (check all that apply) |) | | |
| | Preservation of land for public use (for example, recreated | tion or education) | Preservation | of a histori | cally important land area |
| | Protection of natural habitat | | Preservation | of a certifie | ed historic structure |
| | Preservation of open space | | | | |
| 2 | Complete lines 2a through 2d if the organization held a qualif | ied conservation contri | bution in the forr | n of a cons | |
| | day of the tax year. | | | - 1 | Held at the End of the Tax Year |
| а | Total number of conservation easements | | | | 2a |
| b | | | | ····· | 2b |
| С | Number of conservation easements on a certified historic stru | | | | 2c |
| d | Number of conservation easements included on line 2c acqui | | | | |
| | on a historic structure listed in the National Register | | | | 2d |
| 3 | Number of conservation easements modified, transferred, rele | eased, extinguished, or | terminated by th | ne organiza | ation 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 it | | | | |
| 6 | Staff and volunteer hours devoted to monitoring, inspecting, | handling of violations, a | and enforcing co | nservation | easements during the year |
| 7 | Amount of expenses incurred in monitoring, inspecting, hand | lling of violations, and e | enforcing conserv | ation ease | ements during the year |
| _ | | | | (L) (A) (D) (i) | |
| 8 | Does each conservation easement reported on line 2d above | | | | □ Vaa □ Na |
| • | and section 170(h)(4)(B)(ii)? | | | | |
| 9 | | | | | |
| | balance sheet, and include, if applicable, the text of the footn organization's accounting for conservation easements. | lote to the organization | S III Iai ICiai Statei | Herits that | describes trie |
| Par | t III Organizations Maintaining Collections of | Art, Historical Tr | easures, or C | Other Sir | nilar Assets. |
| | Complete if the organization answered "Yes" on Form | | ŕ | | |
| 1a | If the organization elected, as permitted under FASB ASC 95 | | venue statement | and balan | ce sheet works |
| | of art, historical treasures, or other similar assets held for pub | • | | | |
| | service, provide in Part XIII the text of the footnote to its finan | • | • | | 1 |
| b | If the organization elected, as permitted under FASB ASC 95 | | | | sheet works of |
| | 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 | | | | \$ |
| | | | | | |
| 2 | If the organization received or held works of art, historical trea | | | | |
| | the following amounts required to be reported under FASB A | | | J / I=- | |
| а | Revenue included on Form 990, Part VIII, line 1 | | | | \$ |
| | Assets included in Form 990, Part X | | | | |

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

Schedule D (Form 990) 2023

| Par | rt III Organizations Maintaining C | ollections of Art | t, Histo | orical Tre | asures, o | r Other | Simila | Asset | S (continue | ed) |
|-----|--|------------------------|-------------|----------------|----------------|-------------|-------------|------------|-------------|----------|
| 3 | Using the organization's acquisition, accession | on, and other records | s, check | any of the f | ollowing that | make sig | gnificant u | use of its | | |
| | collection items (check all that apply). | | | | | | | | | |
| а | Public exhibition | d | | Loan or exc | hange progra | am | | | | |
| b | Scholarly research | е | | Other | | | | | | |
| С | Preservation for future generations | | | | | | | | | |
| 4 | Provide a description of the organization's co | llections and explair | how the | ey further th | ne organizatio | n's exem | pt purpo | se in Part | XIII. | |
| 5 | During the year, did the organization solicit or | r receive donations o | of art, his | storical treas | sures, or othe | er similar | assets | | | |
| | to be sold to raise funds rather than to be ma | intained as part of th | ne organ | ization's co | llection? | | | | Yes | No |
| Par | rt IV Escrow and Custodial Arrang | gements Comple | te if the | organization | answered " | Yes" on F | orm 990, | Part IV, I | ne 9, or | |
| | reported an amount on Form 990, Par | | | | | | | | | |
| 1a | Is the organization an agent, trustee, custodia | an, or other intermed | liary for | contribution | s or other as | sets not i | ncluded | | | |
| | on Form 990, Part X? | | | | | | | | Yes | No |
| b | If "Yes," explain the arrangement in Part XIII a | | | | | | | | | |
| | | | | | | | | | Amount | |
| С | Beginning balance | | | | | | 1c | | | |
| d | Additions during the year | | | | | | 1d | | | |
| | Distributions during the year | | | | | | | | | |
| f | Ending balance | | | | | | 1f | | | |
| 2a | Did the organization include an amount on Fo | | | | | | ty? | | Yes | No |
| b | If "Yes," explain the arrangement in Part XIII. | | | | | | | | | |
| Par | rt V Endowment Funds Complete if | the organization ans | wered " | Yes" on For | m 990, Part l | IV, line 10 |). | | | |
| | | (a) Current year | | rior year | (c) Two year | | | ears back | (e) Four ye | ars back |
| 1a | Beginning of year balance | | | | | | | | | |
| | Contributions | | | | | | | | | |
| | Net investment earnings, gains, and losses | | | | | | | | | |
| | Grants or scholarships | | | | | | | | | |
| | Other expenditures for facilities | | | | | | | | | |
| | and programs | | | | | | | | | |
| f | Administrative expenses | | | | | | | | | |
| g | End of year balance | | | | | | | | | |
| 2 | Provide the estimated percentage of the curre | ent year end balance | e (line 1g | ı, column (a) |) held as: | • | | | | |
| а | Board designated or quasi-endowment | | % | . , | • | | | | | |
| b | Permanent endowment | % | _ | | | | | | | |
| С | Term endowment | % | | | | | | | | |
| | The percentages on lines 2a, 2b, and 2c show | uld equal 100%. | | | | | | | | |
| За | Are there endowment funds not in the posses | ssion of the organiza | tion that | t are held ar | nd administer | ed for the | Э | | | |
| | organization by: | · · | | | | | | | Y | es No |
| | (i) Unrelated organizations? | | | | | | | | 3a(i) | |
| | (m) D | | | | | | | | 3a(ii) | |
| b | If "Yes" on line 3a(ii), are the related organizar | | | | | | | | 3b | |
| 4 | Describe in Part XIII the intended uses of the | | | | | | | | | |
| Par | rt VI Land, Buildings, and Equipm | ent | | | | | | | | |
| | Complete if the organization answered | d "Yes" on Form 990 | , Part IV | , line 11a. S | ee Form 990 | , Part X, I | ine 10. | | | |
| | Description of property | (a) Cost or o | ther | (b) Cost | or other | (c) Ac | cumulate | ed | (d) Book v | alue |
| | | basis (investn | nent) | basis | (other) | dep | reciation | | | |
| 1a | Land | | | 76 | 5,000. | | | | 765, | 000. |
| | Buildings | | | | 8,648. | 2 | 68,3 | 72. | 3,120, | |
| | Leasehold improvements | | | - | 6,000. | | 4,0 | | 2, | 000. |
| | Equipment | I | | | 0,320. | 1 | 42,6 | | | 643. |
| | Other | | | | | | - | | | |
| | I. Add lines 1a through 1e. (Column (d) must e | | X. line 10 | Oc. column | (B)) | | | | 4,024, | 919. |

Schedule D (Form 990) 2023

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

| Part VII Investments - Other Securities | FOR THE ARTS | | 1690483 Page |
|--|---------------------------|---|------------------------|
| Complete if the organization answered "Yes" o | | | |
| (a) Description of security or category (including name of security) | (b) Book value | (c) Method of valuation: Cost or en | d-of-year market value |
| I) Financial derivatives | | | |
| 2) Closely held equity interests | | | |
| Other | | | |
| (A) | | | |
| (B) | | | |
| (C) | | | |
| (D) | | | |
| (E) | | | |
| (F) | | | |
| (G) | | | |
| (H) | | | |
| otal. (Col. (b) must equal Form 990, Part X, line 12, col. (B)) Part VIII Investments - Program Related. | | | |
| Complete if the organization answered "Yes" o | n Form 990, Part IV, line | 11c. See Form 990, Part X, line 13. | |
| (a) Description of investment | (b) Book value | (c) Method of valuation: Cost or en | d-of-year market value |
| (1) | | | |
| (2) | | | |
| (3) | | | |
| (4) | | | |
| (5) | | | |
| (6) | | | |
| (7) | | | |
| (8) | | | |
| (9) | | | |
| otal. (Col. (b) must equal Form 990, Part X, line 13, col. (B)) | | | |
| Part IX Other Assets | | | |
| Complete if the organization answered "Yes" o | n Form 990, Part IV, line | 11d. See Form 990, Part X, line 15. | |
| | Description | | (b) Book value |
| (1) | · | | |
| (2) | | | |
| (3) | | | |
| (4) | | | |
| (5) | | | |
| (6) | | | |
| (7) | | | |
| (8) | | | |
| (9) | | | |
| otal. (Column (b) must equal Form 990, Part X, line 15, col. | (B)) | | |
| Part X Other Liabilities | 1-11 | | • |
| Complete if the organization answered "Yes" o | n Form 990, Part IV, line | 11e or 11f. See Form 990, Part X, line 25 | |
| (a) Description of liability | | | (b) Book value |
| (1) Federal income taxes | | | 1 051 005 |
| (2) FISCAL SPONSORSHIP | | | 1,851,825 |

(3) (4) (5) (6) (7) (8)

1,851,825. Total. (Column (b) must equal Form 990, Part X, line 25, col. (B)) Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2023

2,453,183.

6,867,681

| Sche | edule D (Form 990) 2023 SPRINGBOARD FOR THE ARTS | | | | 1690483 | Page 4 |
|------|---|--------|------------------|--------|---------|--------|
| Pai | rt XI Reconciliation of Revenue per Audited Financial Statement | s With | Revenue per Re | turn | | |
| | Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. | | | | | |
| 1 | Total revenue, gains, and other support per audited financial statements | | | 1 | 3,401, | 739. |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | | | | |
| а | Net unrealized gains (losses) on investments | 2a | | | | |
| | Donated services and use of facilities | 2b | | | | |
| | | 2c | | | | |
| d | | 2d | | | | |
| е | Add lines 2a through 2d | | | 2e | | 0. |
| 3 | Subtract line 2e from line 1 | | | 3 | 3,401, | 739 |
| 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 | | | | |
| | Other (Describe in Part XIII.) | 4b | 2,785,824. | | | |
| | Add lines 4a and 4b | | | 4c | 2,785, | 824. |
| 5 | Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) | | | 5 | 6,187, | 563. |
| Pa | rt XII Reconciliation of Expenses per Audited Financial Statemen | ts Wit | h Expenses per R | Returr | 1 | |
| | Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. | | | | | |
| 1 | Total expenses and losses per audited financial statements | | | 1 | 4,414, | 498. |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | | | | | |
| а | Donated services and use of facilities | 2a | | | | |
| b | | 2b | | | | |
| С | Other losses | 2c | | | | |
| | Other (Describe in Part XIII.) | 2d | | | | |
| е | Add lines 2a through 2d | | | 2e | | 0. |
| 3 | Subtract line 2e from line 1 | | | 3 | 4,414, | 498. |

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

Other (Describe in Part XIII.)

c Add lines 4a and 4b

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

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.

4a

453

PART IV, LINE 1B:

SPRINGBOARDS FISCAL SPONSORSHIP PROGRAM IS DESIGNED TO BE AN INCUBATOR FOR SMALL ARTS AND CULTURAL ORGANIZATIONS FOUNDED BY INDIVIDUAL ARTISTS. OF OUR CLIENTS EVENTUAL GOALS INCLUDE BECOMING THEIR OWN SEPARATE TAX-EXEMPT ORGANIZATION, THOUGH MANY OTHERS JUST WANT A WAY TO SOLICIT FUNDS FOR A SINGLE PROJECT OR EVENT. SMALL, UNINCORPORATED GROUPS FOUNDED BY INDIVIDUAL ARTISTS MAKE UP THE MAJORITY OF PROGRAM PARTICIPANTS, THOUGH MANY HAVE TAKEN THE FURTHER STEP OF INCORPORATING AS A NONPROFIT WITH THE STATE OF MINNESOTA. ORGANIZATIONS MUST EITHER BE BASED IN MINNESOTA OR PRODUCING A PROJECT IN MINNESOTA. FISCALLY SPONSORED PROJECTS MUST BE IN COMPLIANCE WITH OUR FEDERAL TAX-EXEMPT STATUS. COPYRIGHT AND OWNERSHIP OF INTELLECTUAL PROPERTY REMAIN WITH THE ARTISTS, AND THEY MUST INDEMNIFY 332054 09-28-23

Schedule D (Form 990) 2023

SCHEDULE G (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

| Name of the organization | | | | | | Employer identification number | | | |
|---|--|---|---------|-----------------------------------|---------|---|---|--|--|
| | | | | | | 41-1690 | 483 | | |
| Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. | | | | | | | | | |
| 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a | | | | | | | | | |
| (i) Name and address of individual or entity (fundraiser) | (ii) Activity | fundr have con or con contribu | trol of | (iv) Gross receipts from activity | to (c | Amount paid or retained by) fundraiser ted in col. (i) | (vi) Amount paid to (or retained by) organization | | |
| | | Yes | No | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
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| | | | | | | | | | |
| | | | | | | | | | |
| 3 List all states in which the organizatio or licensing. | n is registered or licensed to solicit c | | utions | or has been notified | it is e | exempt from re | L gistration | | |
| | | | | | | | | | |
| | | | | | | | | | |
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| | | | | | | | | | |

332081 09-13-23

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

Schedule G (Form 990) 2023

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000

| | | of fundraising event contributions and gro | | | | s greater than \$5,000. |
|-----------------|------------|--|---|-----------------------------|-----------------------|---|
| | | | (a) Event #1 | (b) Event #2 | (c) Other events NONE | (d) Total events (add col. (a) through |
| | | | (event type) | (event type) | (total number) | col. (c)) |
| nue | | | • • • | | | |
| Revenue | 1 | Gross receipts | 21,441. | | | 21,441. |
| | 2 | Less: Contributions | 16,101. | | | 16,101. |
| | 3 | Gross income (line 1 minus line 2) | 5,340. | | | 5,340. |
| | 4 | Cash prizes | | | | |
| S | 5 | Noncash prizes | | | | |
| Direct Expenses | 6 | Rent/facility costs | | | | |
| rect E | 7 | Food and beverages | 2,408. | | | 2,408. |
| | 8 | Entertainment | 600. | | | 600. |
| | | Other direct expenses | 600. 2,332. | | | 600. 2,332. |
| | 10 | Direct expense summary. Add lines 4 through | 9 in column (d) | | | 5,340. |
| Da | 11 rt l | | • | | | 0. |
| Га | ונו | Gaming. Complete if the organization a \$15,000 on Form 990-EZ, line 6a. | answered "Yes" on Form | 990, Part IV, line 19, or i | reported more than | |
| | | ψ13,000 0111 01111 000 E2, line σα. | | (b) Pull tabs/instant | | (d) Total gaming (add |
| Jue | | | (a) Bingo | bingo/progressive bingo | (c) Other gaming | col. (a) through col. (c)) |
| Revenue | | | | | | |
| ш | 1 | Gross revenue | | | | |
| S | 2 | Cash prizes | | | | |
| Direct Expenses | 3 | Noncash prizes | | | | |
| irect E | 4 | Rent/facility costs | | | | |
| | 5 | Other direct expenses | | | | |
| | 6 | Volunteer labor | Yes % No | Yes % No | Yes % No | |
| | 7 | Direct expense summary. Add lines 2 through | 5 in column (d) | | | |
| | | Net gaming income summary. Subtract line 7 | | | | |
| | | | | | | |
| | | ter the state(s) in which the organization condu the organization licensed to conduct gaming ac | | | | |
| a b | Yes No | | | | | |
| | <u></u> | | | | | |
| | | ere any of the organization's gaming licenses re Yes," explain: | | | | Yes No |
| | | | | | | |
| | | | | | | |

Schedule G (Form 990) 2023 332082 09-13-23

| Sch | edule G (Form 990) 2023 SPRINGBOARD FOR THE ARTS | 41-16 | 90483 | Page 3 |
|----------|--|----------|-----------------|-----------|
| 11 | Does the organization conduct gaming activities with nonmembers? | | Yes | No No |
| | 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: | | | |
| | The organization's facility | | 13a | % |
| | An outside facility | | 13b | <u></u> % |
| | Enter the name and address of the person who prepares the organization's gaming/special events books and records | | | |
| | | | | |
| | Name | | | |
| | | | | |
| | Address | | | |
| | | | | |
| 150 | Does the organization have a contract with a third party from whom the organization receives gaming revenue? | | Yes | No |
| IJa | Does the organization have a contract with a tillid party from whom the organization receives gaming revenue? | | 103 | 110 |
| L | of "Yes," enter the amount of gaming revenue received by the organization \$ and the amount | ount. | | |
| L | | Juni | | |
| | of gaming revenue retained by the third party \$ | | | |
| С | s If "Yes," enter name and address of the third party: | | | |
| | News | | | |
| | Name | | | |
| | | | | |
| | Address | | | |
| | | | | |
| 16 | Gaming manager information: | | | |
| | | | | |
| | Name | | | |
| | | | | |
| | Gaming manager compensation \$ | | | |
| | | | | |
| | Description of services provided | | | |
| | | | | |
| | | | | |
| | | | | |
| | Director/officer Employee Independent contractor | | | |
| | | | | |
| 17 | Mandatory distributions: | | | |
| а | Is the organization required under state law to make charitable distributions from the gaming proceeds to | | | |
| | retain the state gaming license? | | Yes | ☐ No |
| b | Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in | the | | |
| | organization's own exempt activities during the tax year \$ | | | |
| Pa | rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); | and Part | III. lines 9. 9 | 9b. 10b. |
| | 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions. | | ,, | ,, |
| | , , | | | |
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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.

OMB No. 1545-0047

Open to Public Inspection

| Name of the organization SPRINGBOA | Employer identification number 41-1690483 | | | | | | |
|---|---|------------------------------------|--------------------------|----------------------------------|--|---------------------------------------|------------------------------------|
| Part I General Information on Grants a | nd Assistance | | | | | | |
| Does the organization maintain records to criteria used to award the grants or assisted. Describe in Part IV the organization's process. | stance? | | | | - | | |
| Part II Grants and Other Assistance to recipient that received more than 9 | Domestic Organiz | ations and Domesti | c Governments. | Complete if the orga | anization answered "\ | es" on Form 990, Part | t IV, line 21, for any |
| (a) Name and address of organization or government | (b) EIN | (c) IRC section (if applicable) | (d) Amount of cash grant | (e) Amount of noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of noncash assistance | (h) Purpose of grant or assistance |
| ALANNA MORRIS 1160 CUSHING CIRCLE 323 | 10 5552025 | | 00.064 | | | | |
| SAINT PAUL, MN 55108 | 10-5763936 | | 20,861. | 0. | | | FISCAL AGENT ACTIVITY |
| ANDREA BAGDON 308 PRINCE STREET, APT 310 SAINT PAUL, MN 55101 | 47-5042848 | | 5,975. | 0. | | | FISCAL AGENT ACTIVITY |
| ANDREW LOOZE 3036 10TH AVENUE SOUTH MINNEAPOLIS, MN 55407 | 39-1066721 | | 7,865. | 0. | | | FISCAL AGENT ACTIVITY |
| ARTEMIS BROWN 2519 E 22ND ST. MINNEAPOLIS, MN 55406 | 54-2455194 | | 9,300. | 0. | | | FISCAL AGENT ACTIVITY |
| BANS PRODUCTIONS LLC 12325 JOHNSON MEMORIAL DR. LOT #16 SHAKOPEE, MN 55379 | 92-2868783 | | 12,600. | 0. | | | FISCAL AGENT ACTIVITY |
| BART BUCH 2633 15TH AVE. S. MINNEAPOLIS, MN 55407 | 48-3884781 | | 26,400. | 0. | | | FISCAL AGENT ACTIVITY |
| 2 Enter total number of section 501(c)(3) and3 Enter total number of other organizations | - | | | | | | |

Schedule I (Form 990) 2023

| Part II Continuation of Grants and Other | er Assistance to Don | nestic Organizations | and Domestic Go | vernments (Sch | edule I (Form 990), Pa | rt II.) | |
|--|----------------------|-------------------------------|--------------------------|----------------------------------|--|--|---------------------------------------|
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| BELVILLE PRODUCTIONS, LLC | | | | | | | |
| 519 GREENVIEW CT. | | | | | | | |
| SARTELL, MN 56377 | 92-2889818 | | 18,749. | 0. | | | FISCAL AGENT ACTIVITY |
| PREMIA MOGGER | | | | | | | |
| BRENNA MOSSER 1220 POWDERHORN TERR., #11 | | | | | | | |
| MINNEAPOLIS, MN 55407 | 47-4235943 | | 20,496. | 0. | | | FISCAL AGENT ACTIVITY |
| MINNEAFOLIS, MN 33407 | 47-4255945 | | 20,490. | 0. | | | FISCAL AGENT ACTIVITY |
| BURN SOMETHING COLLECTIVE LLC | | | | | | | |
| 1615 EMERSON AVE. N. APT. 1 | | | | | | | |
| MINNEAPOLIS, MN 55411 | 85-2558083 | | 7,600. | 0. | | | FISCAL AGENT ACTIVITY |
| · | | | | | | | |
| CARMEN LINCOLN | | | | | | | |
| 10200 KIMBRO CIR. S. | | | | | | | |
| COTTAGE GROVE, MN 55016 | 65-8401991 | | 9,348. | 0. | | | FISCAL AGENT ACTIVITY |
| | | | | | | | |
| CHARLES GORCZYNSKI | | | | | | | |
| 3607 GARFIELD AVENUE | | | | | | | |
| MINNEAPOLIS, MN 55409 | 39-9981422 | | 5,460. | 0. | | | FISCAL AGENT ACTIVITY |
| COM MIDDING DRUGG | | | | | | | |
| COW TIPPING PRESS 1400 VAN BUREN ST. NE #200 | | | | | | | |
| MINNEAPOLIS, MN 55413 | 81-2431227 | | 100,032. | 0. | | | FISCAL AGENT ACTIVITY |
| MINIMI ODIO, IN 33413 | 01 2431227 | | 100,032. | 0. | | | I I BEAL AGENT ACTIVITI |
| DAMIAN LEVERETT | | | | | | | |
| 425 DAYTON AVE. APT. 4, | | | | | | | |
| SAINT PAUL, MN 55102 | 22-5738855 | | 7,890. | 0. | | | FISCAL AGENT ACTIVITY |
| | | | | | | | |
| DANCE MN | | | | | | | |
| 4505 BROWNDALE AVENUE | | | | | | | |
| EDINA, MN 55424 | 88-1443231 | | 12,349. | 0. | | | FISCAL AGENT ACTIVITY |
| | | | | | | | |
| DANCECO LLC | | | | | | | |
| 2801 32ND AVE. S. | 00 4005515 | | 1 | _ | | | |
| MINNEAPOLIS, MN 55406 | 82-4235716 | | 15,500. | 0. | | | FISCAL AGENT ACTIVITY |

| Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) | | | | | | | | |
|--|------------|-------------------------------|--------------------------|----------------------------------|--|---|---------------------------------------|--|
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | |
| DANGER BOAT PRODUCTIONS LLC | | | | | | | | |
| 5028 18TH AVE S. | | | | | | | | |
| MINNEAPOLIS, MN 55417 | 45-4646985 | | 9,350. | 0. | | | FISCAL AGENT ACTIVITY | |
| · | | | - | | | | | |
| DARRIUS STRONG | | | | | | | | |
| 1501 EAST BURNSVILLE PARKWAY | | | | | | | | |
| BURNSVILLE, MN 55337 | 34-1842239 | | 17,462. | 0. | | | FISCAL AGENT ACTIVITY | |
| | | | | | | | | |
| DEBORAH JINZA THAYER | | | | | | | | |
| 653 GALTIER STREET APT 111 SAINT PAUL, MN 55103 | 54-8721507 | | 8,000. | 0. | | | FISCAL AGENT ACTIVITY | |
| SAINI FAOL, MN 33103 | 34-0721307 | | 8,000. | 0. | | | FISCAL AGENT ACTIVITY | |
| DEBORAH RAMOS | | | | | | | | |
| 520 2ND ST SE, APT. 414 | | | | | | | | |
| MINNEAPOLIS, MN 55414 | 45-5858903 | | 59,815. | 0. | | | FISCAL AGENT ACTIVITY | |
| • | | | , | | | | | |
| DIVER VAN AVERY | | | | | | | | |
| 3505 11TH AVE S. | | | | | | | | |
| MINNEAPOLIS, MN 55407 | 46-9152979 | | 32,550. | 0. | | | FISCAL AGENT ACTIVITY | |
| | | | | | | | | |
| DONALD TESLOW II | | | | | | | | |
| 7035 OAK GROVE BLVD. | | | | | | | | |
| MINNEAPOLIS, MN 55423 | 47-4525600 | | 10,457. | 0. | | | FISCAL AGENT ACTIVITY | |
| EDONU AVA | | | | | | | | |
| EBONY AYA 1631 DALE STREET NORTH | | | | | | | | |
| | 84-3615769 | | 25,038. | 0. | | | FISCAL AGENT ACTIVITY | |
| SAINT PAUL, MN 55117 | 04-3013709 | | 25,030. | 0. | | | FISCAL AGENT ACTIVITY | |
| EMERGING CURATORS INSTITUTE | | | | | | | | |
| 1506 EMERSON AVENUE NORTH | | | | | | | | |
| MINNEAPOLIS, MN 55411 | 83-4640140 | | 105,775. | 0. | | | FISCAL AGENT ACTIVITY | |
| · | | | , | | | | | |
| ERIC LARSON | | | | | | | | |
| 517 SOUTHEAST 8TH ST., APT. 1 | | | | | | | | |
| MINNEAPOLIS, MN 55414 | 38-7139540 | | 11,092. | 0. | | | FISCAL AGENT ACTIVITY | |

| Part II Continuation of Grants and Other | Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) | | | | | | | |
|--|--|-------------------------------|--------------------------|----------------------------------|--|---|------------------------------------|--|
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | |
| ERNEST BRIGGS | | | | | | | | |
| 5412 43RD AVE S. | | | | | | | | |
| MINNEAPOLIS, MN 55417 | 46-9088272 | | 16,521. | 0. | | | FISCAL AGENT ACTIVITY | |
| , | | | | | | | | |
| EYE OF THE HEART CENTER | | | | | | | | |
| 4500 BLOOMINGTON AVE. S. | | | | | | | | |
| MINNEAPOLIS, MN 55407 | 92-0881954 | | 12,568. | 0. | | | FISCAL AGENT ACTIVITY | |
| | | | | | | | | |
| FLIP THE SCRIPT LLC | | | | | | | | |
| 2285 UNIVERSITY AVE. W. UNIT 211 | | | | _ | | | | |
| SAINT PAUL, MN 55114 | 92-1030733 | | 27,482. | 0. | | | FISCAL AGENT ACTIVITY | |
| FORTUNE'S FOOL | | | | | | | | |
| 2113 22ND AVENUE SOUTH | | | | | | | | |
| MINNEAPOLIS, MN 55404 | 20-3658400 | | 16,700. | 0. | | | FISCAL AGENT ACTIVITY | |
| MINIMI OLIB, IN 33404 | 20 3030400 | | 10,700. | 0. | | | TIBERE ROBRI RETIVITI | |
| FUNNY ASIAN WOMEN KOLLECTIVE | | | | | | | | |
| 685 RIVOLI STREET | | | | | | | | |
| SAINT PAUL, MN 55130 | 83-0635886 | | 49,024. | 0. | | | FISCAL AGENT ACTIVITY | |
| | | | | | | | | |
| GO KO GO LLC | | | | | | | | |
| 7715 STAFFORD TRAIL | | | | | | | | |
| SAVAGE, MN 55378 | 81-2656047 | | 60,867. | 0. | | | FISCAL AGENT ACTIVITY | |
| | | | | | | | | |
| GRACE MINNESOTA | | | | | | | | |
| 787 HAMPDEN AVE #359 | 26 4670512 | | 40 000 | | | | DIGGLE AGENT AGENTATION | |
| SAINT PAUL, MN 55114 | 26-4678513 | | 40,000. | 0. | | | FISCAL AGENT ACTIVITY | |
| HATCH DANCE | | | | | | | | |
| 2285 UNIVERSITY AVENUE WEST 551 | | | | | | | | |
| SAINT PAUL, MN 55114 | 88-0622332 | | 30,000. | 0. | | | FISCAL AGENT ACTIVITY | |
| , | | | , | | | | | |
| HOLY COW! PRESS | | | | | | | | |
| 711 WOODLAND AVENUE | | | | | | | | |
| DULUTH, MN 55812 | 46-9565394 | | 12,705. | 0. | | | FISCAL AGENT ACTIVITY | |

| Part II Continuation of Grants and Other | Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) | | | | | | |
|--|--|-------------------------------|--------------------------|----------------------------------|--|--|---------------------------------------|
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| JAMES EVEREST | | | | | | | |
| 4617 SOUTH 28TH AVENUE #1 | | | | | | | |
| MINNEAPOLIS, MN 55406 | 46-9900774 | | 13,950. | 0. | | | FISCAL AGENT ACTIVITY |
| | | | , - | - | | | |
| JAMES TENBENSEL | | | | | | | |
| 3428 ST. PAUL AVE. | | | | | | | |
| MINNEAPOLIS, MN 55416 | 46-8420139 | | 14,734. | 0. | | | FISCAL AGENT ACTIVITY |
| | | | | | | | |
| JAYSON HOHLEN | | | | | | | |
| 2417 HARRIET AVE APT 2 | 47-7297649 | | 7 000 | 0. | | | FISCAL AGENT ACTIVITY |
| MINNEAPOLIS, MN 55405 | 47-7297649 | | 7,000. | 0. | | | FISCAL AGENT ACTIVITY |
| JENNIFER GLAWS | | | | | | | |
| 5206 DRUMMOND ROAD | | | | | | | |
| MOUND, MN 55364 | 33-9783853 | | 24,322. | 0. | | | FISCAL AGENT ACTIVITY |
| | | | | | | | |
| JESSICA REYES | | | | | | | |
| 1043 BLAIR AVENUE | | | | | | | |
| SAINT PAUL, MN 55104 | 81-5414993 | | 23,715. | 0. | | | FISCAL AGENT ACTIVITY |
| | | | | | | | |
| KALEENA MILLER 57 WADSWORTH TERRACE 2A | | | | | | | |
| NEW YORK, NY 10040 | 47-1061842 | | 8,847. | 0. | | | FISCAL AGENT ACTIVITY |
| NEW TORK, NI 10040 | 47 1001042 | | 0,047. | 0. | | | FISCAL AGENT ACTIVITY |
| KAREN SHERMAN | | | | | | | |
| 3405 15TH AVE. S. #1 | | | | | | | |
| MINNEAPOLIS, MN 55407 | 49-8705717 | | 12,853. | 0. | | | FISCAL AGENT ACTIVITY |
| | | | | | | | |
| KITH & KIN CHORUS LLC | | | | | | | |
| 3308 31ST AVE. S. | | | | | | | |
| MINNEAPOLIS, MN 55406 | 93-3508693 | | 33,785. | 0. | | | FISCAL AGENT ACTIVITY |
| I DCI TO DADVED DAMCE DDOTECH | | | | | | | |
| LESLIE PARKER DANCE PROJECT 765 N. HAMPDEN AVE. | | | | | | | |
| SAINT PAUL, MN 55114 | 83-3702467 | | 45,686. | 0. | | | FISCAL AGENT ACTIVITY |
| | 03 3732 107 | | 13,300. | ٠. | | | |

| Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) | | | | | | | |
|--|-----------------|-------------------------------|--------------------------|----------------------------------|--|--|---|
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| LIGHTNING ROD | | | | | | | |
| 3112 DUPONT AVE S FLOOR 2 | | | | | | | |
| MINNEAPOLIS, MN 55408 | 83-3519725 | | 35,477. | 0. | | | FISCAL AGENT ACTIVITY |
| | | | , | | | | |
| MAKE A SCENE LLC | | | | | | | |
| 7538 10TH AVENUE SOUTH | | | | | | | |
| RICHFIELD, MN 55423 | 85-0993924 | | 17,900. | 0. | | | FISCAL AGENT ACTIVITY |
| | | | | | | | |
| MARY PRESCOTT | | | | | | | |
| 5317 HUMBOLDT AVE. S. | | | | _ | | | |
| MINNEAPOLIS, MN 55419 | 47-4172457 | | 32,550. | 0. | | | FISCAL AGENT ACTIVITY |
| MILLION ARTIST MOVEMENT | | | | | | | |
| 2105 26TH AVE. S. | | | | | | | |
| MINNEAPOLIS, MN 55406 | 47-3237175 | | 44,175. | 0. | | | FISCAL AGENT ACTIVITY |
| | 1, 323,173 | | 11,173. | • | | | TIBOTH MODEL MOTIVITY |
| NANCY COOK | | | | | | | |
| 2543 MONTANA AVE. E. | | | | | | | |
| SAINT PAUL, MN 55119 | 29-2488889 | | 20,202. | 0. | | | FISCAL AGENT ACTIVITY |
| • | | | , | | | | |
| NARATE KEYS | | | | | | | |
| 1394 JULIET AVENUE | | | | | | | |
| SAINT PAUL, MN 55101 | 47-1250994 | | 9,300. | 0. | | | FISCAL AGENT ACTIVITY |
| | | | | | | | |
| NATHAN ALLISTER | | | | | | | |
| 3508 10TH AVE. S. | | | | _ | | | |
| MINNEAPOLIS, MN 55077 | 47-7170151 | | 19,213. | 0. | | | FISCAL AGENT ACTIVITY |
| NATIVE SKYWATCHERS | | | | | | | |
| 17101 76TH PL. N. | | | | | | | |
| MAPLE GROVE, MN 55311 | 81-2015231 | | 8,250. | 0. | | | FISCAL AGENT ACTIVITY |
| MILLI GROVE, FIN 33311 | 01 2013231 | | 0,230. | 0. | | | TIOCHE AGENT ACTIVITY |
| OPERA ON THE LAKE LLC | | | | | | | |
| 1382 ALBANY AVE. | | | | | | | |
| SAINT PAUL, MN 55108 | 83-4165132 | | 5,805. | 0. | | | FISCAL AGENT ACTIVITY |

| Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) | | | | | | | |
|--|------------|-------------------------------|--------------------------|----------------------------------|--|--|---------------------------------------|
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| PHILLIP MCGRAW | | | | | | | |
| 1405 IVY AVE. E. | | | | | | | |
| SAINT PAUL, MN 55106 | 32-9825581 | | 18,250. | 0. | | | FISCAL AGENT ACTIVITY |
| DRIVING DUOMO IDMG GRAMED | | | | | | | |
| PRAXIS PHOTO ARTS CENTER 1469 SUMMIT SHORES DRIVE | | | | | | | |
| BURNSVILLE, MN 55306 | 83-3485541 | | 72,360. | 0. | | | FISCAL AGENT ACTIVITY |
| BURNSVILLE, MN 55506 | 63-3465541 | | 72,360. | 0. | | | FISCAL AGENT ACTIVITY |
| RARE PRODUCTIONS | | | | | | | |
| 3010 EAST LAKE STREET | | | | | | | |
| MINNEAPOLIS, MN 55406 | 86-1501196 | | 87,700. | 0. | | | FISCAL AGENT ACTIVITY |
| | | | , - | | | | |
| REASONS FOR MOVING | | | | | | | |
| 3546 41ST AVENUE SOUTH | | | | | | | |
| MINNEAPOLIS, MN 55406 | 99-3113527 | | 13,950. | 0. | | | FISCAL AGENT ACTIVITY |
| | | | | | | | |
| RECREATION ARTS | | | | | | | |
| 1703 BLAIR AVENUE | | | | | | | |
| SAINT PAUL, MN 55104 | 84-4617092 | | 9,292. | 0. | | | FISCAL AGENT ACTIVITY |
| | | | | | | | |
| RORY WAKEMUP | | | | | | | |
| 781 MANOMIN AVENUE | 47-6741464 | | 10,000. | 0. | | | FISCAL AGENT ACTIVITY |
| SAINT PAUL, MN 55107 | 47-0741404 | | 10,000. | 0. | | | FISCAL AGENT ACTIVITY |
| SAHAR HASSAN | | | | | | | |
| 183 WINIFRED ST. W. | | | | | | | |
| SAINT PAUL, MN 55107 | 56-5716402 | | 15,000. | 0. | | | FISCAL AGENT ACTIVITY |
| · | | | , | | | | |
| SCOTT REYNOLDS | | | | | | | |
| 3440 18TH AVE. S. #3 | | | | | | | |
| MINNEAPOLIS, MN 55407 | 47-1082120 | | 18,101. | 0. | | | FISCAL AGENT ACTIVITY |
| | | | | | | | |
| SHARON BAILEY | | | | | | | |
| 3218 CLEVELAND STREET NE | F0 F054000 | | 22 525 | _ | | | |
| MINNEAPOLIS, MN 55418 | 58-7254093 | | 28,500. | 0. | | | FISCAL AGENT ACTIVITY |

| Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) | | | | | | | |
|--|------------|-------------------------------|---|----------------------------------|--|--|------------------------------------|
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| SOBIESKI MUSIC, LLC | | | | | | | |
| 1590 RUSTIC HILLS DR. | | | | | | | |
| EAGAN, MN 55121 | 88-2194548 | | 31,500. | 0. | | | FISCAL AGENT ACTIVITY |
| , | | | , | | | | |
| STRIVE PUBLISHING, LLC | | | | | | | |
| 901 NICOLLET MALL, STE. 100 | | | | | | | |
| MINNEAPOLIS, MN 55402 | 81-3603371 | | 6,435. | 0. | | | FISCAL AGENT ACTIVITY |
| | | | | | | | |
| SUMMIT MUSIC LLC | | | | | | | |
| 3312 SHEPHERD HILLS DRIVE | | | | _ | | | L |
| BLOOMINGTON, MN 55431 | 88-2728136 | | 7,242. | 0. | | | FISCAL AGENT ACTIVITY |
| TANA HARGEST | | | | | | | |
| 3538 PILLSBURY AVE. S. | | | | | | | |
| MINNEAPOLIS, MN 55408 | 47-6020636 | | 13,900. | 0. | | | FISCAL AGENT ACTIVITY |
| | 1, 002000 | | 20,500. | - | | | |
| TANGIBLE COLLECTIVE LLC | | | | | | | |
| 5025 UPTON AVENUE NORTH | | | | | | | |
| MINNEAPOLIS, MN 55430 | 87-3981465 | | 37,051. | 0. | | | FISCAL AGENT ACTIVITY |
| | | | | | | | |
| THE BUCKET BRIGADE | | | | | | | |
| 858 JUNO AVE. | | | | | | | |
| SAINT PAUL, MN 55102 | 47-7119006 | | 34,500. | 0. | | | FISCAL AGENT ACTIVITY |
| | | | | | | | |
| THEATRE 55 | | | | | | | |
| 976 GOODRICH AVENUE, STE. 3 | 83-2263013 | | 94,856. | 0. | | | FISCAL AGENT ACTIVITY |
| SAINT PAUL, MN 55105 | 83-2203013 | | 94,836. | 0. | | | FISCAL AGENT ACTIVITY |
| THRESHOLD THEATER LLC | | | | | | | |
| 215 OAK GROVE STREET | | | | | | | |
| MINNEAPOLIS, MN 55403 | 50-2087207 | | 8,150. | 0. | | | FISCAL AGENT ACTIVITY |
| ,, | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | |
| TRILINGUA CINEMA | | | | | | | |
| 718 SIMS AVE. | | | | | | | |
| SAINT PAUL, MN 55106 | 85-1574656 | | 28,362. | 0. | | | FISCAL AGENT ACTIVITY |

| Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) | | | | | | | |
|--|------------|-------------------------------|--------------------------|----------------------------------|--|--|------------------------------------|
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| | | | | | | | |
| TRU RUTS | | | | | | | |
| 3218 CLEVELAND STREET NE MINNEAPOLIS, MN 55418 | 47-5411254 | | 81,240. | 0. | | | FISCAL AGENT ACTIVITY |
| MINNEAFOLIS, MN 53416 | 47-3411234 | | 01,240. | 0. | | | FISCAL AGENT ACTIVITY |
| VALERIE OLIVEIRO | | | | | | | |
| 3731 PARK AVENUE #1 | | | | | | | |
| MINNEAPOLIS, MN 55407 | 04-1044438 | | 56,000. | 0. | | | FISCAL AGENT ACTIVITY |
| · | | | , | | | | |
| VOICES OF HOPE LLC | | | | | | | |
| 3408 BRYANT AVE. S. | | | | | | | |
| MINNEAPOLIS, MN 55408 | 82-1471747 | | 37,200. | 0. | | | FISCAL AGENT ACTIVITY |
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| (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 |
|--|--------------------------|--------------------------|---------------------------------------|---|---------------------------------------|
| | | | | | |
| ARTIST RESPOND: PEOPLE, PLACES, PROSPERITY GRANT | 5 | 25,000. | 0. | | |
| | | | | | |
| GUARANTEED INCOME PILOT PROGRAM | 75 | 450,000. | 0. | | |
| | | | | | |
| RURAL REGENERATOR ARTIST FELLOWSHIP | 13 | 149,575. | 0. | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Part IV Supplemental Information. Provide the information re | quired in Part I, lin | e 2; Part III, column | (b); and any other ac | dditional information. | |
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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.

Form 990, Part IV, line 23.

Open to Public

Department of the Treasury
Internal Revenue Service

Name of the organization

Part I Questions Regarding Compensation

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

Inspection
Employer identification number

OMB No. 1545-0047

SPRINGBOARD FOR THE ARTS

41-1690483

| | | | Yes | No |
|------------|--|----|-----|-----------|
| 1 a | Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, | | | |
| | Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. | | | |
| | First-class or charter travel 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. | | | |
| | X Compensation committee Written employment contract | | | |
| | Independent compensation consultant X Compensation survey or study | | | |
| | 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 | | |
| С | Participate in or receive payment from an equity-based compensation arrangement? | 4c | | X |
| | If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. | | | |
| | | | | |
| | Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. | | | |
| 5 | For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation | | | |
| | contingent on the revenues of: | | | |
| а | The organization? | 5a | | <u>X</u> |
| b | Any related organization? | 5b | | X |
| | If "Yes" on line 5a or 5b, describe in Part III. | | | |
| 6 | For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation | | | |
| | contingent on the net earnings of: | | | |
| | The organization? | 6a | | <u>X</u> |
| b | Any related organization? | 6b | | X |
| | If "Yes" on line 6a or 6b, describe in Part III. | | | |
| 7 | For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments | | | |
| | not described on lines 5 and 6? If "Yes," describe in Part III | 7 | | <u> X</u> |
| 8 | Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the | | | |
| | initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III | 8 | | X |
| 9 | If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in | | | |
| | Regulations section 53.4958-6(c)? | 9 | | |

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

Schedule J (Form 990) 2023

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 | V-2 and/or 1099-MISO compensation | C and/or 1099-NEC | other deferred | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | in column (B) | |
|--------------------|------|---------------------------|-----------------------------------|-------------------------------------|----------------|-------------------------|------------------------------------|---|--|
| (A) Name and Title | | compensation incentive r | | (iii) Other reportable compensation | compensation | | | reported as deferred on prior Form 990 | |
| (1) LAURA ZABEL | (i) | 223,807. | 0. | 0. | 0. | 17,325. | 241,132. | 0. | |
| EXECUTIVE DIRECTOR | (ii) | 0. | 0. | 0. | 0. | 0. | | 0. | |
| | (i) | | | | | | | | |
| | (ii) | | | | | | | | |
| | (i) | | | | | | | | |
| | (ii) | | | | | | | | |
| | (i) | | | | | | | | |
| | (ii) | | | | | | | | |
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| | (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. |
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SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

2023

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

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

Employer identification number

| | SPRINGBOARD | FOR TH | E ARTS | | | 4 | 1-1690 | 483 | |
|----------------------|--|-------------------------------|---|---|--------------|--------------|--|-----|----|
| Pai | t I Types of Property | | | | | | | | |
| | | (a) Check if applicable | (b) Number of contributions or items contributed | (c) Noncash contri amounts repor Form 990, Part VI | ted on | | (d) d of determin ontribution ar | | s |
| 1 | Art - Works of art | | | | | | | | |
| 2 | Art - Historical treasures | | | | | | | | |
| 3 | Art - Fractional interests | | | | | | | | |
| 4 | Books and publications | | | | | | | | |
| 5 | Clothing and household goods | | | | | | | | |
| 6 | Cars and other vehicles | | | | | | | | |
| 7 | Boats and planes | | | | | | | | |
| 8 | Intellectual property | | | | | | | | |
| 9 | Securities - Publicly traded | х | 1 | 2.067 | .445. | FAIR MAR | KET VAI | LUE | |
| 10 | Securities - Closely held stock | | _ | | , | | | | |
| 11 | Securities - Partnership, LLC, or | | | | | | | | |
| •• | trust interests | | | | | | | | |
| 12 | Securities - Miscellaneous | | | | | | | | |
| 13 | Qualified conservation contribution - | | | | | | | | |
| .0 | Historic structures | | | | | | | | |
| 14 | Qualified conservation contribution - Other | | | | | | | | |
| 15 | Real estate - Residential | | | | | | | | |
| 16 | Real estate - Commercial | | | | | | | | |
| 17 | Real estate - Other | | | | | | | | |
| 18 | Collectibles | | | | | | | | |
| 19 | Food inventory | | | | | | | | |
| 20 | Drugs and medical supplies | | | | | | | | |
| 21 | Taxidermy | | | | | | | | |
| 22 | Historical artifacts | | | | | | | | |
| 23 | | | | | | | | | |
| 24 | Scientific specimens Archaelogical artifacts | | | | | | | | |
| 2 4 25 | Archeological artifacts Other () | | | | | | | | |
| 26 | ` | | | | | | | | |
| 20 27 | ` | | | | | | | | |
| | Other () | | | | | | | | |
| <u>28</u> 29 | Other () Number of Forms 8283 received by the organize | zation during | the tax year for e | ontributions | | | | | |
| 29 | for which the organization completed Form 82 | _ | • | | 29 | | | | |
| | for which the organization completed form 62 | oo, rait v, L | onee Acknowledg | | 29 | | | Voc | No |
| 202 | During the year, did the organization receive by | v contributio | n any proporty rop | orted in Part Lline | c 1 through | o 28 that it | | Yes | No |
| Sua | must hold for at least 3 years from the date of | | | | | | | | |
| | | | | | | | 200 | | Х |
| L | exempt purposes for the entire holding period? | · | | | | | 30a | | |
| | b If "Yes," describe the arrangement in Part II. Does the arganization have a gift acceptance policy that requires the review of any poperanderd contributions? | | | | | | | | |
| 31 | | | | | | | | | |
| o∠d | 2a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 32a X | | | | | | | | |
| h | contributions? If "Yes," describe in Part II. | | | | | | 32a | | Λ |
| 33 p | • | olumn (a) fa | r a type of propert | for which column | (a) is obse | kod | | | |
| 33 | If the organization didn't report an amount in c | olullili (C) fOl | a type of property | TOT WITHOUT COLUMN | (a) is cried | neu, | | | |
| | describe in Part II. | | | | | | | | |

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

Schedule M (Form 990) 2023

Schedule M (Form 990) 2023

332142 09-11-23

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

2023
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

SPRINGBOARD FOR THE ARTS

Employer identification number 41-1690483

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

SERVICES THEY NEED TO MAKE A LIVING AND A LIFE.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

ARTISTS. THESE LOCAL PROGRAMS SERVED APPROXIMATELY 215 ARTISTS AND

APPROXIMATELY 3,000 COMMUNITY MEMBERS IN 2024.

OUR REGIONAL / NATIONAL PROGRAMS INCLUDE THE RURAL REGENERATOR SUPPORTS A COHORT OF 12 ARTISTS ACROSS THE UPPER MIDWEST WITH AN UNRESTRICTED STIPEND TO SUPPORT THEIR WORK, LEARNING AND EXCHANGE; THE RURAL FUTURES SUMMIT AN ANNUAL CONVENING WHICH GATHERS 150 CREATIVE LEADERS FROM A CROSS THE UPPER MIDWEST FOR 3 DAYS OF WORKSHOPS. ART MAKING AND CELEBRATION; THE FALLS COMMUNITY ARTS EXCHANGE WHICH BRINGS 8 ARTISTS TO THE FERGUS FALLS COMMUNITY EACH YEAR TO LEARN FROM THE LOCAL ARTS AND CREATIVE COMMUNITY, AND DEEPEN THEIR CREATIVE PRACTICE; AND ARTISTS ON MAIN STREET, WHICH SUPPORTS SMALL COMMUNITIES WITH THE TOOLS AND RESOURCES THEY NEED TO INVOLVE ARTISTS AND CREATIVES WITH DOWNTOWN REVITALIZATION. THESE REGIONAL/NATIONAL PROGRAMS SERVED APPROXIMATELY 180 ARTISTS, 40 RURAL COMMUNITY LEADERS AND 1,000 COMMUNITY MEMBERS IN 2024.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

IN CREATING COMMUNITY-ENGAGED ACTIVITIES, INCLUDING SHORT FILMS, MUSIC

PERFORMANCES, AND INTERACTIVE ART PROJECTS. WE ALSO CONTINUED ADVANCING

OUR GUARANTEED BASIC INCOME INITIATIVES, FOCUSING ON DIRECT CASH

PROGRAMS AND NARRATIVE WORK THAT EMPHASIZE THE ROLE OF ARTISTS IN
For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990) 2023

Schedule O (Form 990) 2023 Page 2

Name of the organization SPRINGBOARD FOR THE ARTS Employer identification number 41-1690483

SOCIAL AND ECONOMIC JUSTICE MOVEMENTS.

IN ADDITION TO THESE EFFORTS, WE EXPANDED OUR ARTISTS RESPOND PROGRAM,
WHICH SUPPORTS ARTISTS IN ADDRESSING COMMUNITY CHALLENGES THROUGH
CREATIVE PROJECTS. THIS YEAR, WE ADDED TO OUR READY GO ROSTER, WHICH
CONNECTS COMMUNITIES WITH MOBILE ART TOOLS THAT ENCOURAGE INTERACTION
AND ENGAGEMENT. WE ALSO PARTNERED WITH PROJECT FOR PRIDE IN LIVING TO
DEVELOP EQUITABLE PUBLIC ENGAGEMENT STRATEGIES, HELPING NEIGHBORHOODS
ENVISION NEW POSSIBILITIES FOR THEIR COMMUNITY.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

WITH ONE-ON-ONE ATTORNEY REFERRALS IN FY24.

IN FY24, SPRINGBOARD FOR THE ARTS PROFESSIONAL DEVELOPMENT PROGRAMS

SERVED 3,031 INDIVIDUAL ARTISTS AND COMMUNITY MEMBERS THROUGH PANELS,

WORKSHOPS, LEGAL CLINICS, AND PARTICIPATION AT LEADING LOCAL AND

NATIONAL CONFERENCES. SPRINGBOARD FOR THE ARTS PRESENTED 106+ WORKSHOPS

ON BUSINESS SKILLS FOR ARTISTS AND PROFESSIONAL DEVELOPMENT, 1062

INDIVIDUAL CONSULTATIONS, AND PRESENTED AT CONFERENCES LOCALLY AND

NATIONALLY HIGHLIGHTING OUR CONTENT, ARTIST SERVICES, AND MISSION. IN

FY24, SPRINGBOARD FOR THE ARTS EXPANDED ITS POOL OF ARTIST CAREER

CONSULTANTS AND WORK OF ART WORKSHOP FACILITATORS TO REACH BROADER

COMMUNITIES, AUDIENCES, AND PARTNERS. WOA WORKSHOPS CONTINUED THE

TRANSITION FROM ZOOM TO HYBRID/IN-PERSON WORKSHOPS. WE ALSO HAD AN

ARTIST RESOURCE FAIR WITH 25 VENDORS AND HAD AN ATTENDANCE OF 50+

ARTISTS.

IN FY24, SPRINGBOARD FOR THE ARTS MAINTAINED THE GUARANTEED MINIMUM

INCOME PILOT OF 75 TOTAL ARTISTS, WHICH INCLUDES 50 WITHIN THE

RONDO/FROGTOWN NEIGHBORHOOD AND 25 IN OTTER TAIL COUNTY, AS A WAY TO

<u>Schedule O (Form 990) 2023</u> Page **2**

SPRINGBOARD FOR THE ARTS

SUPPLEMENT, RATHER THAN REPLACE THE EXISTING SOCIAL SAFETY NET AND A

TOOL FOR RACIAL AND GENDER EQUITY.

THE GROWTH FUND CONTINUED TO EXPAND IN FY24, PROVIDING \$2,500 TO MN

ARTISTS AND CREATIVE BUSINESS OWNERS TO HELP SUSTAIN OR SCALE THEIR

BUSINESSES. THIS PROGRAM SUPPORTED 50 ARTISTS.

WITHIN THE MAKERS-TO-MARKET PROGRAM, SPRINGBOARD EXECUTED TWO POP-UP

MARKETS (LAST MINUTE GIFTS AND SPRINGPOP!), WITH AN AVERAGE OF 35

MAKERS AND VENDORS AND 300 ATTENDEES PER EVENT.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

SPRINGBOARD'S NATIONAL WORK ENCOMPASSES OUR VIRTUAL TECHNICAL

ASSISTANCE PROGRAM, ART-TRAIN, AND THE CREATIVE CHANGE COALITION.

LAUNCHED IN APRIL 2021 TO ADDRESS THE FEDERAL FUNDING OPPORTUNITY

PROVIDED THROUGH THE AMERICAN RESCUE PLAN LOCAL FISCAL RECOVERY FUND,

ART-TRAIN HAS TRAINED NEARLY 1000 ARTISTS AND ORGANIZATION & AGENCY

PRACTITIONERS ACROSS THE NATION TO DATE. ART-TRAIN EQUIPS PRACTITIONERS

WITH TOOLS TO DESIGN AND SUPPORT CROSS-SECTOR, EQUITY-CENTERED,

LOCALLY-ROOTED AND CULTURE-BASED COLLABORATIONS THAT ADDRESS RECOVERY,

REBUILDING, AND ONGOING COMMUNITY AND ECONOMIC DEVELOPMENT.

THE CREATIVE CHANGE COALITION IS SPRINGBOARD'S NEWEST NATIONAL PROGRAM.

THE CREATIVE CHANGE COALITION IS A NATIONAL COALITION OF PLACE-BASED

COMMUNITY ORGANIZATIONS THAT CENTER PEOPLE, CREATIVITY, AND EQUITY. THE

COALITION INCLUDES REGULAR, PUBLIC, AND FREE TECHNICAL ASSISTANCE

WEBINARS, FIELD CONVERSATIONS, DISCUSSION AND CONNECTION OPPORTUNITIES

FOR COALITION MEMBERS, AS WELL AS ADDITIONAL RESOURCES AND INITIATIVES

AIMED AT INCREASING VISIBILITY AND EFFICACY OF THE FIELD OF CREATIVE,

<u>Schedule O (Form 990) 2023</u> Page **2**

Name of the organization SPRINGBOARD FOR THE ARTS Employer identification number 41-1690483

PLACE-BASED, COMMUNITY INFORMED WORK.

SPRINGBOARD FOR THE ARTS' INCUBATOR: A FISCAL SPONSORSHIP PROGRAM

PROVIDES FISCAL SPONSORSHIP FOR ARTS GROUPS AND INDIVIDUAL ARTIST

PROJECTS THAT DO NOT WANT (OR ARE NOT READY) TO BECOME TAX-EXEMPT

NONPROFIT ORGANIZATIONS. IN FY24 WE MANAGED REVENUES FOR THE 204

ARTIST-LED PROJECTS IN THE PROGRAM DURING THAT PERIOD.

EXPENSES \$ 590,422. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

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

LINE 11B EXPLANATION - FULL BOARD OF DIRECTORS REVIEWS BOTH THE 990 AND AUDIT AND VOTES TO APPROVE BEFORE FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

BOARD & STAFF SIGN ANNUAL CONFLICT OF INTEREST DISCLOSURE AGREEMENT. FULL

BOARD OF DIRECTORS APPROVES OR DENIES BOARD MEMBERS & STAFF TO ACT WHEN

THERE IS A CONFLICT OF INTEREST.

FORM 990, PART VI, SECTION B, LINE 15:

THE EXECUTIVE COMMITTEE USES THE MN COUNCIL OF NONPROFITS' SALARY & BENEFIT
SURVEY TO DETERMINE COMPARABLE DATA AND MAKES AN ANNUAL RECOMMENDATION.

THE EXECUTIVE COMMITTEE USES THE MN COUNCIL OF NONPROFITS' SALARY & BENEFIT
SURVEY TO DETERMINE COMPARABLE DATA AND MAKES AN ANNUAL RECOMMENDATION.

FORM 990, PART VI, SECTION C, LINE 19:

THROUGH CONTACTING THE OPERATIONS AND FINANCE DIRECTOR OR THE BUSINESS

MANAGER

<u>Schedule O (Form 990) 2023</u> Page **2**

| Name of the organization SPRINGBOARD FOR THE ARTS | Employer identification number 41-1690483 |
|--|---|
| FORM 990, PART IX, LINE 11G, OTHER FEES: | |
| OTHER PROFESSIONAL FEES: | |
| PROGRAM SERVICE EXPENSES | 1,041,360. |
| MANAGEMENT AND GENERAL EXPENSES | 44,667. |
| FUNDRAISING EXPENSES | 8,466. |
| TOTAL EXPENSES | 1,094,493. |
| TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A | |
| FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS: | |
| FISCAL SPONSORSHIP ACTIVITY | -332,640. |
| | |
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Form **990-T**

PUBLIC DISCLOSURE COPY Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

| (| ., | | | |
|------------------------------------|-----|----|------|--|
| r 2023 or other tax year beginning | JUL | 1. | 2023 | |

| | | For ca | lendar year 2023 or other tax year beginning $\ \underline{JUL\ 1\ ,\ 2023} $, and ending $\ \underline{JUN\ 30\ ,\ 20}$ | <u>24</u> . | 2023 |
|--------------|------------------------------------|----------|---|-------------|--------------------------------------|
| Departm | nent of the Treasury | | Go to www.irs.gov/Form990T for instructions and the latest information. | - | Open to Public Inspection for |
| Internal | Revenue Service | l | Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3) | | 501(c)(3) Organizations Only |
| Α | Check box if address changed. | | Name of organization (Check box if name changed and see instructions.) | D Emp | bloyer identification number |
| B Exe | empt under section | Print | SPRINGBOARD FOR THE ARTS | 4 | 1-1690483 |
| X | 501(c)(3) | _or | Number, street, and room or suite no. If a P.O. box, see instructions. | | up exemption number instructions) |
| | 408(e) 220(e) | Туре | 262 UNIVERSITY AVENUE WEST | () | mod dodonoj |
| | 408A 530(a) | | City or town, state or province, country, and ZIP or foreign postal code | | |
| | 529(a) 529A | | SAINT PAUL, MN 55103 | F | Check box if |
| | | С Во | ok value of all assets at end of year | | an amended return. |
| G CI | heck organization | | X 501(c) corporation 501(c) trust 401(a) trust Other trust | State | college/university |
| | | | 6417(d)(1)(A) Applicable entity | | |
| H CI | heck if filing only to | o claim | Credit from Form 8941 Refund shown on Form 2439 Elective paym | ent amo | unt from Form 3800 |
| I CI | heck if a 501(c)(3) | organiz | ation filing a consolidated return with a 501(c)(2) titleholding corporation | | |
| J Er | nter the number of | attach | ed Schedules A (Form 990-T) | | |
| | | | e corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? | | Yes No |
| If | "Yes," enter the na | ame an | d identifying number of the parent corporation | | |
| | ne books are in car | | JOHN BELL Telephone number | 651- | 789-0163 |
| Parl | | | d Business Taxable Income | | |
| 1 | | | ess taxable income computed from all unrelated trades or businesses (see instructions) | | 0. |
| 2 | | | | 2 | |
| 3 | Add lines 1 and 2 | ····· | | 3 | 0 |
| 4 | | | (see instructions for limitation rules) | | 0. |
| 5 | | | s taxable income before net operating losses. Subtract line 4 from line 3 | | |
| 6 | | | ting loss. See instructions | 6 | |
| 7 | | | ess taxable income before specific deduction and section 199A deduction. | _ | |
| | Subtract line 6 fro | | | | 1,000. |
| 8 9 | | | erally \$1,000, but see instructions for exceptions) | | 1,000. |
| 10 | | | eduction. See instructions lines 8 and 9 | | 1,000. |
| 11 | | | cable income. Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero | 11 | 0. |
| | t II Tax Com | putat | ion | | |
| 1 | | | as corporations. Multiply Part I, line 11 by 21% (0.21) | 1 | 0. |
| 2 | | | rates. See instructions for tax computation. Income tax on the amount on | | |
| | | | Tax rate schedule or Schedule D (Form 1041) | 2 | |
| 3 | | | ons | 3 | |
| 4 | Other tax amount | ts. See | instructions | 4 | |
| 5 | Alternative minim | | | l _ | |
| 6 | Tax on noncomp | oliant f | acility income. See instructions | 6 | |
| 7 | Total. Add lines | 3 throu | gh 6 to line 1 or 2, whichever applies | 7 | 0. |
| Par | | | | | Γ |
| 1a | | | orations attach Form 1118; trusts attach Form 1116) 1a | _ | |
| b | Other credits (see | | · · · · · · · · · · · · · · · · · · · | _ | |
| С | | | Attach Form 3800 (see instructions) | _ | |
| d | | | mum tax (attach Form 8801 or 8827) | | |
| e | Total credits. Ac | | | | 0. |
| 2 | | | rt II, line 7 | 2 | 0. |
| 3a b | Amount due from Amount due from | | 0044 | | |
| C | Amount due from | | 0007 | | |
| d | Amount due from | | | | |
| e | Other amounts d | | | | |
| f | | • | lines 3a through 3e | 3f | 0. |
| 4 | | | nd 3f (see instructions). Check if includes tax previously deferred under | <u> </u> | |
| - | | | x amount here | 4 | 0. |
| 5 | | | lity paid from Form 965-A, Part II, column (k) | | 0. |
| | | | | | |

Form 990-T (2023) Page 2

| Part | III · | Tax and Payments (continued) | | | | | | | | |
|--------|--------|--|---------------------------------------|------------------|----------------------|-----------|-----------|-----------------------|----------------------|-----------|
| 6 a | | ents: Preceding year's overpayment credited to the | ne current year | 6a | | | | | | |
| b | Curre | nt year's estimated tax payments. Check if section | n 643(g) election | | | | | | | |
| | applie | es | | 6b | | | | | | |
| С | | eposited with Form 8868 | | 6c | | | | | | |
| d | | gn organizations: Tax paid or withheld at source (s | | | | | | | | |
| е | | up withholding (see instructions) | | | | | | | | |
| f | | t for small employer health insurance premiums (a | | | | | | | | |
| g | | ve payment election amount from Form 3800 | | | | | | | | |
| h | | ent from Form 2439 | | | | | | | | |
| i | | from Form 4136 | | | | | | | | |
| j | Other | (see instructions) | STATEMENT 1 | 6 j | 22,2 | 30. | | | | |
| 7 | | payments. Add lines 6a through 6j | | | | | 7 | 22 | , 23 | 0. |
| 8 | Estim | ated tax penalty (see instructions). Check if Form | 2220 is attached | | | . 🔲 | 8 | | | |
| 9 | | ue. If line 7 is smaller than the total of lines 4, 5, a | | | | · | 9 | | | |
| 10 | Overp | payment. If line 7 is larger than the total of lines 4 | , 5, and 8, enter amount over | paid | | | 10 | 22 | , 23 | 0. |
| 11 | Enter | the amount of line 10 you want: Credited to 202 | 4 estimated tax | | Refu | nded | 11 | 22 | , 23 | 0. |
| Part | IV S | Statements Regarding Certain Activiti | es and Other Informat | t ion (se | e instructions) | | | | | |
| 1 | At any | y time during the 2023 calendar year, did the orga | nization have an interest in o | r a signat | ure or other aut | hority | | Y | ′es I | No_ |
| | over a | a financial account (bank, securities, or other) in a | foreign country? If "Yes," the | organiza | tion may have t | o file | | | | |
| | FinCE | N Form 114, Report of Foreign Bank and Financia | al Accounts. If "Yes," enter th | e name o | f the foreign co | untry | | | | |
| | here | | | | | | | | | <u>X_</u> |
| 2 | During | g the tax year, did the organization receive a distri | bution from, or was it the gra | ntor of, o | r transferor to, a | a | | | | |
| | foreig | n trust? | | | | | | | | <u>X_</u> |
| | If "Ye | s," see instructions for other forms the organization | on may have to file. | | | | | | | |
| 3 | Enter | the amount of tax-exempt interest received or acc | crued during the tax year | | \$_ | | | | | |
| 4 | Enter | available pre-2018 NOL carryovers here \$ | Do not | include a | ny post-2017 N | OL carı | ryover | | | |
| | show | n on Schedule A (Form 990-T). Don't reduce the N | IOL carryover shown here by | any dedu | ction reported | on Part | I, line 6 | 6. | | |
| 5 | | 2017 NOL carryovers. Enter the Business Activity | • | | • | | | | | |
| | the ar | nounts shown below by any NOL claimed on any | Schedule A, Part II, line 17 fc | r the tax | year. See instru | ctions. | | | | |
| | | Business Activity Code | | | ailable post-201 | 7 NOL (| carryov | /er | | |
| | | | | \$ | | | | | | |
| | | | | \$ | | | | | | |
| | | | | \$ | | | | | | |
| | _ | | | \$ | | | | _ | _ | |
| 6 a | | ved for future use | | | | | | | | |
| Dort. | | | | | | | | | | |
| Part | | Supplemental Information | | | | | | | | |
| roviae | any a | dditional information. See instructions. | | | | | | | | |
| | | | | | | | | | | |
| | Ur | nder penalties of perjury, I declare that I have examined this return, | including accompanying schedules and | statements. | and to the best of m | v knowled | ge and b | elief, it is true. | | |
| Sign | co | rrect, and complete. Declaration of preparer (other than taxpayer) is | | | | | | | | |
| Here | PU | BLIC DISCLOSURE | | TVE: | DIRECTOR | | • | discuss this research | | 1 |
| | Si | gnature of officer Date | | | DIRECTOR | | tructions | | | No |
| | | <u> </u> | | Date | Check | if | _ | | | |
| na!e! | | | o orginaturo | υαιο | self-emp | | | v | | |
| Paid | | NEAL EVERT NEAL | EVERT (| 01/30 | | noyou | P | 000468 | 53 | |
| Prepa | | | | LTD. | Firm's | FIN | | L-1534 | | |
| Use C | חוע | 7760 FRANCE AVI | | | 1111113 | L11V | T. | | | |
| | | Firm's address BLOOMINGTON, MI | | | Phone | no. (| 952 | 831- | 0081 | 5 |
| | | | · · · · · · · · · · · · · · · · · · · | | 7 110110 | (| | 202 | , , , , , | _ |

Form **990-T** (2023)

| FORM 990-T OTHE | R CREDITS AND PAYMENTS | STATEMENT 1 |
|-------------------------------|------------------------|-------------|
| DESCRIPTION | | AMOUNT |
| SOLAR INSTALLATION - IRC SECT | ION 48 | 22,230. |
| TOTAL TO FORM 990-T, PAGE 2, | PART III, LINE 6J | 22,230. |

Form **4626**

Department of the Treasury Internal Revenue Service **Alternative Minimum Tax-Corporations**

Attach to your tax return.

Go to www.irs.gov/Form4626 for instructions and the latest information.

OMB No. 1545-0123

2023

Employer identification number SPRINGBOARD FOR THE ARTS 41-1690483 Is the corporation filing this form a member of a controlled group treated as a single employer under sections 59(k)(1)(D) and 52? Yes If "Yes," the corporation must complete Part V listing the names, EINs, and separate company financial statement income or loss for each member of the controlled group treated as a single employer taken into account in the determination of "applicable corporation" under section 59(k)(1)(D). X No Is the corporation filing this form a member of a foreign-parented multinational group (FPMG) within the meaning of section 59(k)(2)(B)? If "Yes," the corporation must complete Part V listing the names, EINs, and separate company financial statement income or loss for each member of the FPMG under section 59(k)(2)(B) Applicable Corporation Determination (Report all amounts in U.S. dollars.) If you have already determined in current or prior years you are an applicable corporation, skip Part I and continue to Part II. (c) Third Preceding (a) First Preceding (b) Second Preceding Year Ended Year Ended Year Ended Net income or loss per applicable financial statement(s) (AFS) (see inst): Consolidated net income or loss per the AFS of the corporation 1a Include AFS net income or loss of other includible entities (add net income and subtract net loss) 1b Exclude AFS net income or loss of excludible entities (add net loss and subtract net income) 1c d Adjustment for certain consolidating entries (see instructions) 1d Specified additional net income or loss item B. Reserved for future use 1e AFS net income or loss of all entities in the test group before adjustments. Combine lines 1a through 1d 1f Adjustments: 2 a Financial statements covering different tax years 2a Corporations that are not included on the taxpayer's consolidated return (see instructions) 2b c Pro-rata share of net income from controlled foreign corporations for which the corporation is a U.S. shareholder. If zero or less, enter -0-(see instructions for special rules if completing this form for an FPMG) 2c Amounts that are not effectively connected to a U.S. trade or business (see instructions for special rules if completing this form for an FPMG) 2d Certain taxes (see instructions) 2е Patronage dividends and per-unit retain allocations (cooperatives only) 2f Alaska native corporations 2g Certain credits (see instructions) 2h Mortgage servicing income 2i Tax-exempt entities (organizations subject to tax under section 511) ... 2i 2k Depreciation Qualified wireless spectrum 21 Covered transactions 2m Adjustments related to bankruptcy and insolvency 2n

20

2p

2q

LHA For Paperwork Reduction Act Notice, see separate instructions.

Certain insurance company adjustments

Adjustment P - Reserved for future use

Adjustment Q - Reserved for future use

3-year average annual AFSI (see instructions)

316231 02-12-24

Form 4626 (2023)

| Form 4 | 626 (2023) | | | | | Page 2 |
|--------|--|-----------|-----------------------|--------------|------|-------------------------|
| Part | Applicable Corporation Determination (Report all amount | s in U.S. | . dollars.) (continue | d) | | |
| 8 | Is line 7 more than \$1 billion? | | , | , | | |
| | Yes. Continue to line 9. | | | | | |
| | No. STOP here and attach to your tax return. | | | | | |
| 9 | Is the corporation a member of an FPMG within the meaning of section 59(| k)(2)(B)? | | | | |
| | Yes. Continue to line 10. | | | | | |
| | No. Continue to Part II. | | | | | |
| | | | (a) | (b) | | (c) |
| | | | First Preceding | Second Prece | ding | Third Preceding |
| | | | Year Ended | Year Ende | d | Year Ended |
| 10 | AFSI for purposes of the \$100 million test before adjustments: | | | | | |
| | AFSI from line 5 | 10a | | | | |
| b | Aggregation differences (see instructions) | | | | | |
| | Total AFSI for purposes of the \$100 million test before adjustments. | | | | | |
| | Combine lines 10a and 10b | 10c | | | | |
| 11 | Adjustments: | | | | | |
| а | Income not effectively connected to a U.S. trade or business | 11a | | | | |
| | Pro-rata share of CFC net income described in section 56A(c)(3) | | | | | |
| | (attach worksheet) (see instructions) | 11b | | | | |
| С | Reserved for future use - Other adjustments 1 | 11c | | | | |
| d | Reserved for future use - Other adjustments 2 | 11d | | | | |
| 12 | Total adjustments. Combine lines 11a and 11b | 12 | | | | |
| 13 | Total AFSI for purposes of the \$100 million test. Combine lines | | | | | |
| | 10c and 12 | 13 | | | | |
| 14 | AFSI of first, second, and third preceding tax years. Combine columns (a), | (b), and | (c) of line 13 | | 14 | |
| 15 | 3-year average annual AFSI for purposes of the \$100 million test | | | [| 15 | |
| 16 | Is line 15 \$100 million or more? | | | | | |
| | Yes. Continue to Part II. | | | | | |
| | No. STOP here. Attach to your tax return. | | | | | |
| | | | | | | Form 4626 (2023) |

| Pa | rt II Corporate Alternative Minimum Tax | _ | |
|--------|--|------------|---------|
| 1 | Net income or loss per applicable financial statement(s) (AFS) (see instructions): | | |
| а | Consolidated net income or loss per the AFS of the corporation | 1a | -1,000. |
| b | Include AFS net income or loss of other includible entities (add net income and subtract net loss) | 1b | |
| С | Exclude AFS net income or loss of excludible entities (add net loss and subtract net income) | 1c | |
| d | Adjustment for certain consolidating entries (see instructions) | 1d | |
| е | Specified additional net income or loss item D. Reserved for future use | 1e | |
| f | AFS net income or loss before adjustments. Combine lines 1a through 1d | 1f | -1,000. |
| 2 | Adjustments: | | , |
| a a | Financial statements covering different tax years | 2a | |
| b | Reserved for future use - Adjustment 2b | 2b | |
| c | | | |
| d | | 2d | |
| | Pro-rata share of net income from controlled foreign corporations for which the corporation is a U.S. | Zu | |
| е | · | 20 | |
| | | 2e | |
| t | Amounts that are not effectively connected to a U.S. trade or business | 2f | |
| g | Certain taxes. Enter the amount from Part III, line 7 | 2g | |
| h | 77 | 2h | |
| | Alaska native corporations | 2i | |
| j | Certain credits (see instructions) | 2 j | |
| k | Mortgage servicing income | 2k | |
| ı | Covered benefit plans described in section 56A(c)(11)(B) | 21 | |
| m | Tax-exempt entities (organizations subject to tax under section 511) | 2m | |
| n | Depreciation | 2n | |
| 0 | Qualified wireless spectrum | 20 | |
| р | Covered transactions | 2p | |
| q | Adjustments related to bankruptcy and insolvency | 2q | |
| r | Certain insurance company adjustments | 2r | |
| s | AFSI adjustment S - Reserved for future use | 2s | |
| t | AFSI adjustment T - Reserved for future use | 2t | |
| u | AFSI adjustment U - Reserved for future use | 2u | |
| z | Other (see instructions) | 2z | |
| 3 | Total adjustments. Combine lines 2a through 2z | 3 | |
| 4 | AFSI before financial statement net operating loss carryover. Combine lines 1f and 3 | 4 | -1,000. |
| 5 | Financial statement net operating loss (FSNOL) (see instructions) | 5 | |
| 6 | AFSI. Subtract line 5 from line 4. If zero or less, enter -0- | 6 | |
| 7 | Multiply line 6 by 15% (0.15) | 7 | |
| 8 | Corporate alternative minimum tax foreign tax credit (CAMT FTC). Enter amount from Part IV, Section I, line 6 (see inst) | 8 | |
| 9 | Tentative minimum tax. Subtract line 8 from line 7. If zero or less, enter -0-) | 9 | |
| 10 | Regular tax liability (see instructions) | 10 | |
| 11 | Base erosion minimum tax (see instructions) | 11 | |
| 12 | Combine lines 10 and 11 | 12 | |
| 13 | Alternative minimum tax. Subtract line 12 from line 9. If zero or less, enter -0 Enter here and on Form | | |
| | 1120, Schedule J, line 3, or the appropriate line of the corporation's income tax return | 13 | |
| Pa | rt III Adjustment for Certain Taxes Under Section 56A(c)(5) | | |
| 1 | Current income tax provision - Foreign | 1 | |
| 2 | Current income tax provision - Federal | 2 | |
| 3 | Deferred income tax provision - Foreign | 3 | |
| 4 | Defend the constitution of Endand | 4 | |
| 5 | Income taxes included in equity method investment income | 5 | |
| | Advisor A. Deserved for fatour and | 6a | |
| | Additional D. Donner of Grafia | 6b | |
| | | _ | |
| | Adjustment C - Reserved for future use | 6c | |
| | Adjustment D - Reserved for future use | 6d | |
| | Adjustment E - Reserved for future use | 6e | |
| | Adjustment F - Reserved for future use | 6f | |
| | 3 Adjustment G - Reserved for future use | 6g | |
| | n Adjustment H - Reserved for future use | 6h | |
| | : Income taxes in other places | 6z | |
| | | | |

Page 4 Form 4626 (2023)

| Pa | rt IV Alternative Minimum Tax - Corporations Foreign Tax Credit | | |
|-----|--|----|--|
| Sec | tion I - AMT Foreign Tax Credit | | |
| 1 | Domestic corporation AMT foreign income taxes: | | |
| а | Total foreign taxes paid or accrued as reported on Form 1118, Schedule B, | | |
| | Part I, column 2(j) 1a | | |
| b | Adjustment | | |
| С | Adjustment 1c | | |
| d | Adjustment 1d | | |
| е | Adjustment | | |
| f | Adjustment 1f | | |
| g | | | |
| 2 | Total domestic corporation AMT foreign income taxes. Combine lines 1a through 1g | 2 | |
| 3 | Allowable controlled foreign corporation (CFC) AMT foreign income taxes: | | |
| а | Pro-rata share of CFC AMT foreign income taxes from Part IV, Section II, line | | |
| | 11, column (n) 3a | | |
| b | Carryover of excess foreign taxes (from Part IV, Section III, line 4, column (vii)) | | |
| С | Total CFC AMT foreign income taxes. Add lines 3a and 3b | 3с | |
| d | Percentage specified in section 55(b)(2)(A)(i) 3d 15% | | |
| е | Pro-rata share of CFC net income described in section 56A(c)(3) (attach | | |
| | worksheet) (see instructions) | | |
| f | CFC AMT foreign tax credit limitation (multiply line 3d by line 3e) | 3f | |
| g | Allowable CFC AMT foreign income taxes (lesser of line 3c or line 3f) | 3g | |
| 4 | CAMT FTC Line 4 - Reserved for future use | 4 | |
| 5 | CAMT FTC Line 5 - Reserved for future use | 5 | |
| 6 | Total AMT foreign income taxes. Combine lines 2 and 3g. Enter this amount on Part II. line 8 | 6 | |

Springboard for the Arts

St. Paul, Minnesota

Financial Statements Auditor's Report For the Years Ended June 30, 2024 and 2023



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| EXHIBIT B: | Statement of Functional Expense – For the Year Ended June 30, 2024 with Comparative Totals for 20234 | ļ |
| EXHIBIT C: | Statement of Functional Expense – For the Year Ended June 30, 2023 | |
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| EXHIBIT E: | Statements of Cash Flows – For the Years Ended June 30, 2024 and 2023 7 | , |
| NOTES TO FINA | ANCIAL STATEMENTS8-1 | 16 |



Certified Public Accountants 7760 France Avenue S. Suite 940 Bloomington Minnesota 55435 952.831.0085 carpenterevert.com

INDEPENDENT AUDITOR'S REPORT

Board of Directors Springboard for the Arts St. Paul, Minnesota

Opinion

We have audited the accompanying financial statements of Springboard for the Arts (a nonprofit organization), which comprise the statement of financial position as of June 30, 2024 and 2023, and the related statements of activities, functional expenses, and cash flows for the years then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Springboard for the Arts as of June 30, 2024 and 2023, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Springboard for the Arts and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Springboard for the Arts ability to continue as a going concern within one year after the date that the financial statements are available to be issued.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements, including omissions, are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud
 or error, and design and perform audit procedures responsive to those risks. Such procedures include
 examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that
 are appropriate in the circumstances, but not for the purpose of expressing an opinion on the
 effectiveness of Springboard for the Arts internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting
 estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that
 raise substantial doubt about Springboard for the Arts ability to continue as a going concern for a
 reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control related matters that we identified during the audit.

Carpenta, Evet & Associate, LH.
Certified Public Accountants

Minneapolis, Minnesota January 30, 2025 2023

2024

FOR THE YEARS ENDED JUNE 30, 2024 AND 2023 SPRINGBOARD FOR THE ARTS STATEMENTS OF ACTIVITIES

| | į | | | 7N24 | | | | 7073 | | | |
|--|----------|---------------|----|----------------|---|-------------|---------------|--------------|-------------|-----|------------|
| | Wit | Without Donor | > | With Donor | | | Without Donor | With Donor | nor | | |
| | æ | Restrictions | Re | Restrictions | | Total | Restrictions | Restrictions | ons | | Total |
| Support and Revenue: | | | | | | | | | | | |
| Contributions of Financial Assets | ↔ | 553,381 | ❖ | 1,728,374 | ❖ | 2,281,755 | \$ 1,396,456 | \$ 8,67 | 8,672,803 | \$ | 10,069,259 |
| Government Grants | | 257,413 | | 65,000 | | 322,413 | 91,916 | 2 | 20,000 | | 111,916 |
| Program Fees | | 623,991 | | ¥ | | 623,991 | 653,601 | | ij | | 653,601 |
| Investment Income | | 167,491 | | • | | 167,491 | 42,093 | | à | | 42,093 |
| Other Income | | 6,089 | | Ŷ | | 680′9 | 29,677 | | ř | | 29,677 |
| Net Assets Released from Restrictions: | | | | | | | | | | | |
| Satisfaction of Purpose Restrictions | | 1,223,457 | | (1,223,457) | | 1) | 896,385 | 68) | (886,385) | | K) |
| Satisfaction of Time Restrictions | | 723,411 | | (723,411) | | 16 | 2,187,455 | (2,18 | (2,187,455) | | 1,00 |
| Satisfaction of Capital Restrictions | | 31. | | ä | | 90 | 218,500 | (21) | (218,500) | | (1) |
| Total Support and Revenue | | 3,555,233 | | (153,494) | | 3,401,739 | 5,516,083 | 5,39 | 5,390,463 | | 10,906,546 |
| Expense: | | | | | | | | | | | |
| Program Services: | | | | | | | | | | | |
| Community Development | | 720,799 | | ¥i | | 720,799 | 1,026,850 | | Ŷ | | 1,026,850 |
| Rural Programs | | 982,437 | | r) | | 982,437 | 936,872 | | Ė | | 936,872 |
| incubator | | 164,244 | | E. | | 164,244 | 139,298 | | 100 | | 139,298 |
| National Programs | | 426,178 | | /(#)) | | 426,178 | | | • | | (10) |
| Economic Opportunity | | 1,409,200 | | (m | | 1,409,200 | 1,123,655 | 79 | | | 1,123,655 |
| Total Program Services | | 3,702,858 | | * | | 3,702,858 | 3,226,675 | 61 | e ø | | 3,226,675 |
| Support Services: | | | | | | | | | | | |
| Management and General | | 571,116 | | × | | 571,116 | 462,658 | | Ĭ | | 462,658 |
| Fundraising | | 140,524 | | ı | | 140,524 | 129,498 | | 0 | | 129,498 |
| Total Support Services | | 711,640 | | • | | 711,640 | 592,156 | | | | 592,156 |
| Total Expense | | 4,414,498 | | | | 4,414,498 | 3,818,831 | | | | 3,818,831 |
| Channe in Not Accote | | (859 265) | | (153 494) | | (1 012 759) | 1 697 252 | 5 39 | 5 390 463 | | 7 087 715 |
| | | (002/000) | | (101/001) | | (00 (170(7) | 101/101/1 | | 6 | | |
| Net Assets - Beginning of Year | | 7,103,092 | | 7,090,348 | | 14,193,440 | 5,405,840 | 1,69 | 1,699,885 | | 7,105,725 |
| Net Assets - End of Year | € | 6,243,827 | ν | 6,936,854 | s | 13,180,681 | \$ 7,103,092 | \$ 7,09 | 7,090,348 | -γ- | 14,193,440 |

The accompanying Notes to Financial Statements are an integral part of these statements.

STATEMENT OF FUNCTIONAL EXPENSE FOR THE YEAR ENDED JUNE 30, 2024 WITH COMPARATIVE TOTALS FOR 2023

| | | | | | 20 | 2024 | | | | | 2023 |
|-----------------------------------|-------------|------------|------------|------------|--------------|--------------|-------------|------------------|------------|--------------|--------------|
| | | | Program | Services | | | | Support Services | | | |
| | | | | | | Total | | | Total | Total | Total |
| | Community | Rural | | National | Economic | Program | Management | | Support | ΑII | All |
| | Development | Programs | Incubator | Programs | Opportunity | Services | and General | Fundraising | Services | Services | Services |
| Salaries | \$ 337,955 | \$ 321,408 | \$ 96,392 | \$ 147,367 | \$ 387,593 | \$ 1,290,715 | \$ 248,192 | \$ 115,706 | \$ 363,898 | \$ 1,654,613 | \$ 1,548,643 |
| Employee Benefits | 40,381 | 39,971 | 8,324 | 16,293 | 41,392 | 146,361 | 45,108 | ı | 45,108 | 191,469 | 169,493 |
| Payroll Taxes | 29,627 | 28,280 | 8,080 | 14,813 | 33,666 | 114,466 | 20,200 | 1 | 20,200 | 134,666 | 102,485 |
| Total Personnel Costs | 407,963 | 389,659 | 112,796 | 178,473 | 462,651 | 1,551,542 | 313,500 | 115,706 | 429,206 | 1,980,748 | 1,820,621 |
| Professional Services | 194,947 | 237,122 | 18,413 | 198,250 | 411,124 | 1,059,856 | 67,770 | 8,466 | 76,236 | 1,136,092 | 788,913 |
| Grant Expense | ř | 153,416 | 341 | *** | 450,000 | 603,416 | œ. | X | ě | 603,416 | 403,180 |
| Hospitality | 17,266 | 54,176 | 39 | 2,051 | 7,358 | 80,851 | 26,251 | 1111 | 26,251 | 107,102 | 124,457 |
| Occupancy | 060'9 | 67,319 | 1,004 | 2,007 | 6,101 | 82,521 | 7,754 | * | 7,754 | 90,275 | 79,627 |
| Telephone and Internet | 16,500 | 17,428 | 3,225 | 9,019 | 17,158 | 63,330 | 19,610 | uts | 19,610 | 82,940 | 73,602 |
| Printing and Copying | 3,421 | 2,638 | 799 | 497 | 14,780 | 22,135 | 22,136 | 6,102 | 28,238 | 50,373 | 49,101 |
| Travel and Mileage | 14,814 | 11,728 | 1,115 | 7,703 | 1,271 | 36,631 | 2,921 | 8,515 | 11,436 | 48,067 | 151,862 |
| Supplies | 6,881 | 18,454 | 1,804 | 2,023 | 11,173 | 40,335 | 6,347 | | 6,347 | 46,682 | 68,747 |
| Equipment Repairs and Maintenance | 619 | 312 | *11 | | •0) | 931 | 40,507 | | 40,507 | 41,438 | 2,266 |
| Miscellaneous | 26,123 | 470 | 1.5 | 2,056 | 160 | 28,809 | 10,617 | 9 | 10,617 | 39,426 | 47,659 |
| Insurance | 1,961 | 3,168 | 2,555 | 1,365 | 1,960 | 11,009 | 5,004 | Ñ | 5,004 | 16,013 | 16,874 |
| Advertising and Marketing | 325 | 2,473 | 1 | 20 | 184 | 3,032 | 12,894 | · · | 12,894 | 15,926 | 17,226 |
| Professional Development | 1,295 | 1,365 | 396 | * | 45 | 3,101 | 12,433 | ř | 12,433 | 15,534 | 17,614 |
| Postage | 477 | 029 | 59 | 207 | 2,967 | 4,380 | 360 | 1,735 | 2,095 | 6,475 | 11,241 |
| Bank Charges and Interest Expense | 552 | 474 | 513 | 913 | 704 | 3,156 | 1,448 | ì | 1,448 | 4,604 | 2,657 |
| Bad Debts | 950 | ila. | • | (S) | 1 | Q. | 2.0 | | ä | 2 | 29,400 |
| Depreciation | 21,565 | 21,565 | 21,565 | 21,564 | 21,564 | 107,823 | 21,564 | ï | 21,564 | 129,387 | 110,784 |
| Total Expense | \$ 720,799 | \$ 982,437 | \$ 164,244 | \$ 426,178 | \$ 1,409,200 | \$ 3,702,858 | \$ 571,116 | \$ 140,524 | \$ 711,640 | \$ 4,414,498 | \$ 3,818,831 |
| | | | | | | | | | | | |

STATEMENT OF FUNCTIONAL EXPENSE FOR THE YEAR ENDED JUNE 30, 2023

| | | | | Prograi | Program Services | | | | | | | Suppo | Support Services | | | | |
|--|--------------|------------|--------------|---------|------------------|----|-------------|----|-----------|-------|--------------|-------|------------------|----|----------|----|-----------|
| | | | | | | | | | Total | | | | | | Total | | Total |
| | Community | Rural | a | | | EC | Economic | 4 | Program | Mana | Management | | | S | Support | | ₩. |
| | Development | Programs | ams | nc | Incubator | Op | Opportunity | S | Services | and (| and General | Fū | Fundraising | S | Services | σ, | Services |
| Salaries | \$ 405,077 | \$ 31 | 318,849 | \$ | 88,225 | \$ | 464,394 | \$ | 1,276,545 | \$ | 168,052 | \$ | 104,046 | \$ | 272,098 | ş | 1,548,643 |
| Employee Benefits | 47,878 | m | 38,255 | | 9,902 | | 54,296 | | 150,331 | | 10,687 | | 8,475 | | 19,162 | | 169,493 |
| Payroll Taxes | 28,685 | 2 | 22,978 | | 5,948 | | 32,612 | | 90,223 | | 7,138 | | 5,124 | | 12,262 | | 102,485 |
| Total Personnel Costs | 481,640 | 38 | 380,082 | | 104,075 | a. | 551,302 | | 1,517,099 | | 185,877 | | 117,645 | | 303,522 | | 1,820,621 |
| Professional Services | 310,105 | 19 | 195,902 | | 14,806 | | 193,301 | | 714,114 | | 886'69 | | 5,411 | | 74,799 | | 788,913 |
| Grant Expense | Ē | 12 | 120,430 | | 1,000 | | 281,750 | | 403,180 | | χ. | | | | ŝ | | 403,180 |
| Hospitality | 58,427 | U 1 | 50,719 | | 18 | | 2,268 | | 111,432 | | 13,025 | | #tt | | 13,025 | | 124,457 |
| Occupancy | 18,227 | (1) | 35,619 | | 3,878 | | 7,682 | | 65,406 | | 14,221 | | 317 | | 14,221 | | 79,627 |
| Telephone and Internet | 16,934 | - | 10,856 | | 2,540 | | 13,024 | | 43,354 | | 24,516 | | 5,732 | | 30,248 | | 73,602 |
| Printing and Copying | 3,706 | | 6,764 | | 82 | | 11,641 | | 22,193 | | 26,198 | | 710 | | 26,908 | | 49,101 |
| Travel and Mileage | 47,959 | ω. | 86,951 | | 1,516 | | 14,418 | | 150,844 | | 1,018 | | ï | | 1,018 | | 151,862 |
| Supplies | 18,803 | 7 | 19,225 | | 480 | | 10,928 | | 49,436 | | 19,311 | | X: | | 19,311 | | 68,747 |
| Equipment Repairs and Maintenance | 1,863 | | 403 | | | | é | | 2,266 | | ē | | C: | | Ē | | 2,266 |
| Miscellaneous | 6,091 | | 1,075 | | 3,750 | | 4,928 | | 15,844 | | 31,815 | | (941) | | 31,815 | | 47,659 |
| Insurance | 1,364 | | 1,364 | | 1,364 | | 1,364 | | 5,456 | | 11,418 | | ä | | 11,418 | | 16,874 |
| Advertising and Marketing | 1,258 | | 4,123 | | ı | | 3,325 | | 8,706 | | 8,520 | | а | | 8,520 | | 17,226 |
| Professional Development | 189 | | 2,260 | | 393 | | 176 | | 3,018 | | 14,596 | | 0 | | 14,596 | | 17,614 |
| Postage | 284 | | 610 | | 11 | | 2,023 | | 2,928 | | 8,313 | | κ | | 8,313 | | 11,241 |
| Bank Charges and Interest Expense | 386 | | 347 | | 349 | | 347 | | 1,429 | | 4,228 | | e | | 4,228 | | 5,657 |
| Bad Debts | 29,400 | | ć | | 1 | | T. | | 29,400 | | (1) | | 300 | | | | 29,400 |
| Depreciation | 30,214 | | 20,142 | | 5,036 | | 25,178 | | 80,570 | | 30,214 | | | | 30,214 | | 110,784 |
| Total Expense | \$ 1,026,850 | \$ 93 | 936,872 | \$ | 139,298 | ş | 1,123,655 | Ϋ́ | 3,226,675 | \$ | 462,658 | ❖ | 129,498 | φ. | 592,156 | ν | 3,818,831 |

The accompanying Notes to Financial Statements are an integral part of this statement.

SPRINGBOARD FOR THE ARTS STATEMENTS OF FINANCIAL POSITION JUNE 30, 2024 AND 2023

| | 2024 | 2023 |
|----------------------------------|---------------|---------------|
| <u>ASSETS</u> | | |
| Current Assets: | | |
| Cash and Cash Equivalents | \$ 3,608,609 | \$ 3,091,161 |
| Investments | 4,500,000 | 2,522,685 |
| Accounts Receivable | 190,721 | 127,753 |
| Grants Receivable | 2,515,100 | 4,212,500 |
| Prepaid Expense | 107,818 | 55,873 |
| Total Current Assets | 10,922,248 | 10,009,972 |
| Grants Receivable | 325,002 | 1,925,788 |
| Property - Net | 4,024,919 | 4,120,403 |
| TOTAL ASSETS | \$ 15,272,169 | \$ 16,056,163 |
| | | |
| 2 | | |
| LIABILITIES AND NET ASSETS | | |
| Current Liabilities: | | |
| Accounts Payable | \$ 174,502 | \$ 140,716 |
| Accrued Salaries | 63,660 | 189,317 |
| Deferred Revenue | 1,501 | 13,505 |
| Fiscal Sponsorship | 1,851,825 | 1,519,185_ |
| Total Current Liabilities | 2,091,488 | 1,862,723 |
| Net Assets: | | |
| Without Donor Restrictions: | | |
| Undesignated | 4,268,827 | 5,773,480 |
| Board Designated | 1,975,000 | 1,329,612 |
| Total Without Donor Restrictions | 6,243,827 | 7,103,092 |
| With Donor Restrictions | 6,936,854 | 7,090,348 |
| Total Net Assets | 13,180,681 | 14,193,440 |
| TOTAL LIABILITIES AND NET ASSETS | \$ 15,272,169 | \$ 16,056,163 |

SPRINGBOARD FOR THE ARTS STATEMENTS OF CASH FLOWS FOR THE YEARS ENDED JUNE 30, 2024 AND 2023

| | 2024 | 2023 |
|--|---|-----------------|
| Increase (Decrease) in Cash and Cash Equivalents | | |
| Cash Flows from Operating Activities: | | |
| Change in Net Assets | \$ (1,012,759) | \$ 7,087,715 |
| Depreciation | 129,387 | 110,784 |
| Increases (Decreases) in Operating Liabilities: | | |
| Accounts Payable | 33,786 | 116,622 |
| Accrued Salaries | (125,657) | 115,974 |
| Deferred Revenue | (12,004) | 3,412 |
| Fiscal Sponsorship | 332,640 | 280,205 |
| Decreases (Increases) in Operating Assets: | | |
| Accounts Receivable | (62,968) | (80,023) |
| Grants Receivable | 3,298,186 | (4,635,655) |
| Prepaid Expense | (51,945) | (8,090) |
| Security Deposit | :=: : : : : : : : : : : : : : : : : : : | 1,963 |
| Net Cash Provided by Operating Activities | 2,528,666 | 2,992,907 |
| Cash Flows from Investing Activities: | | |
| Purchases of Property | (33,903) | (89,591) |
| Proceeds from Redemption of Investments | 4,522,685 | 518,753 |
| Purchases of Investments | (6,500,000) | (2,523,931) |
| Net Cash (Used) by Investing Activities | (2,011,218) | (2,094,769) |
| Cash Flows from Financing Activities: | | |
| Principal Payments on Notes Payable | 22 | (497,959) |
| Net Cash (Used) by Financing Activities | - | (497,959) |
| | | |
| Net Increase in Cash and Cash Equivalents | 517,448 | 400,179 |
| Cash and Cash Equivalents - Beginning of Year | 3,091,161 | 2,690,982 |
| Cash and Cash Equivalents - End of Year | \$ 3,608,609 | \$ 3,091,161 |

1. Summary of Significant Accounting Policies

Organizational Purpose

Springboard for the Arts (Springboard) is a nonprofit arts service organization incorporated in the State of Minnesota under the nonprofit corporation act. Springboard's mission is to support artists with the tools to make a living and a life, and to build just and equitable communities full of meaning, joy, and connection.

Springboard serves artists and organizations working in all artistic disciplines in the State of Minnesota and surrounding Upper Midwest region: primarily through workshops, counseling, consulting, and telephone and website information and referral, and sharing program models nationally.

Springboard's programs are as follows:

<u>Community Development</u> – A program that fosters vibrant, equitable, and inclusive environments by forging vital connections between artists and their communities. Operating both locally and nationally, we collaborate with city governments, neighborhood organizations, private institutions, and community-centric groups to harness artists' power in community development, creative place making, and innovative problem-solving.

Over the past year, our Community Development team has led a range of workshops, activations, and gatherings that engaged local neighborhoods like Frog town and Rondo, as well as rural and urban areas such as the Iron Range, Chicago, and Rapid City. We trained and supported artists in creating community-engaged activities, including short films, music performances, and interactive art projects. We also continued advancing our Guaranteed Basic Income initiatives, focusing on direct cash programs and narrative work that emphasize the role of artists in social and economic justice movements.

In addition to these efforts, we expanded our Artists Respond program, which supports artists in addressing community challenges through creative projects. This year, we added to our Ready Go roster, which connects communities with mobile art tools that encourage interaction and engagement. We also partnered with Project for Pride in Living to develop equitable public engagement strategies, helping neighborhoods envision new possibilities for their community.

<u>Rural Programs</u> —A program that supports rural artists and communities in the Upper Midwest through career development workshops and consultations, a resource center, a visiting artist program and community space in Fergus Falls, a rural artist Fellowship, convenings that support geographic exchange, and customized support for rural leaders interested in collaborating with their creative community.

Our local programs for artists in Otter Tail County focus on direct resources and support, including a resource center and community space in downtown Fergus Falls, an equipment lending library, a guaranteed minimum income program, and ongoing workshops and consultations for artists. These local programs served approximately 215 artists and approximately 3,000 community members in FY24.

Summary of Significant Accounting Policies (continued)

Organizational Purpose (continued)

Our regional / national programs include the Rural Regenerator Fellowship, supports a cohort of 12 artists across the Upper Midwest with an unrestricted stipend to support their work, learning and exchange; the Rural Futures Summit an annual convening which gathers 150 creative leaders from across the Upper Midwest for 3 days of workshops, art making and celebration; the Falls Community Arts Exchange which brings 8 artists to the Fergus Falls community each year to learn from the local arts and creative community, and deepen their creative practice; and Artists on Main Street, which supports small communities with the tools and resources they need to involve artists and creatives with downtown revitalization. These regional/national programs served approximately 180 artists, 40 rural community leaders, and 1,000 community members in FY24.

<u>Incubator</u> – A program that provides fiscal sponsorship for arts groups and individual artist projects that do not want (or are not ready) to become tax-exempt nonprofit organizations. In FY24 we managed revenues for the 204 artist-led projects in the program during that period.

<u>National Programs</u> – Springboard's national work encompasses our virtual technical assistance program, Art-Train, and the Creative Change Coalition.

Launched in April 2021 to address the federal funding opportunity provided through the American Rescue Plan Local Fiscal Recovery Fund, Art-Train has trained nearly 1000 artists and organization & agency practitioners across the nation to date. Art-Train equips practitioners with tools to design and support cross-sector, equity-centered, locally-rooted and culture-based collaborations that address recovery, rebuilding, and ongoing community and economic development.

The Creative Change Coalition is Springboard's newest national program. The Creative Change Coalition is a national coalition of place-based community organizations that center people, creativity, and equity. The coalition includes regular, public, and free technical assistance webinars, field conversations, discussion and connection opportunities for coalition members, as well as additional resources and initiatives aimed at increasing visibility and efficacy of the field of creative, place-based, community informed work.

<u>Economic Opportunity</u> — A program that encompasses professional development resources for artists, economic opportunity programs, access to health and legal resources, and physical resource centers.

In FY24, Springboard continued to build the capacity of our Resource Center for artists, offering computer workstations outfitted with graphic and slide scanners, Adobe Creative Cloud, Microsoft Office, a publications library, and other grant-making and opportunity databases. We expanded on our in-person 1:1 TA and monthly Special Topic clinics and developed a curriculum around in-person photo documentary sessions. Our A/V Closet allows artists to check out art technology such as cameras and lights. Springboard has continued their legal referral service, connecting over 100 artists with one-on-one attorney referrals in FY24.

1. Summary of Significant Accounting Policies (continued)

Organizational Purpose (continued)

In FY24, Springboard's Professional Development programs served 3,031 individual artists and community members through panels, workshops, legal clinics, and participation at leading local and national conferences. Springboard presented 106+ workshops on business skills for artists and professional development, 1062 individual consultations, and presented at conferences locally and nationally highlighting our content, artist services, and mission. In FY24, Springboard expanded its pool of Artist Career Consultants and Work of Art workshop facilitators to reach broader communities, audiences, and partners. WOA workshops continued the transition from Zoom to hybrid/in-person workshops. We also had an Artist Resource Fair with 25 vendors and had an attendance of 50+ artists.

In FY24, Springboard maintained the Guaranteed Minimum Income pilot of 75 total artists, which includes 50 within the Rondo/Frog town neighborhood and 25 in Otter Tail County, as a way to supplement, rather than replace the existing social safety net and a tool for racial and gender equity.

The Growth Fund continued to expand in FY24, providing \$2,500 to MN artists and creative business owners to help sustain or scale their businesses. This program supported 50 artists.

Within the makers-to-market program, Springboard executed two pop-up markets (Last Minute Gifts and Spring POP!), with an average of 35 makers and vendors and 300 attendees per event.

Fund Accounting

In order to observe the limitation and restrictions placed on resources available to Springboard, the accounts are maintained in accordance with the principles of fund accounting. This is the procedure whereby resources are classified for accounting and reporting purposes into net asset groupings established according to their nature and restrictions. A description of the groupings is as follows:

<u>Net Assets without Donor Restrictions</u> – Net assets available for use in general operations and not subject to donor-imposed restrictions. These net assets include both board designated and undesignated amounts. Property is reported as net assets without donor restrictions.

<u>Net Assets with Donor Restrictions</u> – Net Assets subject to donor-imposed restrictions. Some donor-imposed restrictions are temporary in nature, such as those that will be met by the passage of time or other events specified by the donor. Springboard reports contributions restricted by donors as increases in net assets with donor restrictions, depending on the nature of the restrictions. When a restriction expires, net assets with donor restrictions are reclassified to net assets without donor restrictions.

Investments

Springboard carries its investments at market value.

1. Summary of Significant Accounting Policies (continued)

Cash and Cash Equivalents

For purposes of the statement of cash flows, Springboard considers all highly liquid debt instruments purchased with an original maturity of three months or less to be cash equivalents.

Accounts Receivable and Doubtful Accounts

Springboard extends credit to its customers on terms it establishes for individual customers. Receivables are recorded at amounts billed and are generally due when billed. Amounts outstanding for more than 30 days are considered delinquent. Accounts receivable are generally uncollateralized and Springboard does not charge interest on accounts receivable balances. Springboard reviews accounts receivable balances on a periodic basis and writes off delinquent receivables when they are considered uncollectible. No allowance for credit losses has been provided as all accounts receivable are considered collectable.

Promises-To-Give (Grants Receivable)

Unconditional promises-to-give are recognized in the period the promises are made. Conditional promises-to-give are recognized when the conditions on which they depend are substantially met, that is, when the conditional promise becomes unconditional.

Property

All major expenditures above \$3,000 for property are capitalized at cost. Depreciation is provided through the use of the straight-line method.

Fiscal Sponsorship

Springboard is a fiscal sponsor for several unincorporated entities. Only the cash held and the corresponding liability are recorded in the financial statements.

Leases

Springboard determines if an arrangement is or contains a lease at inception. Leases are included in right-of-use (ROU) assets and lease liabilities in the statement of financial position. ROU assets and lease liabilities reflect the present value of the future minimum lease payments over the lease term, and ROU assets may also include prepaid or accrued rent. Operating lease expense is recognized on a straight-line basis over the lease term. Springboard does not report ROU assets and leases liabilities for its short-term leases (leases with a term of 12 months or less). Instead, the lease payments of those leases are reported as lease expense on a straight-line basis over the lease term. All leases are short term leases as of June 30, 2024.

1. Summary of Significant Accounting Policies (continued)

Revenue and Revenue Recognition

Springboard recognizes contributions when cash, securities or other assets, an unconditional promise to give, or a notification of a beneficial interest is received. Conditional promises to give, that is, those with a measurable performance or other barrier, and a right of return, are not recognized until the conditions on which they depend have been substantially met.

A portion of Springboard's revenue is derived from government grants which are conditioned upon certain performance requirements and/or the incurrence of allowable qualifying expenses. Amounts received are recognized as revenue when Springboard has incurred expenditures in compliance with specific contract or grant provisions. Amounts received prior to incurring qualifying expenditures are reported as refundable advances in the statement of financial position. No amounts have been received in advance under government grants.

Springboard recognizes program service fees when the performance obligations of providing the services are met. Deferred revenue is recorded when amounts are received, but the revenue is not yet earned.

The following provides information about significant changes in deferred revenue for the years ended June 30:

| | | 2024 | 2023 |
|--------------------------------------|-------------|----------|---------------------|
| Deferred Revenue – Beginning of Year | \$ | 13,505 | \$ 10,093 |
| Decreases due to revenue recognized | | (13,505) | (10,093) |
| Increases due to cash received | | 1,501 | 13,505 |
| Deferred Revenue – End of Year | \$ | 1,501 | \$ <u>13,505</u> |

Income Tax

Springboard has a tax-exempt status under Section 501(c)(3) of the Internal Revenue Code and has adopted *Accounting for Uncertainty in Income Taxes*, ASC 740-10. Springboard's policy is to evaluate uncertain tax positions, at least annually, for the potential for income tax exposure from unrelated business income or from loss of nonprofit status. Springboard continues to operate consistent with its original exemption application and each year takes the necessary actions to maintain its exempt status. It has been classified as an organization that is not a private foundation under the Internal Revenue Code and charitable contributions by donors are tax deductible. In compliance with its exempt status, Springboard annually files a Return of Organization Exempt from Income Tax (Form 990).

Functional Allocation of Expense

Salaries and related expenses are allocated on job descriptions and the best estimates of management. Expenses, other than salaries and related expenses which are not directly identifiable by program or supporting service, are allocated based on the best estimates of management.

Summary of Significant Accounting Policies (continued)

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Subsequent Events

Springboard has evaluated the effect that subsequent events would have on the financial statements through January 30, 2025, which is the date financial statements were available to be issued.

2. Significant Concentrations of Credit Risk

Springboard provides services in the state of Minnesota and surrounding upper Midwest. In addition, grants and accounts receivable are from local residents, national foundations, governments or institutions. Furthermore, approximately 68% of total grant receivables are from a single granter at year end June 30, 2024.

Concentrations of Credit Risk Arising from Cash Deposits in Excess of Insured Limits

At June 30, 2024 and 2023, Springboard held funds at a local financial institution in excess of federally insured limits.

3. <u>Investments</u>

Springboard held the following investments as of:

| | | June | 30, | |
|-------------------------|--------------|--------------|--------------|--------------|
| | 2024 | | 20 | 23 |
| | | Market | | Market |
| | Cost | Value | Cost | Value |
| Certificates of Deposit | \$ 4,500,000 | \$ 4,500,000 | \$ 2,500,000 | \$ 2,522,685 |

Investment income consisted of interest income on certificates of deposit and other money market savings accounts.

4. Fair Value of Financial Instruments

Fair value is defined as the price that an organization would receive upon selling an investment in an orderly transaction to an independent buyer in the principal or most advantageous market for the investment. Various inputs are used in determining the value of investments. The Organization established a three-tier hierarchy of inputs to establish a classification of fair value measurements for disclosure purposes. The three-tier hierarchy of inputs is summarized in the three broad levels listed below:

Level 1 — Quoted prices in active markets for identical investments.

Level 2 – Other significant observable inputs (including quoted prices for similar investments, interest rates, prepayment speeds, credit risk, etc.)

Level 3 – Significant unobservable inputs.

The following is a summary of the inputs used to determine the fair value of the investments at:

| | | June 30, 2024 | | | |
|-------------------------|-------------------------------|---------------------------------------|----------------|------------------------------|--|
| Certificates of Deposit | <u>Level 1</u> <u>\$ -</u> | <u>Level 2</u> <u>\$ 4,500,000</u> | <u>Level 3</u> | Total \$ 4,500,000 | |
| | i - | June 30, 2023 | | | |
| Certificates of Deposit | <u>Level 1</u> \$ - | <u>Level 2</u> \$ 2,522,685 | <u>Level 3</u> | <u>Total</u> \$ 2,522,685 | |

5. Grants Receivable

Springboard had the following grants receivable as of June 30:

| | 202 | <u> 4 </u> | 2023 |
|--|--------------|---|------------------------|
| Due in the Year Ending, | | | |
| 2024 | \$ | 141 | \$ 4,212,500 |
| 2025 | 2,51 | 5,100 | 1,696,985 |
| 2026 | 38 | 33,000 | 383,000 |
| | 2,89 | 8,100 | 6,292,485 |
| Less Discount | 5 | 7,998 | 154,197 |
| Net Grants Receivable | 2,84 | 0,102 | 6,138,288 |
| Current Portion-Net | 2,51 | 5,100 | 4,212,500 |
| Long-term Portion-Net | \$ 32 | 5,002 | \$ 1,925,788 |
| Net Grants Receivable Current Portion-Net | 2,84 2,51 | 0,102 5,100 | 6,138,288 4,212,500 |

6. Property

Springboard owned the following property as of:

| | June 30, | | Estimated |
|-------------------------------|---------------------|---------------------|---------------------|
| | 2024 | 2023 | Useful Lives |
| Land | \$ 765,000 | \$ 765,000 | |
| Building | 3,388,648 | 3,388,648 | 39 years |
| Furniture and Equipment | 280,320 | 243,638 | 5 - 10 years |
| Leasehold Improvements | 6,000 | 6,000 | 3 - 10 years |
| | 4,439,968 | 4,403,286 | |
| Less Accumulated Depreciation | 415,049 | <u>282,883</u> | |
| | <u>\$ 4,024,919</u> | <u>\$ 4,120,403</u> | |

Depreciation expense of \$129,387 and \$110,784 was recorded for the years ended June 30, 2024 and 2023, respectively.

7. <u>Designated Net Assets</u>

Springboard's Board of Directors has designated funds for the following as of:

| | J <u>u</u> | June 30, | | |
|------------------------------------|--------------|--------------|--|--|
| , | 2024 | 2023 | | |
| Operating Reserve | \$ 750,000 | \$ 1,329,612 | | |
| Building and Capital Asset Reserve | 675,000 | - | | |
| Opportunity Reserve | 550,000 | | | |
| | \$ 1,975,000 | \$ 1,329,612 | | |

8. Net Assets With Donor Restrictions

Net Assets with Donor Restrictions consisted of amounts for the following as of:

| | June | June 30, | | |
|--|---------------------|---------------------|--|--|
| | 2024 | 2023 | | |
| Restrictions that Expire: | | | | |
| Subject to Expenditures for a Specified Purpose: | | | | |
| Community Programs | \$ 1,114,917 | \$ 746,500 | | |
| Rural Programs | 608,000 | 745,500 | | |
| Subject to Expenditures for Future Operations: | | | | |
| Subsequent Fiscal Years | 5,213,937 | <u>5,598,348</u> | | |
| Total | <u>\$ 6,936,854</u> | <u>\$ 7,090,348</u> | | |

In the year ended June 30, 2024, Springboard determined that restricted rural program funds had been satisfied prematurely. To correct this error, \$480,000 was shifted from 2023 beginning net assets without donor restrictions to 2023 beginning net assets with donor restrictions.

Compensated Absences

Employees of Springboard are entitled to paid vacation and sick time under Springboard's flexible vacation policy. It is impracticable to estimate the amount of compensation for future absences, and accordingly, no liability has been recorded in the accompanying financial statements. Springboard's policy is to recognize these costs when actually paid to employees.

10. Pension Plan

Springboard maintains a Simple Individual Retirement Account plan that covers those employees who meet eligibility requirements. Employer contributions of \$35,543 and \$27,425 were made for the years ending June 30, 2024 and 2023, respectively.

11. Liquidity and Availability

The following represents the Springboard's financial assets at:

| | June 30, | |
|--|------------------|--------------|
| | 2024 | 2023 |
| Financial Assets: | | |
| Cash | \$ 3,608,609 | \$ 3,091,161 |
| Investments | 4,500,000 | 2,522,685 |
| Accounts Receivable | 190,721 | 127,753 |
| Grants Receivable-Current | <u>2,457,102</u> | 4,212,500 |
| Total Financial Assets | 10,756,432 | 9,954,099 |
| Less: Assets Not Available to be Used within One Year: | | |
| Net Assets with Donor Restrictions | 6,936,854 | 7,090,348 |
| Board Designated Funds | 1,975,000 | 1,329,612 |
| Net Assets with Restrictions to be met within a year | (6,135,464) | (3,187,879) |
| Total Assets Not Available for General Expenditures | | |
| Within One Year | 2,776,390 | 5,232,081 |
| Financial Assets Available for General Expenditures | | |
| Within One Year | \$ 7,980,042 | \$ 4,722,018 |

Springboard's Board Designated Funds are not considered available for use within one year but could be available for use with a board resolution. As part of Springboard's liquidity plan, Springboard has a policy to structure its financial assets to be available as its general expenditures, liabilities and other obligations come due.