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Form **990**

Department of the Treasury

Address change

Name change

Check if applicable:

For the 2012 calendar year, or tax year beginning

Doing Business As

C Name of organization River Arts of Morrisville, Inc.

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

Return of Organization Exempt From Income Tax

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

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

2012, and ending

Room/suite

1/1

OMB No. 1545-0047

2012

Open to Public Inspection

/31 , 20 12

D Employer identification number

03-0368569

E Telephone number

802-888-1261 Initial return City, town or post office, state, and ZIP code Terminated G Gross receipts \$ 206.214. Morrisville, VT 05661 Amended return H(a) Is this a group return for affiliates? 🔲 Yes 🗹 No F Name and address of principal officer: Application pending H(b) Are all affiliates included? Yes No SAME AS C ABOVE If "No," attach a list. (see instructions) 501(c) () ◀ (insert no.) 🔲 4947(a)(1) or 🔲 527 **√** 501(c)(3) Tax-exempt status: Website: ▶ **WWW.RIVERARTSVT.ORG** H(c) Group exemption number ▶ Form of organization: ✓ Corporation ☐ Trust ☐ Association ☐ Other ▶ L Year of formation: M State of legal domicile: Part I Summary Briefly describe the organization's mission or most significant activities: CREATING A MULTI-GENERATIONAL ARTS AND CULTURAL CENTER THAT PRESENTS ART PROGRAMS FOR THE COMMUNITY. Activities & Governance Check this box ▶ ☐ If the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 4 14 5 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 30 6 Total number of volunteers (estimate if necessary) 6 52 Total unrelated business revenue from Part VIII, column (C), line 12 7a 7a 0. Net unrelated business taxable income from Form 990-T, line 34 0. **Current Year** Contributions and grants (Part VIII, line 1h) . 170,619. 134,676. Revenue Program service revenue (Part VIII, line 2g) 9 48,378. 57,642. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 97. 33. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 11 22,579. 13,863. Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 241,673. 206,214. Grants and similar amounts paid (Part IX, column (A), lines 1-3) . 13 14 Benefits paid to or for members (Part IX; column (A), line (4) Salaries, other compensation, employee benefits/(Part XI, column (A) 15 lines 5-10) 150,379. 164,281. Professional fundraising fees (Part IX, column (A), line 11e) 16a Total fundraising expenses (Part & column (D) pline 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 17 129,325 79,753. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 18 279,704. 244,034. Revenue less expenses. Subtract line (8 from line) 12. U 19 -38,031 -37,820. End of Year 20 Total assets (Part X, line 16) 859,334. 818,745. 21 Total liabilities (Part X, line 26) . . 42,699 39,930. 22 Net assets or fund balances. Subtract line 21 from line 20 816,635. 778,815. 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 Sian Here Type or print name and title Date Pnnt/Type preparer's name Preparer's signature Check | f **Paid** self-employed Preparer

CANNED SEP 1 6 2013

Firm's name

Firm's address ▶

May the IRS discuss this return with the preparer shown above? (see instructions)

For Paperwork Reduction Act Notice, see the separate instructions.

Use Only

12

🗌 Yes 🗌 No

Form 990 (2012

Firm's EIN ▶

Phone no.

orm 990	90 (2012)		Page Z
Part I			
1	Check if Schedule O contains a response to any question in this Part III Briefly describe the organization's mission:	<u> </u>	<u>. Ц</u>
	CREATING A MULTI-GENERATIONAL ARTS AND CULTURAL CENTER THAT PRESE	NTS ART PROGRAMS FOR THE COMMUNIT	~
•	CREATING A MOLIPOLINEIX TOWNER ANTO AND COLIONAL CENTER THAT I RESE	WIS ART ROCKING FOR THE COMMON!	-!:
	Did the organization undertake any significant program services during the year		
	prior Form 990 or 990-EZ?	· · · · · · · · · · · · · · · · · · ·	∐No
	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how	w it conducts any program	
		· · · · · · · · · · · · · · · · · · ·	7 No
	If "Yes," describe these changes on Schedule O.		
	Describe the organization's program service accomplishments for each of its the	nree largest program services, as measul	red by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report t	he amount of grants and allocations to o	others,
	the total expenses, and revenue, if any, for each program service reported.		
	ART WORKSHOPS, CLASSES, PERFORMANCES & CONCERTS FOR CHILDREN, AD	ULTS & ELDERS.	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	(code:) (Experience + mendang grante or +		,
	•••••••••••••••••••••••••••••••••••••••		

4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
		······································	
4-1	Other program convece /Decembe in Schedule (1)		
	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$	1	
	Total program service expenses > 144 402		

Form **990** (2012)

Part	V 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	✓	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		1
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		/
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? <i>If</i> "Yes," <i>complete Schedule C, Part II</i>	4		1
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 Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
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		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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	/	
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		1
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		1
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		1
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
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		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		1
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		1
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		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	1	1
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		Ť

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

art				_
	Check if Schedule O contains a response to any question in this Part V		· ·	No
1a b c	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	reportable gaming (gambling) winnings to prize winners?	1c		1
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 30			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	✓	-
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
b 4a	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		1
b	If "Yes," enter the name of the foreign country: ► See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		7
с 6а	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
O.	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 a	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	-	√
c	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
d	If "Yes," indicate the number of Forms 8282 filed during the year	76		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		√ _
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7f		✓
g h 8	If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	7g 7h		
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		-
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
ь Ю	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
а	Initiation fees and capital contributions included on Part VIII, line 12			
b ∣1	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders	1	l	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	ŀ		
2a b		12a		
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а		13a		
b	Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand			
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		√
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b		
		Form	990	(2012)

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 throu response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in				
•	Check if Schedule O contains a response to any question in this Part VI				
Şecti	on A. Governing Body and Management				
			<u> </u>	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are meteral differences in voting rights among members of the governing hadres.	14] :
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar				
	committee, explain in Schedule O.				
b	Enter the number of voting members included in line 1a, above, who are independent) 14			'
2	Did any officer, director, trustee, or key employee have a family relationship or a business rela-		1		
	any other officer, director, trustee, or key employee?		2	,	1
3	Did the organization delegate control over management duties customarily performed by or und				
	supervision of officers, directors, or trustees, or key employees to a management company or other po		3		/
4	Did the organization make any significant changes to its governing documents since the prior Form 990 v		4		1
5 6	Did the organization become aware during the year of a significant diversion of the organization's Did the organization have members or stockholders?	assets?.	5 6		1
7a	Did the organization have members, stockholders, or other persons who had the power to elec	ct or appoint	-		+
	one or more members of the governing body?		7a		1
b	Are any governance decisions of the organization reserved to (or subject to approval by				
_	stockholders, or persons other than the governing body?		7b		✓
8	Did the organization contemporaneously document the meetings held or written actions under	taken during			
_	the year by the following: The governing body?			, -	
a b	Each committee with authority to act on behalf of the governing body?		8a 8b	1	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot b		0.5		<u> </u>
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.		9		1
Secti	on B. Policies (This Section B requests information about policies not required by the In	iternal Reven	ue Co		
40				Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	ob observan	10a		✓
	affiliates, and branches to ensure their operations are consistent with the organization's exempt p		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before fill	•	11a	/	<u> </u>
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	Ū		<u> </u>	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	✓	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris		12b	✓	
С	Did the organization regularly and consistently monitor and enforce compliance with the police describe in Schedule O how this was done.	cy? If "Yes,"	.		
13	Did the organization have a written whistleblower policy?		12c 13	√	
14	Did the organization have a written document retention and destruction policy?		14		7
15	Did the process for determining compensation of the following persons include a review and				<u> </u>
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and	decision?			
a	The organization's CEO, Executive Director, or top management official		15a	✓	
b	Other officers or key employees of the organization		15b	✓_	
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar is	arrangement			į
ioa	with a taxable entity during the year?	-	16a		<u>_</u>
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to		.00		-
	participation in joint venture arrangements under applicable federal tax law, and take steps to si	afeguard the			!
	organization's exempt status with respect to such arrangements?		16b		
	on C. Disclosure				
17 18	List the states with which a copy of this Form 990 is required to be filed ► NONE Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and	000 T (Section	501/	2/(2)0	
	available for public inspection. Indicate how you made these available. Check all that apply.	290-1 (3 8 00101	JU 1(0	J)(J)S	Offity)
	☐ Own website ☑ Another's website ☑ Upon request ☐ Other (explain in Schedi	ule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing docume		fınter	est p	olicy,
	and financial statements available to the public during the tax year.				-
20	State the name, physical address, and telephone number of the person who possesses the books	s and records	of the		
	organization: ► Barbara LaCasse 74 Pleasant Street Morrisville, VT 05661 802-888-1261				

Daga	- /
raum	•

Form 990 (2012)

	•		
Part \	/11	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,	and
		Independent Contractors	

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

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

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

☑ Check this box if neither the organization no	r any relate	d org	aniz	atic	n c	ompe	nsa	ted any currer	t officer, directo	r, or trustee.
					C)					
(A)	(B)	(do n	nt ch		ition more		nne	(D)	(E)	(F)
Name and Title	Average	age box, un			to not check more than one box, unless person is both an				Reportable	Estimated
	hours per week (list any			-	•	or/trus		compensation from	compensation from related	amount of other
	hours for	Individual trustee or director	Institutional trustee	Officer	Key employee	뺣	Former	the	organizations	compensation
	related organizations	rect	titio	ě	릙	loye] e	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	below dotted	우뿔	Ĭ.		Įğ	69		ľ		and related
	line)	l ste	trus	İ	🕷	Pen				organizations
			100			Highest compensated employee				
(1) Barbara Murphy										
President	1	1	1	/				0.	О.	0.
(2) Greg Young	 	Ť		H				<u> </u>		<u> </u>
Vice President	1	1		1				o.	О.	0.
(3) Caroline McKinney							<u> </u>			<u> </u>
Secretary	1	1		1			1) o.	О.	0.
(4) Trevor Braun										
Treasurer	1	1		1				О.	0.	0.
(5) Kevin Fitzgerald										
Trustee	1	✓						О.	0.	0.
(6) Joanne Harrison					[
Trustee	1	1					L.	0.	0.	0.
(7) Sharron Scott	<u> </u>			İ						i
Trustee	1_1_	1		L_	_	L		0.	0.	0.
(8) Chess Brownell										
Trustee	11	/	_		<u> </u>	<u> </u>		0.	0.	0.
(9) Pixie Loomis	ļ									
Trustee	1	✓		<u> </u>	<u> </u>			0.	0.	0.
(10) Jan Gearhart	.				İ					
Trustee	1	/		<u> </u>	<u> </u>			0.	0.	0.
(11) Peter Merrill	.	,								
Trustee	1	✓	_	<u> </u>	ļ	 	_	0.	0.	0.
(12) Rachel Moore		,		ļ						
Trustee	1	/		<u> </u>	<u> </u>	ļ	<u> </u>	0.	0.	0.
(13) Lauren Stagnitti		,		l						
At Large	11	✓		<u> </u>	├	ļ <u> </u>	<u> </u>	0.	0.	0.
(14) Bonnie Kolber		,		l	1					
Trustee	11		L	L	L	L		0.	0.	0.

Part	VII Section A. Officers, Directors, Trust	tees, Key E	mplo	yee:	s, ar	nd H	lighes	st C	ompensated E	mployees (con	tinued)		
	(A) (B) (B) Position (do not check more than one box, unless person is both an Reportable Reportable									Estin	F) nated			
		hours per week (list any hours for related organizations below dotted line)	Individua or directo	lnstitutional trustee	a Officer	Key employee	Highest compensated employee	ee) Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC		otl compe	nsation the zation elated	
	eve Ames					,								
(16)	Executive Director	40				✓			48,778		0.			0.
(17)		 												
(18)											+-			
(19)														
(20)												_	 	
(21)													-	
(22)														
(23)														
(24)														
(25)														
1b	Sub-total	VII, Section	 n A		 ·		•	▶	48,778 0.	(+			0. 0.
<u>d</u>	Total (add lines 1b and 1c)	<u> </u>				<u> </u>		>	48,778	(0.
2	Total number of individuals (including but reportable compensation from the organi			ose	list	ed a	above	e) w	ho received m	ore than \$100,0	000 of			
3	Did the organization list any former of employee on line 1a? If "Yes," complete 5							mp	loyee, or high	est compensa	ted	3		No
4	For any individual listed on line 1a, is the organization and related organizations	sum of rep	oortal	ole d	com	per	satio							<u>√</u>
5	Individual	r accrue co	 mper	nsat	ion	 fror	 n any	 uni	related organiz	 ation or individ	ual	4		<u> </u>
	for services rendered to the organization?	? If "Yes," c	ompl	ete .	Sch	edu	le J f	or s	uch person	· · · · ·	.	5		<u>✓</u>
1	Complete this table for your five highest compensation from the organization. Repyear.												ı's tax	
	(A) Name and business add	ress					į		(B) Description of se	ervices	Cor	(C) npensa	tion	
			-											
2	Total number of independent contractor received more than \$100,000 of compens							th	ose listed abo	ove) who				_

Part	VIII	Statement of Revenue					
		Check if Schedule O contains a respon	se to any quest				<u> </u>
•				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts nts	1a	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b					
Is, (С	Fundraising events 1c					
Gif ia	d	Related organizations 1d					
ns,	е	Government grants (contributions) 1e					
atio er S	f	All other contributions, gifts, grants,					
년 원		and similar amounts not included above 1f	134,676.				
달	g	Noncash contributions included in lines 1a-1f \$					
	h	Total. Add lines 1a–1f	Business Code	134,676.			
an a	0-	PROCEEDING SECTION OF THE SECTION OF					
eve	2a	PROGRAM FEES	611600	45,272.	45,272.		
8	b	RENTAL OF FACILITIES	532000	12,370.	12,370.		
Ž	c d						
သိ							
Program Service Revenue	e f	All other program service revenue .					
P.	g	Total. Add lines 2a–2f	•	57,642.			<u></u>
	3	Investment income (including divider		07,0121		· .,	
		and other similar amounts)		33.	33.		
	4	Income from investment of tax-exempt bon	nd proceeds ►			<u> </u>	
	5	Royalties					
		(i) Real	(ii) Personal				
	6a	Gross rents					
	b	Less: rental expenses					
	С	Rental income or (loss)					
	d	Net rental income or (loss)	▶				
	7a	Gross amount from sales of (i) Securities	(ii) Other			!	
	_	assets other than inventory					
,	b	Less: cost or other basis					
		and sales expenses .					
	C	Gain or (loss)					
	d	Net gain or (loss)	<u> </u>			···· ·	
venue	8a	Gross income from fundraising events (not including \$					
Other Reven		of contributions reported on line 1c). See Part IV, line 18 a	13,863.				
¥	b	Less: direct expenses b					
•	С	Net income or (loss) from fundraising e	vents . ►	13,863.			
	9a	Gross income from gaming activities.					
		See Part IV, line 19 a					
	b	Less: direct expenses b					
		Net income or (loss) from gaming active	ties ▶				_
	10a	Gross sales of inventory, less					
		returns and allowances a					
	b	Less: cost of goods sold b					
	С	Net income or (loss) from sales of inver					
	<u> </u>	Miscellaneous Revenue	Business Code				
	11a						
	b						· · · · · · · · · · · · · · · · · · ·
	C	All other recent					
	ď	All other revenue L Total. Add lines 11a-11d	•				
	12	Total revenue. See instructions		206 214	E7 675	0.	0.
				206,214.	57,675.	0.	0.

Form 99	90 (2012)				Page 1(
	IX Statement of Functional Expenses		-		. ago . a
Section	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns. A	ll other organization	s must complete colu	mn (A).
	Check if Schedule O contains a respons				🗆
	ot include amounts reported on lines 6b, 7b, o, 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 governments and				
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	48,778.	24,390.	18,535.	5,853
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	97,227.	71,446.	12,015.	13,766
7 8	Other salaries and wages	51,221.	71,440.	12,013.	13,700
9	section 401(k) and 403(b) employer contributions) Other employee benefits				
10	Payroll taxes	10.276	0.720	4 026	2704
11	Fees for services (non-employees):	18,276.	9,729.	4,826.	3,721
''a	Management				
b	Legal				
c	Accounting	2,100.		2,100.	
d	Lobbying			2,100.	
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion	4,121.	3,015.	494.	612
13	Office expenses	3,535.	145.	2,495.	895
14	Information technology	6,550.		6,550.	
15	Royalties				
16	Occupancy				· · · · · · · · · · · · · · · · · · ·
17	Travel	356.		356.	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	2,501.	2,001.	375.	125
21 22	Payments to affiliates				
23	Depreciation, depletion, and amortization . Insurance	23,992.	19,194.	3,598.	1,200
23 24	Other expenses. Itemize expenses not covered	4,990.		4,990.	
24	above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)			-	
а	CONTRACT SERVICES	3,009.	2,702.	207	
b	MISCELLANEOUS	7,625.	3,967.	307.	3,658
c	UTILITIES	8,724.	3,307.	8,724.	3,036
ď	SUPPLIES	4,237.	4,237.		

8,013.

244,034.

577.

141,403.

7,436.

72,801.

All other expenses

Total functional expenses. Add lines 1 through 24e

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)

29,830.

Part X Balance Sheet

Check if Schedule O contains a response to any question

		Check if Schedule O contains a response to any question in this Part >	·		
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	15,819.	1	13,276.
	2	Savings and temporary cash investments	20,253.	2	6,649.
	3	Pledges and grants receivable, net	550.	3	0.
	4	Accounts receivable, net	620.	4	720.
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	•	5	
its	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L.		6	
Assets	7	Notes and loans receivable, net		7	·
⋖	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 10a 916,821.			
	_ b	Less: accumulated depreciation 10b 118,721.	822,092.		798,100.
	11	Investments—publicly traded securities		11	
	12 13	Investments—other securities. See Part IV, line 11		12	-
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	859.334.	16	010 745
_	17	Accounts payable and accrued expenses	659,334.	17	818,745.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
S	22	Loans and other payables to current and former officers, directors,		=+	
Liabilities	_	trustees, key employees, highest compensated employees, and			
ΙĐΪ		disqualified persons. Complete Part II of Schedule L		22	
Lia	23	Secured mortgages and notes payable to unrelated third parties	42,699.	23	39,930.
	24	Unsecured notes and loans payable to unrelated third parties	,	24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	42,699.	26	39,930.
ses		Organizations that follow SFAS 117 (ASC 958), check here ▶			
anc	27	Unrestricted net assets	816,635.	27	778,815.
3ali	28	Temporarily restricted net assets		28	
D.	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
ts (30	Capital stock or trust principal, or current funds		30	
se	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ą	32	Retained earnings, endowment, accumulated income, or other funds .		32	
Net	33	Total net assets or fund balances	816,635.	33	778,815.
	34	Total liabilities and net assets/fund balances	859,334.		818,745.
					Form 990 (2012)

_	-	•
Page	7	4

						.gc
Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response to any question in this Part XI		<u></u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1			20	6,214.
. 2	Total expenses (must equal Part IX, column (A), line 25)	2			24	4,034.
3	Revenue less expenses. Subtract line 2 from line 1	3			-3	7,820.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			81	<u>6,635.</u>
5	Net unrealized gains (losses) on investments	5				0.
6	Donated services and use of facilities	6				0.
7	Investment expenses	7				0.
8	Prior penod adjustments	8				0.
9	Other changes in net assets or fund balances (explain in Schedule O)	9	<u> </u>			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
_	33, column (B))	10	L		77	<u>8,815.</u>
Part						
-	Check if Schedule O contains a response to any question in this Part XII	• •	<u></u>	•	<u></u>	ᆜ
_	According to the form the first control of the firs			-	Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other	-1	_			}
	If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	piain	in	ļ		1
2a			. 2	_		
20	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were com-			a		-
	reviewed on a separate basis, consolidated basis, or both:	pileu ("	- 1		!
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			- 1		1
b	Were the organization's financial statements audited by an independent accountant?		. 2			J
-	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on		+		
	separate basis, consolidated basis, or both:	Ju 0	_	ł		ì
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis					1
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o	versia	ht -			1
	of the audit, review, or compilation of its financial statements and selection of an independent account			c		
	If the organization changed either its oversight process or selection process during the tax year, ex	plain		_		
	Schedule O.	•		- [i
За	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth	in			
	the Single Audit Act and OMB Circular A-133?		. 3	a		✓
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo		ne	1		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits	31	b		
			F	orm	990	(2012)
						. ,

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization Employer identification number River Arts of Morrisville, Inc. 03-0368569 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 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 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). [7] An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 331/3% 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 331/3% 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.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 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 that describes the type of supporting organization and complete lines 11e through 11h. **b** Type II **c** Type III–Functionally integrated **d** Type III–Non-functionally integrated e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and Yes No 11g(i) (ii) A family member of a person described in (i) above? |11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? . 11g(iii) Provide the following information about the supported organization(s). (i) Name of supported (iii) Type of organization (iv) Is the organization (ii) EIN (v) Did you notify (vi) Is the (vii) Amount of monetary organization (described on lines 1-9 in col. (i) listed in your the organization in organization in col support col (ii) of your governing document? above or IRC section (i) organized in the support? US? (see instructions)) Yes No Yes No Yes No (A) (B) (C) (D) (E)

Total

Schedu	ıle A (Form 990 or 990-EZ) 2012						Page 2
Part	II Support Schedule for Organiza	tions Descri	bed in Secti	ons 170(b)(1)	(A)(iv) and 1	70(b)(1)(A)(vi)
	(Complete only if you checked th						alify under
	Part III. If the organization fails to	qualify unde	r the tests lis	ted below, pl	ease comple	te Part III.)	•
Sect	on A. Public Support			-			
Caler	idar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	ınclude any "unusual grants.")	291,176.	246,804.	187,834.	170,619.	134,676.	1,031,109.
2	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						0.
3	The value of services or facilities					1	
	furnished by a governmental unit to the						
	organization without charge						<u> </u>
4	Total. Add lines 1 through 3	291,176.	246,804	187,834.	170,619.	134,676.	1,031,109.
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						_
6	Public support. Subtract line 5 from line 4.						0.
	on B. Total Support	<u> </u>	· · · · · · · · · · · · · · · · · · ·			1	1,031,109.
	idar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	291,176.	246,804.	187,834.	170,619.	134,676.	1,031,109.
8	Gross income from interest, dividends,	201,170.	£40,004.	107,004.	170,013.	134,070.	1,031,103.
	payments received on securities loans,		i				
	rents, royalties and income from similar						
	sources	-334.	175.	1,488.	97.	33.	1,459.
9	Net income from unrelated business						
	activities, whether or not the business						
	ıs regularly camed on		-	:			0.
10	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV.)	11000.	6770.	12520.	22579.	13863.	66,732.
11	Total support. Add lines 7 through 10						1,099,300.
12	Gross receipts from related activities, etc.	•	•			12	0.
13	First five years. If the Form 990 is for th						
	organization, check this box and stop her			<u> </u>	<u> </u>	· · · · · ·	· · P []
	on C. Computation of Public Suppor			4 - 1 - (0)		44	
14	Public support percentage for 2012 (line 6					14	93.80 %
15 16a	Public support percentage from 2011 Sch 331/3% support test—2012. If the organiz			 on line 12 and		15	95.03 %
IVa	box and stop here. The organization qual					-	_
b	331/3% support test—2011. If the organ	-		_			
	check this box and stop here . The organi				•		. ► □
17a	10%-facts-and-circumstances test—20	-	-	_		or 16h and 1	
170	10% or more, and if the organization mee						
	Part IV how the organization meets the "fa						
	organization						. > 🗆
b	10%-facts-and-circumstances test — 20	011. If the orga	nization did no	ot check a box	on line 13 16	a. 16b. or 17a	
~	15 is 10% or more and if the organizat	_			•		

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

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

	if the organization fails to qualify	under the te	sts listed bei	ow, please co	omplete Part	11.)	
	on A. Public Support				T	T	
	idar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees					1	
_	received. (Do not include any "unusual grants.") Gross receipts from admissions, merchandise						
2	sold or services performed, or facilities				1		
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an			1			
	unrelated trade or business under section 513				İ		
4	Tax revenues levied for the			1			
	organization's benefit and either paid						
_	to or expended on its behalf			ļ	<u>.</u>		
5	The value of services or facilities			•			
	furnished by a governmental unit to the			}			
_	organization without charge		<u> </u>				ļ
6	Total. Add lines 1 through 5			.	ļ		
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .					 	
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year		1				
_	•		 	 		 	<u> </u>
С 8	Add lines 7a and 7b		 			 	
0	line 6.)		j				
Sooti	on B. Total Support	·	<u> </u>	L	l	L	<u> </u>
	idar year (or fiscal year beginning in)	(a) 2009	(h) 2000	(a) 2010	(d) 2011	(=) 2012	(6 Total
Galen 9	Amounts from line 6	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
10a	Gross income from interest, dividends,		 				
IVa	payments received on securities loans, rents,					1	
	royalties and income from similar sources .						
h	Unrelated business taxable income (less		·	 	<u> </u>		
	section 511 taxes) from businesses						
	acquired after June 30, 1975		1				
c	Add lines 10a and 10b						
11	Net income from unrelated business		-				
	activities not included in line 10b, whether		1				
	or not the business is regularly carried on					<u> </u>	
12	Other income. Do not include gain or			1			
-	loss from the sale of capital assets		1			1	
	(Explain in Part IV.)				1		
13	Total support. (Add lines 9, 10c, 11,		1		1		
	and 12.)						
14	First five years. If the Form 990 is for the	e organizatioi	n's first, secon	d, third, fourth	, or fifth tax y	ear as a section	n 501(c)(3)
	organization, check this box and stop her	re					▶ 🗆
Secti	on C. Computation of Public Suppor	t Percentag	je				
15	Public support percentage for 2012 (line 8						%
16	Public support percentage from 2011 Sch	nedule A, Part	III, line 15 .	<u></u>		16	%
Secti	on D. Computation of Investment In						
17	Investment income percentage for 2012 (ine 10c, colur	nn (f) divided b	y line 13, colu	mn (f))	17	%
18	Investment income percentage from 2011						%
19a	331/3% support tests-2012. If the organi						
	17 is not more than 331/3%, check this box				-		
b	331/3% support tests—2011. If the organiz						
	line 18 is not more than 331/3%, check this t		-		-		
20	Private foundation. If the organization di	d not check a	box on line 14	, 19a, or 19b, o	check this box	and see instru	ctions 🕨 🔲

Schedule A (Form 990 or 990-EZ) 2012					
Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).				
		_+			
					
					
	······				

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service ➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions.

Open to Public Inspection

Employer identification number

River Arts of Morrisville, Inc. 03-0368569 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 2 Aggregate contributions to (during year) . 3 Aggregate grants from (during year) . . Aggregate value at end of year 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose ☐ Yes ☐ No Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Part II Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Protection of natural habitat ☐ Preservation of a certified historic structure ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements . . . 2a b 2b Number of conservation easements on a certified historic structure included in (a) C 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) R In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Assets included in Form 990, Part X

Page	2

Part	III Organizations Maintaining	Collections of A	urt, Histo	rical T	reasures,	or Ot	her Similar	Ass	ets (con	tinued)
3	Using the organization's acquisition, collection items (check all that apply):	accession, and oth	er records	, chec	k any of the	e follov	ving that are	a sig	nificant u	se of its
а	☐ Public exhibition		d 🛚		or exchang	e progi	rams			
, p	☐ Scholarly research		e 🗌	Other					•	
С	☐ Preservation for future generations									
4	4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.									
5	5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar									
	assets to be sold to raise funds rather than to be maintained as part of the organization's collection?									
Part	IV Escrow and Custodial Arra	ingements. Con	nplete if tl	ne org	anization a	answei	red "Yes" to	For	n 990, F	art IV,
	line 9, or reported an amoun									
1a	Is the organization an agent, trustee,			-				not		
	included on Form 990, Part X?					• •		•	☐ Yes	☐ No
b	If "Yes," explain the arrangement in Pa	art XIII and complet	te the follo	wing ta	able:					
								Am	ount	
C	Beginning balance					1c				
d	Additions during the year					1d				
е	Distributions during the year					1e				
f	Ending balance					1f				
2a	Did the organization include an amoun								☐ Yes	∐ No
	If "Yes," explain the arrangement in Pa									Щ
Par	V Endowment Funds. Comple	(a) Current year	(b) Pnor y		(c) Two years		(d) Three years b		(e) Four ye	are back
10	Posinning of year balance	(a) Ourent year	(5) (110)	-	(c) Two years	3 DECK	(d) Three years t	- L	(e) i oui ye	
1a b	Beginning of year balance Contributions								-	
C	Net investment earnings, gains, and									
·	losses							- 1		
d	Grants or scholarships						· · · · · · · · · · · · · · · · · · ·			
e	Other expenditures for facilities and								· · · · · · · · · · · · · · · · · · ·	
_	programs									
f	Administrative expenses		<u>. </u>							
g	End of year balance	,								
2	Provide the estimated percentage of t	he current year end	balance (line 1g	, column (a)) held a	as:			
а	Board designated or quasi-endowmer			·	. , ,	•				
b	Permanent endowment ▶		•							
C		%								
	The percentages in lines 2a, 2b, and 2	c should equal 100								
3 a	Are there endowment funds not in the	e possession of the	e organizat	ion tha	at are held a	and ad	ministered for	the		
	organization by:									es No
	(i) unrelated organizations							•	3a(i)	
	(ii) related organizations							•	3a(ii)	
	If "Yes" to 3a(ii), are the related organi							•	3b	
4	Describe in Part XIII the intended uses									
Part										 .
	Description of property	(a) Cost or oth (investme		•	r other basis ther)		Accumulated epreciation		(d) Book v	alue
1a	Land				4,000.					4,000.
b	Buildings				38,902.		7,065.			31,837.
C	Leasehold improvements				862,208.		105,219.			756,989.
d	Equipment				8,317.		4,697.			3,620.
е	Other	.			3,394.		1,740.	$oxed{oxed}$		1,654.
Total.	Add lines 1a through 1e. (Column (d) n	nust eaual Form 99	0. Part X. o	column	(B), line 10	(c).) .		1		798.100.

Part VII	Investments - Other Securities	. See Form 990, Part X,	line 12.	
. (a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuat Cost or end-of-year mark	
	l denvatives			
	held equity interests			
(3) Other				
(A) (B)				·····-
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
(f)				· · · · · · · · · · · · · · · · · · ·
	(b) must equal Form 990, Part X, col (B) line 12.) ▶		<u> </u>	
Part VIII	Investments—Program Related	1	T	
	(a) Description of investment type	(b) Book value	(c) Method of valuat Cost or end-of-year mark	
(1)				
(2)				
(3)				
<u>(4)</u> <u>(5)</u>				
(6)				
(7)				· · · · · · · · · · · · · · · · · · ·
(8)				
(9)				
(10)				
	(b) must equal Form 990, Part X, col. (B) line 13) ▶		<u> </u>	
Part IX	Other Assets. See Form 990, Pa	art X, line 15. a) Description	·····	(h) Daak value
(1)		ny Description		(b) Book value
(2)	·			· · · · · · ·
(3)				
(4)				····
(5)				
(6)				
_(7)				
(8)		 		· · · · · · · · · · · · · · · · · · ·
(9)				
(10)	ımn (b) must equal Form 990, Part X, co	ol. (B) line 15.)		
Part X	Other Liabilities. See Form 990,			
1.	(a) Description of liability	(b) Book value	T	
(1) Federal	income taxes	-	1	
(2)				
(3)				
(4)				
(5)				1
(6)			-	
(8)		· · · · · · · · · · · · · · · · · · ·	+	
(9)			1	
(10)		·	1	
(11)			1	
Total. (Column	(b) must equal Form 990, Part X, col. (B) line 25.)		1	
2. FIN 48 (AS	SC 740) Footnote. In Part XIII, provide the t	ext of the footnote to the org	anization's financial statements that rep	ports the organization's
liability for u	ncertain tax positions under FIN 48 (ASC 7	40). Check here if the text of	the footnote has been provided in Part	XIII

17	Reconciliation of Revenue per Audited Financial Stateme	nts '	With Revenue pe	r Retun	n
•	Total revenue, gains, and other support per audited financial statements			1	
	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
	Net unrealized gains on investments	2a	1		
)	Donated services and use of facilities	2b		7	
,	Recoveries of prior year grants	2c		7	
	Other (Describe in Part XIII.)	2d		7 {	
	Add lines 2a through 2d			2e	
:	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
	nvestment expenses not included on Form 990, Part VIII, line 7b	4a			
(Other (Describe in Part XIII.)	4b		7	
	Add lines 4a and 4b			4c	
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1	12.)		5	
t)	Reconciliation of Expenses per Audited Financial Statement	ents	With Expenses p	er Reti	um
•	otal expenses and losses per audited financial statements			1	
4	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
١	Donated services and use of facilities	2a			
-	Prior year adjustments	2b		7	
(Other losses	2c		7	
(Other (Describe in Part XIII.)	2d		7	
,	Add lines 2a through 2d			2e	
;	Subtract line 2e from line 1			3	
	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
١	nvestment expenses not included on Form 990, Part VIII, line 7b	4a			
•	Other (Describe in Part XIII.)	4b		7	
	Add lines 4a and 4b			4c	
	otal expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	18.)	<u></u> .	5	
X	Supplemental Information				
ılε	te this part to provide the descriptions required for Part II, lines 3, 5, and 9	; Pai	rt III, lines 1a and 4;	Part IV, I	ines 1b and
	ine 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b.	Also	complete this part t	o provid	le any addıtı
na	tion.				

Schedule D (Fo	orm 990) 2012	Page 5
Part XIII	Supplemental Information (continued)	
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		,
•••		

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2012

Open to Public Inspection

Employer identification number

River Arts of Morrisville, Inc.	03-0368569
FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS	
The organization will provide a copy of form 990 to the board president, and the staff before filing.	
Other trustees are invited to review it.	
FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS	5
The organization reviews and has the staff and board members sign the conflict of interest policy year	riy.
FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS FOR CEO, EXEC. I	DIR., OR TOP MGT.
The executive committee and finance committee of the board reviews staff compensation.	
FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PROCESS FOR OFFICERS &	KEY EMPLOYEES
The executive committee and finance committee of the board reviews staff compensation.	
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE	
The organization's tax return is available through GUIDESTAR.ORG	
All other required documents are available upon request.	
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