

PUBLIC DISCLOSURE COPY

Form **990**

Department of the Treasury
Internal Revenue Service

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

2018

Open to Public Inspection

A For the 2018 calendar year, or tax year beginning **JUL 1, 2018** and ending **JUN 30, 2019**

B Check if applicable: <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization ARTS & SCIENCE COUNCIL CHARLOTTE/MECKLENBURG, INC.		D Employer identification number 56-0693436
	Doing business as		E Telephone number (704)-333-2272
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ 13,800,154.
	222 S. CHURCH STREET, SUITE #300		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
City or town, state or province, country, and ZIP or foreign postal code CHARLOTTE, NC 28202		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No	H(c) Group exemption number
F Name and address of principal officer: RONALD JEEP BRYANT SAME AS C ABOVE		If "No," attach a list. (see instructions)	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: WWW.ARTSANDSCIENCE.ORG			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		L Year of formation: 1958	M State of legal domicile: NC

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	26
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	26
	5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5	63
	6 Total number of volunteers (estimate if necessary)	6	400
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, line 38	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 15,843,756.	Current Year 13,800,154.
	9 Program service revenue (Part VIII, line 2g)	0.	0.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-776.	0.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	0.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	15,842,980.	13,800,154.
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	8,384,817.
14 Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		3,046,397.	3,341,649.
16 a Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
b Total fundraising expenses (Part IX, column (D), line 25)		1,742,632.	
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		6,600,226.	4,012,537.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	18,031,440.	15,789,916.	
19 Revenue less expenses. Subtract line 18 from line 12	-2,188,460.	-1,989,762.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 44,085,990.	End of Year 39,918,141.
	21 Total liabilities (Part X, line 26)	9,394,767.	9,042,441.
	22 Net assets or fund balances. Subtract line 21 from line 20	34,691,223.	30,875,700.

Part II Signature Block

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

Sign Here	Signature of officer		Date
	RONALD JEEP BRYANT, CHIEF EXECUTIVE OFFICER Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name AMANDA ADAMS	Preparer's signature	Date
	Firm's name CHERRY BEKAERT LLP	Firm's EIN 56-0574444	Check if self-employed <input type="checkbox"/> PTIN P00748038
	Firm's address 1111 METROPOLITAN AVE. STE. 900 CHARLOTTE, NC 28204	Phone no. 704-377-1678	

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:
SEE SCHEDULE O.

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: _____) (Expenses \$ 5,804,672. including grants of \$ 5,804,672.) (Revenue \$ _____)
THE ARTS & SCIENCE COUNCIL GRANTED OPERATING SUPPORT FUNDING TO 31 REGIONAL CULTURAL PARTNERS. GRANTS ARE AWARDED BY A DELIBERATE SYSTEM OF PEER AND EXPERT REVIEW CONDUCTED BY PANELS OF CITIZEN VOLUNTEERS AND PROFESSIONAL STAFF. AWARDS ARE MADE BASED ON A PRE-ESTABLISHED RANKING SYSTEM THAT TAKES INTO CONSIDERATION PROGRAM EXCELLENCE, RELEVANCE AND FINANCIAL STEWARDSHIP. GRANT AWARD RECOMMENDATIONS FROM THE REVIEW PROGRAM EXCELLENCE, RELEVANCE AND FINANCIAL STEWARDSHIP. GRANT AWARD RECOMMENDATIONS FROM THE REVIEW PANELS ARE APPROVED BY ASC'S BOARD OF DIRECTORS.

4b (Code: _____) (Expenses \$ 4,353,020. including grants of \$ 2,631,058.) (Revenue \$ _____)
THE ARTS & SCIENCE COUNCIL MAKES A VARIETY OF PROJECT SUPPORT GRANTS AND FUNDS AN ARRAY OF SERVICES THAT CONTRIBUTE TO THE VITALITY AND SUSTAINABILITY OF THE REGIONAL CULTURAL SECTOR. THESE GRANTS AND SERVICES DIRECTLY ALIGN WITH ASC'S MISSION OF SUSTAINING ACCESS TO AN EXCELLENT AND RELEVANT CULTURAL SECTOR - ADVANCING ARTS, SCIENCE, HISTORY, AND HERITAGE ENDEAVORS IN THE CHARLOTTE-MECKLENBURG REGION. IN CONCERT WITH ASC'S OPERATING SUPPORT PROGRAM, PROJECT AND OTHER SERVICE FUNDING BUILD COMMUNITY, INCREASE CULTURAL PROGRAM RELEVANCE AND INNOVATION, AND ADVANCE THE ARTS, SCIENCE, HISTORY, AND HERITAGE IN PRE K-12 EDUCATION.

4c (Code: _____) (Expenses \$ 2,550,417. including grants of \$ _____) (Revenue \$ _____)
THE ARTS & SCIENCE COUNCIL PROVIDES MANAGEMENT SERVICES FOR THE CITY OF CHARLOTTE, MECKLENBURG COUNTY, AND OTHER PRIVATE PARTNERS TO ENSURE EXCELLENCE AND RELEVANCE OF PUBLIC ART PROGRAMMING AND INSTALLATION.

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

4e Total program service expenses **12,708,109.**

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	X	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, 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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	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? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		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? <i>If "Yes," complete Schedule D, Part IX</i>	X	
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
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? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	

**ARTS & SCIENCE COUNCIL
CHARLOTTE/MECKLENBURG, INC.**

Part IV Checklist of Required Schedules *(continued)*

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22 X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23 X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a	X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b	X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	26	X
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? <i>If "Yes," complete Schedule L, Part III</i>	27	X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c 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? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34 X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	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	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37	X
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	38 X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

	Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	240
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c X	

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

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a		63
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)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
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?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15	X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X

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

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

Section A. Governing Body and Management

			Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year 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.	1a	26		
b Enter the number of voting members included in line 1a, above, who are independent	1b	26		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3			X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6 Did the organization have members or stockholders?	6			X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a			X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b			X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a The governing body?	8a		X	
b Each committee with authority to act on behalf of the governing body?	8b		X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9			X

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

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

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **▶NC**
- 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 Another's website Upon request Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **▶**
NINA SCHULTZ - (704) 333-2272
222 S. CHURCH STREET, SUITE #300, CHARLOTTE, NC 28202

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

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

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

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

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

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 nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) PAULA VINCENT BOARD CHAIR	5.00 0.00	X		X				0.	0.	0.
(2) VALECIA MCDOWELL BOARD CHAIR-ELECT	5.00 0.00	X		X				0.	0.	0.
(3) ROBERT HARRINGTON IMMEDIATE PAST CHAIR	3.00 0.00	X		X				0.	0.	0.
(4) SUSAN PATTERSON SECRETARY	3.00 0.00	X		X				0.	0.	0.
(5) JEANNE JOHNSON TREASURER	3.00 0.00	X		X				0.	0.	0.
(6) NORMA ABENNE MEMBER	1.00 0.00	X						0.	0.	0.
(7) MISSY BANKS MEMBER	1.00 0.00	X						0.	0.	0.
(8) DENIS BILODEAU MEMBER	1.00 0.00	X						0.	0.	0.
(9) KATHERYN BLACK MEMBER	1.00 0.00	X						0.	0.	0.
(10) MICHAEL BRYANT MEMBER	1.00 0.00	X						0.	0.	0.
(11) BRETT DENTON MEMBER	1.00 0.00	X						0.	0.	0.
(12) LISA LEWIS DUBOIS MEMBER	1.00 0.00	X						0.	0.	0.
(13) MATTHEW GARDNER MEMBER	1.00 0.00	X						0.	0.	0.
(14) WILLIAM FARTHING, JR. MEMBER	1.00 0.00	X						0.	0.	0.
(15) DURRELL GILBERT MEMBER	1.00 0.00	X						0.	0.	0.
(16) WESLEY MANCINI MEMBER	1.00 0.00	X						0.	0.	0.
(17) LAWANA MAYFIELD MEMBER	1.00 0.00	X						0.	0.	0.

**ARTS & SCIENCE COUNCIL
CHARLOTTE/MECKLENBURG, INC.**

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) TIM MILLER MEMBER	1.00 0.00	X						0.	0.	0.
(19) KATRINA PRIDE MEMBER	1.00 0.00	X						0.	0.	0.
(20) ELLA SCARBOROUGH MEMBER	1.00 0.00	X						0.	0.	0.
(21) DEBORAH STEWART MEMBER	1.00 0.00	X						0.	0.	0.
(22) JAZ TUNNELL MEMBER	1.00 0.00	X						0.	0.	0.
(23) BANU VALLADARES MEMBER	1.00 0.00	X						0.	0.	0.
(24) MIKE VASAUNE MEMBER	1.00 0.00	X						0.	0.	0.
(25) TIFFANY WADDELL MEMBER	1.00 0.00	X						0.	0.	0.
(26) DENYTRA WHITNER MEMBER	1.00 0.00	X						0.	0.	0.
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A								876,645.	0.	63,823.
d Total (add lines 1b and 1c)								876,645.	0.	63,823.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **6**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
BLACKBAUD, INC. P.O. BOX 930256, ATLANTA, GA 31193	SOFTWARE MAINTENANCE	113,500.

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

SEE PART VII, SECTION A CONTINUATION SHEETS

**ARTS & SCIENCE COUNCIL
CHARLOTTE/MECKLENBURG, INC.**

Form 990

56-0693436

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) ROBERT BUSH CEO	40.00 0.00			X				216,065.	0.	14,221.
(28) SUSAN GARY SVP COO	40.00 0.00			X				120,306.	0.	7,910.
(29) TONI FREEMAN EVP	40.00 0.00				X			159,484.	0.	9,800.
(30) BARBARA ANN TEMPLE VP, EDUCATION	30.00 10.00					X		141,069.	0.	11,898.
(31) KATHERINE MOORING SVP, COMMUNITY INVESTMENT	40.00 0.00					X		136,203.	0.	10,996.
(32) KRISTA TERRELL VP, MARKETING & COMMUNICATIONS	40.00 0.00					X		103,518.	0.	8,998.
Total to Part VII, Section A, line 1c								876,645.		63,823.

**ARTS & SCIENCE COUNCIL
CHARLOTTE/MECKLENBURG, INC.**

Form 990 (2018)

56-0693436 Page **9**

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d	1,450,356.				
	e Government grants (contributions)	1e	8,698,412.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	3,651,386.				
	g Noncash contributions included in lines 1a-1f: \$		18,114.				
	h Total. Add lines 1a-1f		13,800,154.				
Program Service Revenue	2 a _____	Business Code					
	b _____						
	c _____						
	d _____						
	e _____						
	f All other program service revenue						
	g Total. Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)						
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real	(ii) Personal				
		b Less: rental expenses					
		c Rental income or (loss)					
		d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b Less: cost or other basis and sales expenses					
		c Gain or (loss)					
		d Net gain or (loss)					
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
		b Less: direct expenses	b				
		c Net income or (loss) from fundraising events					
	9 a Gross income from gaming activities. See Part IV, line 19	a					
b Less: direct expenses		b					
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	a						
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11 a _____							
	b _____						
	c _____						
	d All other revenue						
	e Total. Add lines 11a-11d						
12 Total revenue. See instructions			13,800,154.	0.	0.	0.	

**ARTS & SCIENCE COUNCIL
CHARLOTTE/MECKLENBURG, INC.**

Form 990 (2018)

56-0693436 Page **10**

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	8,139,760.	8,139,760.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	295,970.	295,970.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	527,786.	246,751.	136,033.	145,002.
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	2,309,736.	1,079,850.	595,320.	634,566.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	27,679.	13,464.	6,809.	7,406.
9 Other employee benefits	277,185.	134,043.	68,673.	74,469.
10 Payroll taxes	199,263.	96,105.	49,527.	53,631.
11 Fees for services (non-employees):				
a Management				
b Legal	656.	656.		
c Accounting	32,777.	13,659.	8,522.	10,596.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	2,413,199.	2,146,746.	118,772.	147,681.
12 Advertising and promotion	69,168.	13,913.	7,120.	48,135.
13 Office expenses	290,606.	91,826.	92,832.	105,948.
14 Information technology	281,510.	59,390.	37,754.	184,366.
15 Royalties				
16 Occupancy	266,647.	134,605.	49,755.	82,287.
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	126,090.	46,342.	29,381.	50,367.
23 Insurance				
24 Other expenses. Itemize expenses not covered 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.)				
a PROCESSING FEES	133,635.	26,541.	9,665.	97,429.
b				
c				
d				
e All other expenses	398,249.	168,488.	129,012.	100,749.
25 Total functional expenses. Add lines 1 through 24e	15,789,916.	12,708,109.	1,339,175.	1,742,632.
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)

**ARTS & SCIENCE COUNCIL
CHARLOTTE/MECKLENBURG, INC.**

Form 990 (2018)

56-0693436 Page **11**

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1 Cash - non-interest-bearing	1,834,522.	1	1,015,684.	
	2 Savings and temporary cash investments		2		
	3 Pledges and grants receivable, net	7,163,789.	3	6,521,571.	
	4 Accounts receivable, net	558,600.	4	811,398.	
	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	
	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 instr). Complete Part II of Sch L			6	
	7 Notes and loans receivable, net			7	
	8 Inventories for sale or use			8	
	9 Prepaid expenses and deferred charges	73,311.	9	21,777.	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,844,640.			
	b Less: accumulated depreciation	10b 1,550,203.	373,911.	10c	294,437.
	11 Investments - publicly traded securities	2,822.	11	0.	
	12 Investments - other securities. See Part IV, line 11		12		
	13 Investments - program-related. See Part IV, line 11		13		
	14 Intangible assets		14		
	15 Other assets. See Part IV, line 11	34,079,035.	15	31,253,274.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	44,085,990.	16	39,918,141.		
Liabilities	17 Accounts payable and accrued expenses	594,367.	17	209,447.	
	18 Grants payable		18		
	19 Deferred revenue	3,598,965.	19	3,986,795.	
	20 Tax-exempt bond liabilities		20		
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21		
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			22	
	23 Secured mortgages and notes payable to unrelated third parties		23		
	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	5,201,435.	25	4,846,199.	
	26 Total liabilities. Add lines 17 through 25	9,394,767.	26	9,042,441.	
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27 Unrestricted net assets	-2,798,601.	27	-3,058,880.	
	28 Temporarily restricted net assets	9,581,459.	28	6,026,215.	
	29 Permanently restricted net assets	27,908,365.	29	27,908,365.	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30 Capital stock or trust principal, or current funds		30		
	31 Paid-in or capital surplus, or land, building, or equipment fund		31		
	32 Retained earnings, endowment, accumulated income, or other funds		32		
33 Total net assets or fund balances	34,691,223.	33	30,875,700.		
34 Total liabilities and net assets/fund balances	44,085,990.	34	39,918,141.		

Form **990** (2018)

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	13,800,154.
2	Total expenses (must equal Part IX, column (A), line 25)	2	15,789,916.
3	Revenue less expenses. Subtract line 2 from line 1	3	-1,989,762.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	34,691,223.
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 in Schedule O)	9	-1,825,761.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	30,875,700.

Part XII Financial Statements and Reporting

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

- 1 Accounting method used to prepare the Form 990: Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant? _____
 If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b Were the organization's financial statements audited by an independent accountant? _____
 If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits _____

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization **ARTS & SCIENCE COUNCIL CHARLOTTE/MECKLENBURG, INC.** Employer identification number **56-0693436**

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

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

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

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

ARTS & SCIENCE COUNCIL

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	10937706.	10322998.	11537392.	15843756.	13800154.	62442006.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	10937706.	10322998.	11537392.	15843756.	13800154.	62442006.
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)						1856574.
6 Public support. Subtract line 5 from line 4.						60585432.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 Amounts from line 4	10937706.	10322998.	11537392.	15843756.	13800154.	62442006.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	454.		112.	99.		665.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						62442671.
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14	97.03 %
15 Public support percentage from 2017 Schedule A, Part II, line 14	15	99.15 %
16a 33 1/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

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

Section A. Public Support

Table with 7 columns: (a) 2014, (b) 2015, (c) 2016, (d) 2017, (e) 2018, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support.

Section B. Total Support

Table with 7 columns: (a) 2014, (b) 2015, (c) 2016, (d) 2017, (e) 2018, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income; 11 Net income from unrelated business activities not included in line 10b; 12 Other income; 13 Total support.

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

Section C. Computation of Public Support Percentage

Table with 2 columns: Description, Percentage. Row 15: Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f)) 15%. Row 16: Public support percentage from 2017 Schedule A, Part III, line 15 16%.

Section D. Computation of Investment Income Percentage

Table with 2 columns: Description, Percentage. Row 17: Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f)) 17%. Row 18: Investment income percentage from 2017 Schedule A, Part III, line 17 18%.

19a 33 1/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) 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).</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

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

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

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

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount		(A) Prior Year	Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

ARTS & SCIENCE COUNCIL

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2018 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2018			
a From 2013			
b From 2014			
c From 2015			
d From 2016			
e From 2017			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2018 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2019. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2014			
b Excess from 2015			
c Excess from 2016			
d Excess from 2017			
e Excess from 2018			

Schedule B

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2018

Name of the organization

**ARTS & SCIENCE COUNCIL
CHARLOTTE/MECKLENBURG, INC.**

Employer identification number

56-0693436

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

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

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

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

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

Name of organization ARTS & SCIENCE COUNCIL CHARLOTTE/MECKLENBURG, INC.	Employer identification number 56-0693436
--	---

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		\$ <u>5,213,308.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2		\$ <u>1,450,356.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ <u>2,574,791.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization ARTS & SCIENCE COUNCIL CHARLOTTE/MECKLENBURG, INC.	Employer identification number 56-0693436
--	---

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

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

Name of organization ARTS & SCIENCE COUNCIL CHARLOTTE/MECKLENBURG, INC.	Employer identification number 56-0693436
---	---

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

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(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

2018

Open to Public Inspection

Name of the organization ARTS & SCIENCE COUNCIL CHARLOTTE/MECKLENBURG, INC. Employer identification number 56-0693436

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor property and grant fund usage.

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

Form with multiple questions (1-9) regarding conservation easements, including checkboxes for various purposes, a table for 2a-2d, and yes/no questions about monitoring and reporting.

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

Form with questions 1a, 1b, and 2 regarding reporting requirements for art and historical treasures, including revenue and asset amounts.

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other _____

- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

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

b If "Yes," explain the arrangement in Part XIII and complete the following table:

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

- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	32,466,657.	32,023,789.	31,432,008.	32,095,072.	33,415,834.
b Contributions			30,000.		
c Net investment earnings, gains, and losses	-385,731.	3,066,543.	2,134,306.	907,804.	7,564.
d Grants or scholarships	1,450,356.	2,623,675.	1,572,525.	1,570,868.	1,328,326.
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	30,630,570.	32,466,657.	32,023,789.	31,432,008.	32,095,072.

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

- a Board designated or quasi-endowment _____ %
- b Permanent endowment 91.11 %
- c Temporarily restricted endowment 8.89 %

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

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

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)		X
3a(ii)	X	
3b	X	

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

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		1,844,640.	1,550,203.	294,437.
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 294,437.

Part VII Investments - Other Securities.

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

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

(a) Description	(b) Book value
(1) BENEFICIAL INTEREST IN GREATER CHARLOTTE CULTURAL TRUST	31,253,274.
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	31,253,274.

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) PAYABLE - DESIGNATED BENEFICIARIES	4,846,199.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	4,846,199.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

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

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

1	Total revenue, gains, and other support per audited financial statements	1	11,975,427.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	1,034.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	1,034.
3	Subtract line 2e from line 1	3	11,974,393.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	1,825,761.
c	Add lines 4a and 4b	4c	1,825,761.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	13,800,154.

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

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

1	Total expenses and losses per audited financial statements	1	15,790,950.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	1,034.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	1,034.
3	Subtract line 2e from line 1	3	15,789,916.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	15,789,916.

Part XIII Supplemental Information.

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

PART V, LINE 4:

ASC'S ENDOWMENT CONSISTS OF 19 INDIVIDUAL FUNDS ESTABLISHED FOR A VARIETY OF PURPOSES.

PART X, LINE 2:

ASC IS EXEMPT FROM FEDERAL INCOME TAX UNDER THE PROVISIONS OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE ("IRC"). IN ACCORDANCE WITH IRC REGULATIONS, ASC IS TAXED ON UNRELATED BUSINESS INCOME, WHICH CONSISTS OF EARNINGS FROM ACTIVITIES NOT RELATED TO THE EXEMPT PURPOSE OF ASC. ASC ACCOUNTS FOR TAX UNCERTAINTIES BASED ON A MORE LIKELY THAN NOT RECOGNITION THRESHOLD WHEREBY TAX BENEFITS ARE ONLY RECOGNIZED WHEN ASC BELIEVES THAT THEY HAVE A GREATER THAN 50% LIKELIHOOD OF BEING SUSTAINED UPON

Part XIII Supplemental Information *(continued)*

EXAMINATION BY TAXING AUTHORITIES.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

CHANGE IN BENEFICIAL INTEREST 1,825,761.

**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

2018

**Open to Public
Inspection**

Name of the organization **ARTS & SCIENCE COUNCIL
CHARLOTTE/MECKLENBURG, INC.** Employer identification number
56-0693436

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
A SIGN OF THE TIMES OF THE CAROLINAS - 6228 EAGLE PEAK DRIVE - CHARLOTTE, NC 28214	20-4766220	501(C)(3)	20,000.	0.			OPERATING SUPPORT GRANT
ACTOR'S THEATRE OF CHARLOTTE 2219 FREEDOM DRIVE CHARLOTTE, NC 28208	58-1888236	501(C)(3)	45,000.	0.			OPERATING SUPPORT GRANT
ARTS+ 345 N. COLLEGE ST. CHARLOTTE, NC 28202	59-1356847	501(C)(3)	376,084.	0.			CULTURE BLOCKS PROGRAM INVESTMENT, OPERATING SUPPORT GRANT, AND TECHNICAL ASSISTANCE
BACH AKADEMIE CHARLOTTE 3527 PROVIDENCE RD CHARLOTTE, NC 28207	82-2472670	501(C)(3)	7,500.	0.			CULTURAL VISION GRANT
BECHTLER MUSEUM OF MODERN ART 420 S. TRYON STREET CHARLOTTE, NC 28202	56-2225722	501(C)(3)	369,060.	0.			CULTURE BLOCKS PROGRAM INVESTMENT, OPERATING SUPPORT GRANT, AND TECHNICAL ASSISTANCE
BLUMENTHAL PERFORMING ARTS 345 NORTH COLLEGE STREET CHARLOTTE, NC 28202	13-4258900	501(C)(3)	250,000.	0.			OPERATING SUPPORT, CULTURAL EDUCATION IN SCHOOLS, SPECIAL PROJECT GRANT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ **82.**

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

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

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) (2018)

**ARTS & SCIENCE COUNCIL
CHARLOTTE/MECKLENBURG, INC.**

Schedule I (Form 990)

56-0693436

Page 1

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BNS PRODUCTIONS 9611 BROOKDALE DRIVE CHARLOTTE, NC 28215	81-0705805	501(C)(3)	41,295.	0.			CULTURAL VISION GRANT AND CULTURE BLOCKS PROGRAM INVESTMENT
CAROLINA RAPTOR CENTER P.O. BOX 16443 CHARLOTTE, NC 28297	56-1349170	501(C)(3)	100,363.	0.			OPERATING SUPPORT
CAROLINA VOICES 1900 QUEENS ROAD CHARLOTTE, NC 28207	56-0810412	501(C)(3)	35,000.	0.			OPERATING SUPPORT
CAROLINAS AVIATION MUSEUM 4672 FIRST FLIGHT DRIVE CHARLOTTE, NC 28208	56-1769105	501(C)(3)	45,000.	0.			OPERATING SUPPORT, TECHNICAL ASSISTANCE GRANT
CAROLINE CALOUCHE & CO. 9315-E MONROE ROAD CHARLOTTE, NC 28270	20-3607784	501(C)(3)	6,000.	0.			CULTURAL VISION GRANT
CHARLOTTE ART LEAGUE 1517 CAMDEN RD CHARLOTTE, NC 28203	23-7414250	501(C)(3)	12,500.	0.			OPERATING SUPPORT GRANT
CHARLOTTE BALLET 701 N. TRYON STREET CHARLOTTE, NC 28202	58-1314711	501(C)(3)	613,550.	0.			CULTURE BLOCKS PROGRAM INVESTMENT, OPERATING SUPPORT GRANT, AND TECHNICAL ASSISTANCE
CHARLOTTE CENTER FOR LITERARY ARTS INC - 1817 CENTRAL AVENUE, ROOM 302 - CHARLOTTE, NC 28205	47-4988291	501(C)(3)	7,500.	0.			CULTURE VISION GRANT
CHARLOTTE DRAGON BOAT ASSOCIATION 4700 CARSONS POND ROAD CHARLOTTE, NC 28225	27-0270077	501(C)(3)	5,000.	0.			CULTURE VISION GRANT

Schedule I (Form 990)

**ARTS & SCIENCE COUNCIL
CHARLOTTE/MECKLENBURG, INC.**

Schedule I (Form 990)

56-0693436

Page 1

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHARLOTTE FOLK SOCIETY PO BOX 36864 CHARLOTTE, NC 28236-6864	56-1328389	501(C)(3)	11,000.	0.			OPERATING SUPPORT GRANT
CHARLOTTE REPERTORY DANCE THEATRE (CRDT) - 4910 LAKEVIEW RD - CHARLOTTE, NC 28216	82-4459994	501(C)(3)	7,830.	0.			CULTURE BLOCKS PROGRAM INVESTMENT
CHARLOTTE SYMPHONY 301 S TRYON STREET, SUITE 1700 CHARLOTTE, NC 28282	56-6011568	501(C)(3)	666,331.	0.			OPERATING SUPPORT, EDUCATION ENDOWMENT GRANT, TECHNICAL ASSISTANCE
CHICKSPEARE 1313 RENFROW LANE CHARLOTTE, NC 28270		501(C)(3)	10,900.	0.			CULTURE BLOCKS PROGRAM INVESTMENT
CHILDREN'S THEATRE OF CHARLOTTE 300 EAST SEVENTH STREET CHARLOTTE, NC 28202	56-1028031	501(C)(3)	374,235.	0.			OPERATING SUPPORT, CULTURAL BLOCKS PROGRAM INVESTMENT
CLAYWORKS 4506 MONROE ROAD CHARLOTTE, NC 28205	90-0198258	501(C)(3)	60,000.	0.			OPERATING SUPPORT GRANT
CLEAN AIR CAROLINA P.O. BOX 5311 CHARLOTTE, NC 28202	57-0462653	501(C)(3)	5,000.	0.			CULTURAL VISION GRANT
COMMUNITY DREAM BUILDERS, INC. 445 KESWICK AVENUE CHARLOTTE, NC 28206	46-2711220	501(C)(3)	5,000.	0.			CULTURAL VISION GRANT
COMMUNITY EDUCATION PROJECT 4025 KALISPELL LN CHARLOTTE, NC 28269	26-3825618	501(C)(3)	7,990.	0.			CULTURAL VISION GRANT

Schedule I (Form 990)

**ARTS & SCIENCE COUNCIL
CHARLOTTE/MECKLENBURG, INC.**

Schedule I (Form 990)

56-0693436

Page 1

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DAPPER STREET PRODUCTIONS, INC. 7430 ARAGORN LANE CHARLOTTE, NC 28212	20-8333303	501(C)(3)	14,600.	0.			CULTURE BLOCKS PROGRAM INVESTMENT
DAVIDSON COLLEGE BOX 7117 DAVIDSON, NC 28035	56-0529961	501(C)(3)	6,500.	0.			CULTURAL VISION GRANT
DAVIDSON COMMUNITY PLAYERS P.O. BOX 76 DAVIDSON, NC 28036	58-1542159	501(C)(3)	30,000.	0.			OPERATING SUPPORT
DEAR SOUL MUSIC COMPANY 433 WEST CRAIGHEAD RD. CHARLOTTE, NC 28206	81-4740768	501(C)(3)	23,705.	0.			CULTURE BLOCKS PROGRAM
DIGI-BRIDGE 216 SYLVANIA AVE. CHARLOTTE, NC 28206	46-4859045	501(C)(3)	20,000.	0.			CULTURAL VISION GRANT
DISCOVERY PLACE, INC. 301 N TRYON STREET CHARLOTTE, NC 28202	56-0529944	501(C)(3)	794,095.	0.			CULTURAL BLOCKS PROGRAM INVESTMENT, OPERATING SUPPORT, TECHNICAL ASSISTANCE GRANT
FESTIVAL IN THE PARK 1409 EAST BLVD CHARLOTTE, NC 28273	56-6087310	501(C)(3)	15,000.	0.			CULTURAL VISION GRANT
FIRST BAPTIST CHURCH WEST COMMUNITY SERVICES ASSOCIATION - 1801 OAKLAWN AVENUE - CHARLOTTE, NC 28216	90-0080769	501(C)(3)	10,000.	0.			CULTURAL VISION GRANT
GAY MENS CHORUS OF CHARLOTTE P.O. BOX 560661 CHARLOTTE, NC 28256	20-5361365	501(C)(3)	10,000.	0.			OPERATING SUPPORT

Schedule I (Form 990)

**ARTS & SCIENCE COUNCIL
CHARLOTTE/MECKLENBURG, INC.**

Schedule I (Form 990)

56-0693436

Page 1

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GOODYEAR ARTS 1776 STATESVILLE AVE. CHARLOTTE, NC 28206	82-1291043	501(C)(3)	6,000.	0.			CULTURAL VISION GRANT
GUILD OF CHARLOTTE ARTISTS 2730 RANDOLPH ROAD CHARLOTTE, NC 28207	23-7370764	501(C)(3)	6,000.	0.			CULTURAL VISION GRANT
HARVEY B. GANTT CENTER FOR AFRICAN-AMERICAN ARTS + CULTURE - 551 S TRYON STREET - CHARLOTTE, NC 28202	56-1152286	501(C)(3)	189,880.	0.			OPERATING SUPPORT, TECHNICAL ASSISTANCE
HISTORIC ROSEDALE PLANTATION 3427 N TRYON STREET CHARLOTTE, NC 28206	56-1558489	501(C)(3)	15,000.	0.			OPERATING SUPPORT
INDIA ASSOCIATION OF CHARLOTTE 3212 DEVON CROFT LN. CHARLOTTE, NC 28269	56-1907586	501(C)(3)	14,000.	0.			CULTURAL VISION GRANT
INREACH 4530 PARK RD., SUITE 300 CHARLOTTE, NC 28209	52-1084075	501(C)(3)	9,000.	0.			CULTURAL VISION GRANT
INSPIRE THE FIRE, INC. 3811 YORKFORD DRIVE CHARLOTTE, NC 28206	56-2403601	501(C)(3)	10,000.	0.			CULTURAL VISION GRANT
JAZZ ARTS CHARLOTTE 345 N. COLLEGE ST. CHARLOTTE, NC 28202	27-1728470	501(C)(3)	52,500.	0.			OPERATING SUPPORT, TECHNICAL ASSISTANCE
JOHNSON C. SMITH UNIVERSITY INCORPORATED - 100 BEATTIES FORD ROAD - CHARLOTTE, NC 28216-5302	25-0983069	501(C)(3)	8,000.	0.			CULTURAL VISION GRANT

Schedule I (Form 990)

**ARTS & SCIENCE COUNCIL
CHARLOTTE/MECKLENBURG, INC.**

Schedule I (Form 990)

56-0693436

Page 1

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LATIN AMERICAN COALITION 4938 CENTRAL AVE CHARLOTTE, NC 28205	58-1945776	501(C)(3)	8,000.	0.			CULTURAL VISION GRANT
LEVINE MUSEUM OF THE NEW SOUTH 200 E. 7TH STREET CHARLOTTE, NC 28202	56-1748648	501(C)(3)	452,077.	0.			CULTURE BLOCKS PROGRAM INVESTMENT, OPERATING SUPPORT, OTHER GRANTS
LORIEN ACADEMY OF THE ARTS 2461 ARTY AVE CHARLOTTE, NC 28208	82-2409144	501(C)(3)	7,000.	0.			CULTURAL VISION GRANT
MAHA'S DANCES OF INDIA 5349 CASPER DRIVE CHARLOTTE, NC 28214	29-3824588	501(C)(3)	7,360.	0.			CULTURE BLOCKS PROGRAM INVESTMENT
MATTHEWS PARKS RECREATION AND CULTURAL RESOURCES DEPT. - 100 MCDOWELL ST. - MATTHEWS, NC 28202	56-6001283	501(C)(3)	5,000.	0.			ASC TOWN INITIATIVES GRANT
MATTHEWS PLAYHOUSE OF THE PERFORMING ARTS - 100 E MCDOWLL ST - MATTHEWS, NC 28105	56-1937368	501(C)(3)	30,000.	0.			OPERATING SUPPORT
MCCOLL CENTER FOR ART + INNOVATION 721 N TRYON STREET CHARLOTTE, NC 28202	51-0195015	501(C)(3)	281,600.	0.			OPERATING SUPPORT
MINT HILL ARTS 11205 LAWYER'S ROAD, SUITE A MINT HILL, NC 28227	04-3846871	501(C)(3)	10,000.	0.			OPERATING SUPPORT
MINT MUSEUM OF ART, INC. 2730 RANDOLPH RD. CHARLOTTE, NC 28207	56-0670666	501(C)(3)	951,352.	0.			OPERATING SUPPORT, OTHER GRANTS, TECHNICAL ASSISTANCE

Schedule I (Form 990)

**ARTS & SCIENCE COUNCIL
CHARLOTTE/MECKLENBURG, INC.**

Schedule I (Form 990)

56-0693436

Page 1

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MOVING SPIRITS, INC. 6848 ENGLISH HILLS DRIVE, 2B CHARLOTTE, NC 28212	45-3503467	501(C)(3)	15,618.	0.			CULTURE BLOCKS PROGRAM INVESTMENT
MUSIC AT ST. ALBAN'S P.O. BOX 371 DAVIDSON, NC 28036	46-4695666	501(C)(3)	16,100.	0.			CULTURAL VISION GRANT
NORTH MECKLENBURG COMMUNITY CHORUS, INC. - P.O. BOX 1234 - CORNELIUS, NC 28031	27-1469178	501(C)(3)	12,500.	0.			CULTURAL VISION GRANT
OBEY FOUNDATION INC P.O. BOX 25163 CHARLOTTE, NC 28229	13-3985609	501(C)(3)	20,000.	0.			CULTURE BLOCK PROGRAM
ONE VOICE INC P.O. BOX 9241 CHARLOTTE, NC 28299	58-1979889	501(C)(3)	27,500.	0.			OPERATING SUPPORT
OPERA CAROLINA 1600 ELIZABETH AVENUE CHARLOTTE, NC 28204	56-6019660	501(C)(3)	491,150.	0.			THRIVE FUND, OTHER GRANTS, OPERATING SUPPORT, EDUCATION ENDOWMENT GRANT
ORDER MY STEPS (OMS) 9229 LAWYERS RD. SUITE I & J MINT HILL, NC 28227	90-0582305	501(C)(3)	13,460.	0.			CULTURE BLOCKS PROGRAM INVESTMENT
PLAYING FOR OTHERS (PFO), INC. 720 S. SUMMIT AVE., STE. B CHARLOTTE, NC 28202	20-1426441	501(C)(3)	6,500.	0.			CULTURAL VISION GRANT
PREAH VIHEAR COMMUNITY CENTER P.O. BOX 43777 CHARLOTTE, NC 28215	80-0856710	501(C)(3)	7,000.	0.			CULTURAL VISION GRANT

Schedule I (Form 990)

**ARTS & SCIENCE COUNCIL
CHARLOTTE/MECKLENBURG, INC.**

Schedule I (Form 990)

56-0693436

Page 1

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PROJECT ART AID INC P.O. BOX 1133 CHARLOTTE, NC 28105	46-1311652	501(C)(3)	5,000.	0.			CULTURAL VISION GRANT
PROJECT SCIENTIST 1724 EAST BLVD. SUITE 202 CHARLOTTE, NC 28203	46-1763945	501(C)(3)	7,200.	0.			CULTURAL VISION GRANT
PROMISE RESOURCE NETWORK 1041 HAWTHORNE LANE CHARLOTTE, NC 28205	27-2648129	501(C)(3)	7,500.	0.			CULTURAL VISION GRANT
PURPLE CHARLOTTE STEPPERS 1015 S BELVEDERE AVE GASTONIA, NC 28054	81-3130327	501(C)(3)	19,500.	0.			CULTURE BLOCKS PROGRAM INVESTMENT
QUE-OS P.O. BOX 11256 CHARLOTTE, NC 28205	46-0643659	501(C)(3)	10,000.	0.			CULTURAL VISION GRANT
SOUTHEND ARTS 2143 PARK ROAD CHARLOTTE, NC 28203	83-2061483	501(C)(3)	7,500.	0.			CULTURAL VISION GRANT
STEVE CRUMP 12114 PRAILS MILL LANE CHARLOTTE, NC 28262	40-3847857		5,000.	0.			PRESIDENT'S DISCRETIONARY FUND
SUSTAIN CHARLOTTE PO BOX 18201 CHARLOTTE, NC 28205	01-0975452	501(C)(3)	5,000.	0.			CULTURAL VISION GRANT
THE ARTS EMPOWERMENT PROJECT 11402 JAMES JACK LANE CHARLOTTE, NC 28277	45-4837497	501(C)(3)	10,000.	0.			CULTURAL VISION GRANT

Schedule I (Form 990)

**ARTS & SCIENCE COUNCIL
CHARLOTTE/MECKLENBURG, INC.**

Schedule I (Form 990)

56-0693436

Page 1

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE CAROLINAS LATIN DANCE COMPANY PO BOX 43770 CHARLOTTE, NC 28215	56-2276606	501(C)(3)	7,500.	0.			OPERATING SUPPORT
THE LIGHT FACTORY 1817 CENTRAL AVE CHARLOTTE, NC 28205	51-0185359	501(C)(3)	35,000.	0.			OPERATING SUPPORT GRANT
THEATRE CHARLOTTE 501 QUEENS ROAD CHARLOTTE, NC 28207	56-0591306	501(C)(3)	90,650.	0.			OPERATING SUPPORT GRANT
THREE BONE THEATRE 643 HILLSIDE AVE. CHARLOTTE, NC 28209	46-4220126	501(C)(3)	12,500.	0.			OPERATING SUPPORT GRANT
TOSCO MUSIC PARTIES 4953 ALBEMARLE RD. CHARLOTTE, NC 28205	56-2135861	501(C)(3)	20,000.	0.			OPERATING SUPPORT
TOWN OF DAVIDSON P.O. BOX 579 DAVIDSON, NC 28036	56-6001212	GOVT	10,000.	0.			ASC TOWN INITIATIVES GRANT
TOWN OF HUNTERSVILLE PARKS & RECREATION - 105 GILEAD RD. FL. 3 - HUNTERSVILLE, NC 28078	56-6001252	GOVT	10,000.	0.			ASC TOWN INITIATIVES GRANT
TOWN OF MATTHEWS PARKS, RECREATION AND CULTURAL RESOURCE DEPARTMENT - 100 E. MCDOWELL ST - MATTHEWS, NC 28105		GOVT	5,000.	0.			ASC TOWN INITIATIVES GRANT
TOWN OF MINT HILL 4430 MINT HILL VILLAGE LN. MINT HILL, NC 28227	56-1034572	GOVT	10,000.	0.			ASC TOWN INITIATIVES GRANT

Schedule I (Form 990)

**ARTS & SCIENCE COUNCIL
CHARLOTTE/MECKLENBURG, INC.**

Schedule I (Form 990)

56-0693436

Page 1

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TOWN OF PINEVILLE 1000 JOHNSTON DR. PINEVILLE, NC 28134	56-6001310	GOVT	10,000.	0.			ASC TOWN INITIATIVES GRANT
UNCC OFFICE OF INTERNATIONAL PROGRAMS - 9201 UNIVERSITY CITY BLVD - CHARLOTTE, NC 28223	56-0791228	501(C)(3)	5,000.	0.			CULTURAL VISION GRANT
UNIVERSITY CITY FOUNDATION 8801 JM KEYNES DRIVE, SUITE 450 CHARLOTTE, NC 28262	81-4461399	501(C)(3)	5,000.	0.			CULTURE BLOCKS PROGRAM INVESTMENT
UNIVERSITY OF NORTH CAROLINA SCHOOL OF THE ARTS FOUNDATION INC. - 1533 SOUTH MAIN STREET - WINSTON-SALEM, NC 27127	56-6064850	501(C)(3)	15,000.	0.			NC SCHOOL OF THE ARTS - WACHOVIA
WING HAVEN 248 RIDGEWOOD AVENUE CHARLOTTE, NC 28209	56-1014180	501(C)(3)	45,000.	0.			OPERATING SUPPORT, TECHNICAL ASSISTANCE

**ARTS & SCIENCE COUNCIL
CHARLOTTE/MECKLENBURG, INC.**

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
CREATIVE RENEWAL FELLOWSHIP GRANT	7	70,000.	0.		
CULTURAL VISION GRANT	5	27,000.	0.		
CULTURE BLOCKS PROGRAM INVESTMENT	27	131,676.	0.		
REGIONAL ARTIST PROJECT GRANT	38	63,294.	0.		
TECHNICAL ASSISTANCE GRANT	4	4,000.	0.		

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

PART I, LINE 2:

ASC OPERATING SUPPORT RECIPIENTS:

OPERATING SUPPORT GRANT RECIPIENTS ARE REQUIRED TO SUBMIT THE FOLLOWING DOCUMENTATION TO MONITOR THE USE OF GRANT FUNDS: SIGNED GRANT AGREEMENT - REQUIRED BEFORE FIRST PAYMENT; METRICS GRID (CREATED BY EACH ORGANIZATION LISTING THEIR TOP 3 METRICS OF SUCCESS FOR THE FISCAL YEAR) IS SUBMITTED IN JULY, UPDATED IN JANUARY, FINAL REPORT IS JULY; QUARTERLY BUDGET TO ACTUAL FINANCIALS; AUDIT OR COMPILATION OF PREVIOUS YEAR; COPIES OF BROCHURES AND MAILINGS; QUARTERLY ATTENDANCE FIGURES AND BOARD OF DIRECTORS LIST.

Part IV Supplemental Information

ASC STAFF ALSO MONITORS GRANT RECIPIENTS BY CONDUCTING SITE VISITS AND CONDUCTING FACE-TO-FACE MEETINGS DURING THE AWARD YEAR.

ASC PROJECT GRANT RECIPIENTS:

PROJECT GRANT RECIPIENTS ARE REQUIRED TO SUBMIT THE FOLLOWING DOCUMENTATION TO MONITOR THE USE OF GRANT FUNDS: INITIAL PAPERWORK: SIGNED GRANT AGREEMENT; REVISED NARRATIVE & BUDGET (IF THE GRANTEE RECEIVED LESS THAN THE AMOUNT REQUESTED). FINAL PAPERWORK: FINAL REPORT OUTLINING ASSESSMENT AND EVALUATION; FINAL BUDGET AND PROJECT DOCUMENTATION.

ADDITIONALLY, PROJECT GRANT RECIPIENTS WHO RECEIVE STATE SUB-GRANTS ARE REQUIRED TO SUBMIT ADDITIONAL PAPERWORK INCLUDING: NOTARIZED CONFLICT OF INTEREST POLICY; NOTARIZED NO OVERDUE TAX DEBT FORM; STATE GRANT CERTIFICATION & SWORN STATEMENT AND STATE GRANT COMPLIANCE REPORT.

ASC STAFF ALSO PERIODICALLY MONITORS GRANT RECIPIENTS BY CONDUCTING SITE VISITS TO FUNDED PROJECTS.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: ARTS+

(H) PURPOSE OF GRANT OR ASSISTANCE: CULTURE BLOCKS PROGRAM INVESTMENT, OPERATING SUPPORT GRANT, AND TECHNICAL ASSISTANCE GRANT

NAME OF ORGANIZATION OR GOVERNMENT: BECHTLER MUSEUM OF MODERN ART

(H) PURPOSE OF GRANT OR ASSISTANCE: CULTURE BLOCKS PROGRAM INVESTMENT, OPERATING SUPPORT GRANT, AND TECHNICAL ASSISTANCE GRANT

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: CHARLOTTE BALLET

(H) PURPOSE OF GRANT OR ASSISTANCE: CULTURE BLOCKS PROGRAM INVESTMENT,
OPERATING SUPPORT GRANT, AND TECHNICAL ASSISTANCE GRANT

Lined area for supplemental information.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2018

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ▶ Attach to Form 990.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

Name of the organization **ARTS & SCIENCE COUNCIL
CHARLOTTE/MECKLENBURG, INC.** Employer identification number **56-0693436**

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> 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 filing 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.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment? **4a**
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? **4b**
- c** Participate in, or receive payment from, an equity-based compensation arrangement? **4c**
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? **5a**
- b** Any related organization? **5b**
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization? **6a**
- b** Any related organization? **6b**
- 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**

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**

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? **9**

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2018

**ARTS & SCIENCE COUNCIL
CHARLOTTE/MECKLENBURG, INC.**

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) ROBERT BUSH CEO	(i)	216,065.	0.	0.	4,492.	9,729.	230,286.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) TONI FREEMAN EVP	(i)	156,484.	3,000.	0.	2,074.	7,726.	169,284.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) BARBARA ANN TEMPLE VP, EDUCATION	(i)	139,069.	2,000.	0.	4,172.	7,726.	152,967.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

SCHEDULE O
(Form 990 or 990-EZ)

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 990-EZ.

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

OMB No. 1545-0047

2018

Open to Public
Inspection

Name of the organization

ARTS & SCIENCE COUNCIL
CHARLOTTE/MECKLENBURG, INC.

Employer identification number
56-0693436

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

THE ARTS & SCIENCE COUNCIL IS A PROACTIVE, NON-PROFIT ORGANIZATION THAT PROVIDES THE PLANNING, OVERSIGHT AND FUNDING REQUIRED TO ENSURE AND SUPPORT A VIBRANT AND CULTURALLY DIVERSE ARTS, SCIENCE, AND HISTORY COMMUNITY IN CHARLOTTE-MECKLENBURG FOR THE EDUCATION OF OUR CHILDREN AND THE ENJOYMENT OF ALL RESIDENTS.

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

THE ARTS & SCIENCE COUNCIL (ASC) IS: THE COMMUNITY'S CHIEF ADVOCATE FOR ARTS, SCIENCE, HISTORY AND HERITAGE, A GATHERER AND STEWARD OF PUBLIC AND PRIVATE COMMUNITY RESOURCES, AN INVESTOR OF THOSE RESOURCES IN THE CULTURAL SECTOR AND COMMUNITY, THE STRATEGIC PLANNER FOR THE COMMUNITY'S CULTURAL SECTOR, AND THE PUBLIC ART AGENT FOR THE CITY OF CHARLOTTE AND MECKLENBURG COUNTY. THE MISSION OF THE ORGANIZATION IS BUILDING APPRECIATION, PARTICIPATION AND SUPPORT FOR ARTS, SCIENCE, HISTORY AND HERITAGE IN CHARLOTTE-MECKLENBURG. THE VISION IS TO SHAPE A VIBRANT CULTURAL LIFE FOR ALL.

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

THE ADMINISTRATION AND OPERATIONS COMMITTEE, ASC PRESIDENT AND CFO EACH REVIEW A DRAFT OF THE 990 IN DETAIL. UPON THEIR ACCEPTANCE OF THE DOCUMENT, THE FORM 990 IS SHARED WITH THE FULL BOARD OF DIRECTORS FOR REVIEW PRIOR TO FILING.

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

THE BOARD MEMBERS AND STAFF ARE PROVIDED A COPY OF THE CONFLICT OF INTEREST

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

Schedule O (Form 990 or 990-EZ) (2018)

Name of the organization	ARTS & SCIENCE COUNCIL CHARLOTTE/MECKLENBURG, INC.	Employer identification number	56-0693436
--------------------------	---	--------------------------------	------------

POLICY EACH JULY AND ASKED TO REVIEW AND SIGN THE FORM INDICATING THEY HAVE READ THE POLICY AND MADE ANY APPROPRIATE DISCLOSURES. SHOULD A CONFLICT EXIST ON A MATTER COMING TO A VOTE, THE MEMBER WITH THE CONFLICT WOULD EXCUSE HIMSELF/HERSELF FROM THE VOTE.

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

THE PRESIDENT'S COMPENSATION IS ESTABLISHED ANNUALLY BY THE OFFICERS OF THE BOARD OF DIRECTORS. COMPENSATION ADJUSTMENTS ARE MADE BASED ON INDIVIDUAL PERFORMANCE (AS DETERMINED THROUGH A 360 DEGREE REVIEW), MARKET CONDITIONS, AND COMPARABLE NONPROFIT PEER COMPENSATION. DISCUSSIONS ARE DOCUMENTED IN THE MEETING MINUTES. THE OFFICERS OF THE BOARD OF DIRECTORS ALSO ESTABLISH THE PRESIDENT'S ANNUAL PERFORMANCE BONUS BASED ON ORGANIZATIONAL AND PERSONAL PERFORMANCE WITHIN THE GUIDELINES OF THE BONUS PROGRAM APPROVED BY THE BOARD OF DIRECTORS. THE PRESIDENT IS RESPONSIBLE FOR ESTABLISHING THE SALARIES OF HIS DIRECT REPORTS, INCLUDING KEY EMPLOYEES. COMPENSATION ADJUSTMENTS FOR KEY EMPLOYEES ARE SHARED WITH THE OFFICERS OF THE BOARD OF DIRECTORS TO ENSURE REASONABLENESS.

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

THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART IX, LINE 11G, OTHER FEES:

ARTIST CONTRACTS:

PROGRAM SERVICE EXPENSES	1,958,046.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	1,958,046.

Name of the organization	ARTS & SCIENCE COUNCIL CHARLOTTE/MECKLENBURG, INC.	Employer identification number	56-0693436
--------------------------	---	--------------------------------	------------

CONSULTING FEES:

PROGRAM SERVICE EXPENSES	119,749.
MANAGEMENT AND GENERAL EXPENSES	74,705.
FUNDRAISING EXPENSES	92,888.
TOTAL EXPENSES	287,342.

CONTRACTED SERVICES:

PROGRAM SERVICE EXPENSES	40,564.
MANAGEMENT AND GENERAL EXPENSES	25,305.
FUNDRAISING EXPENSES	31,465.
TOTAL EXPENSES	97,334.

OTHER PROFESSIONAL FEES:

PROGRAM SERVICE EXPENSES	28,387.
MANAGEMENT AND GENERAL EXPENSES	18,762.
FUNDRAISING EXPENSES	23,328.
TOTAL EXPENSES	70,477.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	2,413,199.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

CHANGE IN BENEFICIAL INTEREST	-1,825,761.
-------------------------------	-------------

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▶ Attach to Form 990.

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

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization **ARTS & SCIENCE COUNCIL
CHARLOTTE/MECKLENBURG, INC.** Employer identification number **56-0693436**

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
GREATER CHARLOTTE CULTURAL TRUST - 82-0576292, 217 S. TRYON STREET, CHARLOTTE, NC 28202	ENDOWMENT INVESTMENT & ADMINISTRATION	NORTH CAROLINA	501(C)(3)	LINE 12A, I	N/A		X

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

Schedule R (Form 990) 2018

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)	X	
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
o Sharing of paid employees with related organization(s)		X
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

