## 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

Open to Public Inspection

A	For the	2018 calen	dar year, or tax year begir	nning 7/01	, 20	18, and ending	6/3	30		, 2019			
В	Check if ap	pplicable:	С					<b>D</b> Employ	er ident	ification number			
	Addre	ess change	Richmond Art Cer	ıter				94-	6104	204			
	Name	change	2540 Barrett Ave					E Telepho	ne num	ber			
	Initial	return	Richmond, CA 948	304				(51	0) 6	20-6772			
	-	eturn/terminated						(01	0, 0	20 0172			
		nded return						<b>G</b> Gross re	eceints	\$ 1,474,645.			
	$\vdash$	cation pending	F Name and address of principa	al officer: TT LI	C	l <sub>F</sub>	I(a) Is this a	group retur					
	Applic	cation penuing	Same As C Above	" Hertha	Sweet Wong	g	` '						
_	Tay aya	mpt status:	X 501(c)(3) 501(c) (	) ◀ (insert n	o.) 4947(a)(1)	) or   527	If "No,"	subordinates attach a list	(see in	structions)			
<del>'</del>	Websi	•		, ,	0.) 4347(a)(1)	, <u> </u>							
K			w.richmondartcen X Corporation Trust		_		• • •	exemption nu					
		organization:		Association Oth	ner ►	L Year of formation	n: 1936	) IVI S	state of I	egal domicile: CA			
Га		Summar	<b>y</b> be the organization's miss	ion or most signif	icant activities:	ho Diahmo	nd 7 m	t Cont	or i	a a dimamia			
ce		<u>arts organization that empowers and transforms individuals and the community</u> through creative exploration, experience, and education.											
nar		enroagh ordaerve emproraeron, emperionee, and education.											
Governance	2 Ch	heck this bo	ox ► if the organization	n discontinued its	onerations or d	isposed of mor	e than 2	5% of its	net as				
69			oting members of the gove						3	14			
∘ర			dependent voting member						4	14			
Activities &	<b>5</b> To	otal number	of individuals employed in	n calendar year 20	018 (Part V, line	2a)			5	77			
tivi			of volunteers (estimate if						6	362			
Ac			ed business revenue from						7a	0.			
	<b>b</b> Ne	et unrelated	I business taxable income	from Form 990-T	, line 38				7b	0.			
								rior Year		Current Year			
ø.			and grants (Part VIII, line					772,0		826,492.			
Revenue		-	rice revenue (Part VIII, line					440,1		569,204.			
eve			ncome (Part VIII, column (	•	•				82.	18,836. 51,012.			
Œ													
								<u>,277,3</u>	76.	1,465,544.			
			imilar amounts paid (Part		-								
			to or for members (Part I										
S			er compensation, employe		976,523.			1,153,053.					
Expenses	<b>16a</b> Pr	rofessional	fundraising fees (Part IX,	column (A), line 1	1e)								
кре	<b>b</b> To	otal fundrais	sing expenses (Part IX, co	lumn (D), line 25)	<b>•</b>	85,193.							
Ĥ	<b>17</b> Of	ther expens	ses (Part IX, column (A), li	nes 11a-11d, 11f-	24e)	<del></del> .		262,1	07.	298,190.			
	<b>18</b> To	otal expense	es. Add lines 13-17 (must	equal Part IX, col	umn (A), line 25	)	1	,238,6	30.	1,451,243.			
	<b>19</b> Re	evenue less	expenses. Subtract line 1	8 from line 12				38,7		14,301.			
or Ses							Beginnin	g of Curren	t Year	End of Year			
sets Ilan	<b>20</b> To	otal assets	(Part X, line 16)				1	,288,4	14.	1,311,323.			
Net Assets Fund Balanc	<b>21</b> To	otal liabilitie	s (Part X, line 26)					168,3	01.	176,909.			
Fe	<b>22</b> Ne	et assets or	fund balances. Subtract I	ine 21 from line 2	0		1	,120,1	13.	1,134,414.			
Pa	rt II	Signatur	e Block						•	·			
Unde	er penalties	of perjury, I de	eclare that I have examined this ret	urn, including accompar	nying schedules and st	tatements, and to th	e best of m	y knowledge	and beli	ief, it is true, correct, and			
comp	olete. Decla	aration of prepa	erer (other than officer) is based on	all information of which	preparer has any kno	owledge.	T						
Sig	jn 💮	Signatu	re of officer	2M _	l )	$\mathbf{c}$		ااد					
He	re		tha Sweet Wong	<del>5</del> 4 -	<u> </u>	IUL	Presi	dent					
		, ,	print name and title			1							
		Print/Type p	preparer's name	Preparer's signature		Date		Check	if	PTIN			
Pa	id	Ralph	Ricciardi	Ralph Ricc	iardi			self-employe	ed	P01262676			
Pre	eparer	Firm's name	P. J. Riccia	rdi, Inc.									
Us	ė Only	Firm's addre			e 360			Firm's EIN	20	-1398210			
				CZ 9/1901				Phone no	/115.	-457-1215			

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

X Yes No

Part	III	Statement of Program Service Accomplishments	
	D : (I	· · · · · · · · · · · · · · · · · · ·	X
1	-	y describe the organization's mission:	
		Richmond Art Center is a dynamic arts organization that empowers and transforms	
		ividuals and the community through creative exploration, experience, and	
	<u>eau</u>	cation.	
2	Did th	e organization undertake any significant program services during the year which were not listed on the prior	
		990 or 990-EZ?	)
		s," describe these new services on Schedule O.	
3	Did th	ne organization cease conducting, or make significant changes in how it conducts, any program services?	)
	If "Yes	s," describe these changes on Schedule O.	
4	Descr	ibe the organization's program service accomplishments for each of its three largest program services, as measured by expenses	
	Section and re	on 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, evenue, if any, for each program service reported.	
4 a	(Code	e:) (Expenses \$504, 973. including grants of \$) (Revenue \$440, 740.	. )
	St	udio Art - The Art Center provided more than 270 studio art classes and workshops	_
	in	painting, drawing, mixed media, book arts/collage, sculpture, ceramics,	
	tex	tiles/fiber arts, digital, metal/jewelry and silk-screening. The classes were	
		<u>ght by 50 + teaching artists and enjoyed by more than 2100 students of all ages i</u>	
		en studios. While the classes are fee-based, the Center provided 120 scholarships	
	to :	youths and adults who could not afford the class tuition.	
4 h	(Code	e: ) (Expenses \$ 342,198. including grants of \$ ) (Revenue \$ 310,095.	_
	•	in Community- The Art in Community program is the Center's outreach program. It	-′
		vided after school and in-school art activities in a variety of media at 10 West	
		tra Costa Unified School District schools, 6 Community Centers, and the Richmond	
		lic Library, engaging over 1800 elementary, middle and high school students. Thes	e -
	act	ivities are offered for free to the students. In addition, the Center provided 2	
	fou	r-day professional development workshops for 45 WCCUSD elementary teachers to	
		orporate art into their curriculum. The Center also provided a series of free	
	<u>fam</u>	ily weekend activities to encourage multi-generational learning.	
4.	(Code	e: ) (Expenses \$ 169,244, including grants of \$ ) (Revenue \$ 67,859,	_
	(Code		_
		<u>ibition- More than 16,000 people attended 14 art exhibitions in the Center's four</u> leries. The exhibitions featured the works of 634 aspiring, emerging and	
		ablished Bay Area artists in various mediums of the fine arts and contemporary	
		fts. The exhibition program featured a series of thematic group, solo and juried	
		ibitions plus the annual Members show, The Art of Living Black as well as the	
		ual West Contra Costa Unified School District and the Art in the Community Studen	t -
		ws. The Center presented 17 lectures/films and demonstrations by exhibiting and	
		iting artists and three community-based Family Days. The exhibitions and public	
		nts are free to the public.	
		·	
	<u> </u>		
		program services (Describe in Schedule O.)  See Schedule O  (Pavanua S. 170 including grants of S. 170	
	(Expe	enses \$ 59,479 including grants of \$ ) (Revenue \$ 56,013.)  program service expenses \( \bigcup \) 1.075.894	
<b>→</b> C	ı utal	program 3017100 0Ap01303 F [.(//).()74.	

# Form 990 (2018) Richmond Art Center Part IV Checklist of Required Schedules

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

# Form 990 (2018) Richmond Art Center Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J.</i>	23		Х
24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		Х
	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		
25	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
I	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		Х
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? If 'Yes,' complete Schedule L, Part II.	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? If 'Yes,' complete Schedule L. Part III.	27		Х
28				
;	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
I	<b>b</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		Х
•	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? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1	34		Х
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
I	b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	<b>Section 501(c)(3) organizations.</b> 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		Х
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		Х
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	
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			· [
1 -	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Yes	No
	b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1с	Х	
BAA	TEEA0104L 08/03/18	Form	990	(2018)

Form 990 (2018) Richmond Art Center

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

			Yes	No
2 8	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 77			
ŀ	of at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Χ	
	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3 8	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		Х
ŀ	y If 'Yes,' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation in Schedule O</i>	3 b		
4 8	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)?	4 a		Х
ŀ	o 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).			
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
(	: If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5с		
6 a	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?	6 a		Х
ŀ	olf 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
á	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and		v	
	services provided to the payor?	7 a	X	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file	7 D	Λ	
•	Form 8282?	7с		Х
(	If 'Yes,' indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
ł	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7 h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring			
	organization have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)	10-		
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.			
ł	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
14 a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
ŀ	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?	15		Х
	If 'Yes,' see instructions and file Form 4720, Schedule N.	10		v
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 No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year..... 14 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. **b** Enter the number of voting members included in line 1a, above, who are independent ... 14 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? ...... 2 Χ 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 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?..... Did the organization become aware during the year of a significant diversion of the organization's assets?.... 5 Χ Χ Did the organization have members or stockholders?..... 6 7 a 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?..... 7 a Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?..... Χ 8 a X **b** Each committee with authority to act on behalf of the governing body?..... 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10 a Did the organization have local chapters, branches, or affiliates?..... Χ 10 a 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? 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... Χ b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O Χ 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Χ to conflicts?..... c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done ... See .Schedule .0 ...... Χ 12c 13 Did the organization have a written whistleblower policy?..... 13 Χ **14** Did the organization have a written document retention and destruction policy?..... Χ 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official.. See . Schedule.. 0...... Χ 15a 15 b 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?..... Χ 16 a **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?. 16 b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > CA Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Upon request Own website X Another's website Other (explain in Schedule O) Describe in Schedule 0 whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records

Richmond CA 94804 (510) 620-6772

Carolyn Rodkin 2540 Barrett Avenue

Form	990	(2018)	Ric	hmond	Art F	Cer	nter

94-6104204

Page 7

## 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

- 1 a 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.

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

		(C)								
(A) Name and Title	(B) Average hours per	thar	n one s both dire	box, an o ector/	unles	/	on	(D)  Reportable compensation from	(E)  Reportable compensation from related organizations	(F) Estimated amount of other compensation
	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) Inez Brooks-Myers	5	37						0	0	•
Member	0	Х						0.	0.	0.
_(2) Carlos Privat Member	1	Х						0.	0.	0.
(3) Sarah Antonich	3									
Member	0	Х						0.	0.	0.
(4) Danny Aarons	1									
Member	0	Х						0.	0.	0.
(5) James Wheeler	2								_	_
Member	0	Х						0.	0.	0.
(6) Patricia Guthrie  Member	1	Х						0.	0.	0.
(7) Philip Linhares	3	21						0.	<u> </u>	<u></u>
Member	0	Х						0.	0.	0.
(8) Hertha Sweet Wong	2									
President	0	Х		Χ				0.	0.	0.
(9) Julianne Martinez	_1_									
Vice President	0	Χ		Χ				0.	0.	0.
(10) Sabina Pan	2									
Treasurer	0	Х		Χ				0.	0.	0.
(11) Roshni Kavate	1	]								
Secretary	0	Χ		Χ				0.	0.	0.
(12) Stephen Nomura	2									
Member	0	Χ						0.	0.	0.
(13) Marguerite Brown	11	37						0	0	0
Member Course	0	Х	H					0.	0.	0.
(14) Owen Serra  Member	$-\frac{1}{0}$	Х						0.	0.	0.
		1				1 1		· .	<u> </u>	<u> </u>

Part VII   Section A. Officers, Directors, Tru		Key	Em	_		es, a	and	d Highest Com	pensated Empl	oyees	(conti	nued)
	(B) (C) Position Average (do not check more than one					<b>(F)</b>						
(A)	Average hours	(do box	not c	heck	more	than	one 1 an	(D) Reportable	<b>(E)</b> Reportable	_	<b>(F)</b> stimated	
Name and title	per week	offic	cer ar	nd a d	directo	or/trus	tee)	compensation from the organization	compensation from related organizations	amo	unt of oth pensation	her
	(list any hours	or d	instil	Officer	Key	High emp	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	f	om the anization	
	for related	Individual or director	utio	<u>e</u>	emp	est d loyer	ner			an	d related anization	t
	organiza - tions	Individual trustee or director	าลไ		Key employee	e omp				. 3		
	below dotted line)	stee	Institutional trustee		e	Highest compensated employee						
	iiie)		ðő			ited						
(15) Richard Ambrose	40											
Executive Director	0	-				Χ		82,358.	0.			0.
(16)												
(17)												
(18)												
(10)												
(19)												
(20)												
(21)												
(22)												
(23)												
(0.6)												
(24)												
(25)												
1 b Sub-total							<b></b>	82,358.	0.			0.
c Total from continuation sheets to Part VII, Section	on A						<b>&gt;</b>	0.	0.			0.
d Total (add lines 1b and 1c).							<b>&gt;</b>	82,358.	0.			0.
2 Total number of individuals (including but not limited	to those I	isted	abov	ve) v	who i	recei	ved	more than \$100,00	0 of reportable comp	ensatio	า	
from the organization   0												
											Yes	No
3 Did the organization list any former officer, direction line 1a? If 'Yes,' complete Schedule J for suc.	tor, or tru h <i>individ</i> u	stee, al	key	em/	nploy	ee,	or h	nighest compensat	ted employee	3		X
•												71
4 For any individual listed on line 1a, is the sum of the organization and related organizations greate	reportab r than \$1	ie co 50,00	mpe 30?	ensa <i>If '</i> }	ition /es,'	com	otn <i>ple</i> :	te Schedule J for	rom			
such individual										. 4		X
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes	e compen	satio	n fro	om :	any	unre	late	ed organization or	individual	. 5		Χ
Section B. Independent Contractors	, comple	16 00	neu	uic	3 101	300	πρ	er3011		.   3		Λ
1 Complete this table for your five highest compensations.	sated inde	epen	dent	COL	ntrac	tors	tha	t received more th	nan \$100,000 of			
compensation from the organization. Report compen		the c	alen	dar <u>y</u>	year	endii	ng v	İ	-			
<b>(A)</b> Name and business addi	ess							(B) Description of	of services	Compe	<b>C)</b> nsatio	n
2 Total number of independent contractors (including b		ited to	o tho	se l	isted	abo	ve)	who received more	than			
\$100,000 of compensation from the organization	<b>0</b>											

. u.	• • •	Check if Schedule O contains a resp	oonse or note to any	line in this Part VI	II		
				<b>(A)</b> Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	b d e f	Federated campaigns 1a  Membership dues 1b  Fundraising events 1c  Related organizations 1d  Government grants (contributions) 1e  All other contributions, gifts, grants, and similar amounts not included above 1f  Noncash contributions included in lines 1a-1f: \$	56,013. 19,850. 325,000. 425,629.				
	h	Total. Add lines 1a-1f		826,492.			
Program Service Revenue	2a b c	Studio Art Education Prog Art In Community Program Exhibition Program	Business Code 611710 611710 713990	417,105. 106,740. 45,359.	417,105. 106,740. 45,359.		
gram Serv	d e f						
Ę.	g	Total. Add lines 2a-2f		569,204.			
	3	Investment income (including dividend other similar amounts)	▶	18,836.	18,836.		
	5	Royalties					
	b	(i) Real  Gross rents					
	d	Net rental income or (loss)		3,825.	3,825.		
	b	Gross amount from sales of assets other than inventory  Less: cost or other basis and sales expenses	(ii) Other				
	_	Net gain or (loss)					
Other Revenue		Gross income from fundraising events (not including \$ 19,850. of contributions reported on line 1c).  See Part IV, line 18	a 54,277.				
Ě		Net income or (loss) from fundraising	2,101.	45,176.			
•		Gross income from gaming activities. See Part IV, line 19		43,170.			
		Less: direct expenses  Net income or (loss) from gaming active	b /ities▶				
	b	Gross sales of inventory, less returns and allowances  Less: cost of goods sold  Net income or (loss) from sales of inventory.	b				
	_	Miscellaneous Revenue	Business Code				
	11 a b	Miscellaneous Income	900099	2,011.	2,011.		
	С	All other revenue					
	-	All other revenue  Total. Add lines 11a-11d	<b>&gt;</b>	2 011			
		Total revenue. See instructions	H-	2,011. 1,465,544.	593,876.	0.	0.

#### 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 r	<u>'</u>			
Do i 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members	82,358.	41,179.	16,472.	24,707.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	936,052.	760,797.	129,228.	46,027.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	300,002.			10,02.
9	Other employee benefits	35,174.	30,492.	4,682.	
10	Payroll taxes	99,469.	72,986.	20,448.	6,035.
11	Fees for services (non-employees):	,	,	.,	.,
a	Management				
Ł	Legal				
(	: Accounting	12,310.		12,310.	
c	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	42,005.	23,133.	16,664.	2,208.
12	(A) amount, list line 11g expenses on Schedule 0.) Advertising and promotion	9,858.	9,858.	10,004.	2,200.
13	Office expenses	3,000.	3,000.		
14	Information technology	2,022.		2,022.	
15	Royalties	2,022.		2,022.	
16	Occupancy	25,008.		25,008.	
17	Travel	1,248.	1,148.	60.	40.
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	8,614.		8,614.	
23	Insurance	19,069.	3,108.	15,961.	
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	Program Supplies	49,420.	42,893.	6,498.	29.
	Miscellaneous	26,118.	19,203.	5,999.	916.
	Merchant Charges	24,250.	20,167.	2,920.	1,163.
	Professional Development	16,749.	16,749.		
e	All other expenses	61,519.	34,181.	23,270.	4,068.
25	<b>Total functional expenses.</b> Add lines 1 through 24e	1,451,243.	1,075,894.	290,156.	85,193.
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)				

		Check if Schedule O contains a response or note to	any line	in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing			437,843.	1	476,081.
	2	Savings and temporary cash investments			490,952.	2	
	3	Pledges and grants receivable, net			17,800.	3	109,800.
	4	Accounts receivable, net			450.	4	35,300.
	5	Loans and other receivables from current and former trustees, key employees, and highest compensated er Part II of Schedule L	nplovees	s. Complete I		5	
	6	Loans and other receivables from other disqualified pe section 4958(f)(1)), persons described in section 4958(c)(3 employers and sponsoring organizations of section 501(c) beneficiary organizations (see instructions). Complete	ersons (a 3)(B), and (9) volunt Part II o	s defined under I contributing ary employees' of Schedule L		6	
Assets	7	Notes and loans receivable, net			7		
	8	Inventories for sale or use	<u> </u>		8		
As	9	Prepaid expenses and deferred charges			44,363.	9	41,542.
-	10 a	Land, buildings, and equipment: cost or other basis.  Complete Part VI of Schedule D	Ī	74,269.	11,000		12,012.
		Less: accumulated depreciation.		49,708.	25,716.	10 c	24,561.
	11	Investments – publicly traded securities			268,844.	11	620,613.
	12	Investments – other securities. See Part IV, line 11			200,044.	12	020,013.
	13	Investments – program-related. See Part IV, line 11.				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11		2,446.	15	3,426.	
	16	Total assets. Add lines 1 through 15 (must equal line			1,288,414.	16	1,311,323.
	17	Accounts payable and accrued expenses	44,462.	17	38,260.		
	18	Grants payable	·	18	,		
	19	Deferred revenue	123,839.	19	137,624.		
	20	Tax-exempt bond liabilities		20			
es	21	Escrow or custodial account liability. Complete Part I'				21	
Liabilities	22	Loans and other payables to current and former office key employees, highest compensated employees, and Complete Part II of Schedule L	l disquali	fied persons.		22	
	23	Secured mortgages and notes payable to unrelated th	ird partie	es		23	
	24	Unsecured notes and loans payable to unrelated third	parties.			24	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com				25	1,025.
	26	Total liabilities. Add lines 17 through 25			168,301.	26	176,909.
ses		Organizations that follow SFAS 117 (ASC 958), check her lines 27 through 29, and lines 33 and 34.					
an	27	Unrestricted net assets		<u> </u>	868,304.	27	856,092.
Bal	28	Temporarily restricted net assets.		<u> </u>	212,279.	28	235,805.
Þ	29	Permanently restricted net assets			39,530.	29	42,517.
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), ch and complete lines 30 through 34.	eck here	<b>▶</b> ∐			
8	30	Capital stock or trust principal, or current funds			30		
8	31	Paid-in or capital surplus, or land, building, or equipm	ent fund.			31	
As	32	Retained earnings, endowment, accumulated income,	or other	funds		32	
let	33	Total net assets or fund balances		_	1,120,113.	33	1,134,414.
_	34	Total liabilities and net assets/fund balances			1,288,414.	34	1,311,323.

	( ) 11201mm0114 1120 0011001	0 - 0	<b>~</b> -		- 3 -
Par	t 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	1,	465,	544.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,	451,	243.
3	Revenue less expenses. Subtract line 2 from line 1	3		14,	301.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,	120,	113.
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			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
_	column (B))	10	1,	134,	414.
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.				
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2	а	Х
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review separate basis, consolidated basis, or both:  Separate basis  Both consolidated and separate basis	ed on a			
Ł	Were the organization's financial statements audited by an independent accountant?		2	b	Χ
	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  Both consolidated and separate basis	ate			
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?		2	С	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.				
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3	а	Х
_ k	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		3	b	
BAA	TEEA0112L 08/03/18		Foi	m <b>990</b>	(2018)

#### SCHEDULE A (Form 990 or 990-EZ)

### **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

Department of the Treasury Internal Revenue Service Name of the organization Employer identification number Richmond Art Center 94-6104204 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 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.) 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 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 10 June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 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 12 lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.** Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations ..... **q** Provide the following information about the supported organization(s). (i) Name of supported organization (iii) Type of organization (described on lines 1-10 above (see instructions)) (v) Amount of monetary (iv) Is the organization listed (vi) Amount of other support (see instructions) support (see instructions) in your governing document? No (A) (B) (C) (D) (E) Total

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

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

Sec	tion A. Public Support								
begi	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	<b>(d)</b> 2017	<b>(e)</b> 2018	(f) Total		
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	1,211,138.	754,551.	1,016,331.	772,018.	826,492.	4,580,530.		
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.		
3	The value of services or facilities furnished by a governmental unit to the organization without charge	123,204.	123,204.	123,204.	98,204.	98,204.	566,020.		
4	Total. Add lines 1 through 3	1,334,342.	877,755.	1,139,535.	870,222.	924,696.	5,146,550.		
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)						0.		
6	<b>Public support.</b> Subtract line 5 from line 4						5,146,550.		
Sec	tion B. Total Support								
Cale begi	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	<b>(d)</b> 2017	<b>(e)</b> 2018	(f) Total		
7	Amounts from line 4	1,334,342.	877,755.	1,139,535.	870,222.	924,696.	5,146,550.		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	1,722.	3,732.	9,636.	9,382.	18,836.	43,308.		
9	Net income from unrelated business activities, whether or not the business is regularly carried on	,	- <b>,</b>	.,	.,	- <b>,</b>	0.		
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) See Part VI		434,721.	402,985.	504,743.	629,317.	1,971,766.		
11	Total support. Add lines 7 through 10						7,161,624.		
12	Gross receipts from related activ	vities, etc. (see ins	structions)			12	0.		
13	<b>First five years.</b> If the Form 990 is organization, check this box and	for the organization	s first, second, th	ird, fourth, or fifth t	ax year as a sectio	n 501(c)(3)	▶ □		
Sec	tion C. Computation of Pu								
	Public support percentage for 20						71.86%		
15	Public support percentage from	2017 Schedule A,	Part II, line 14			15	79.03%		
16a	<b>33-1/3% support test—2018.</b> If t and <b>stop here.</b> The organization	he organization di qualifies as a pub	d not check the b blicly supported o	ox on line 13, and rganization	d line 14 is 33-1/3	% or more, chec	k this box		
b	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								
17a	<b>10%-facts-and-circumstances te</b> or more, and if the organization the organization meets the 'facts'	meets the 'facts-a	ind-circumstance:	s' test, check this	box and stop her	e. Explain in Par	t VI how		
	<b>10%-facts-and-circumstances te</b> or more, and if the organization organization meets the 'facts-an	meets the 'facts-a d-circumstances' t	ind-circumstance: est. The organiza	s' test, check this ation qualifies as a	box and <b>stop her</b> a publicly support	<b>e.</b> Explain in Par ed organization.	t VI how the		
18	<b>Private foundation.</b> If the organi	zation did not che	ck a box on line	13, 16a, 16b, 17a,	, or 17b, check thi	s box and see in	structions >		

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.)

Sec	tion A. Public Support	osts fisted selett,	prodes semprete :	u. ( 11.)			
Calend	dar year (or fiscal year beginning in)	<b>(a)</b> 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	<b>(d)</b> 2017	<b>(e)</b> 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any unusual grants.)	.,					7
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.						•
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
	tion B. Total Support				1		
	dar year (or fiscal year beginning in)	<b>(a)</b> 2014	<b>(b)</b> 2015	(c) 2016	<b>(d)</b> 2017	<b>(e)</b> 2018	<b>(f)</b> Total
	Amounts from line 6						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b.  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).						
	Total support. (Add lines 9, 10c, 11, and 12.)						
	First five years. If the Form 990 organization, check this box and	stop here	· · · · · · · · · · · · · · · · · · ·				
	tion C. Computation of Pul					, ,	
	Public support percentage for 20	•			•		%
	Public support percentage from 2					16	0/0
	tion D. Computation of Inv					1 1	
17	Investment income percentage for	•	• • •	-			0,0
18	Investment income percentage fi						%
	<b>33-1/3% support tests—2018.</b> If t is not more than 33-1/3%, check	this box and <b>sto</b>	<b>p here.</b> The organ	ization qualifies	as a publicly supp	orted organization	▶ ∐
	<b>33-1/3% support tests—2017.</b> If t line 18 is not more than 33-1/3% <b>Private foundation.</b> If the organization	, check this box	and <b>stop here.</b> The	e organization qu	ialifies as a public	ly supported organ	nization ►

#### 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?  If 'No,' describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in <b>Part VI</b> when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below.	<b>4</b> a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , 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			
h	amendment to the organizing document).  Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the	5a		
	organization's organizing document?	5b		
	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If 'Yes,' provide detail in <b>Part VI</b> .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))?  If 'Yes,' provide detail in <b>Part VI</b> .	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in <b>Part VI</b> .	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in <b>Part VI</b> .	9с		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		
BAA	TEEA0404L 06/07/18 Schedule A (Form 990	or 9	90-EZ	2018

Pa	it iv   Supporting Organizations (continued)			
-11	Lies the averagination accorded a gift or contribution from any of the following necessary		Yes	No
	Has the organization accepted a gift or contribution from any of the following persons? <b>a</b> 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?	11a		
	<b>b</b> A family member of a person described in (a) above?	11b		
	c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.	11c		
Sec	ction B. Type I Supporting Organizations			
	Did the divertees twisters as accombinate one or make appropriations have the name to warried an accombinate of		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? If 'No,' describe in <b>Part VI</b> 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.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Sec	ction C. Type II Supporting Organizations			
	Г		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sec	ction D. All Type III Supporting Organizations			
	ſ		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
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? If 'Yes,' describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.	3		
Sec	ction 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).			
	The organization satisfied the Activities Test. Complete line 2 below.			
	<b>b</b> The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
	The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see in	struc	tions).	
2	Activities Test. Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	substantially all of its activities.	La		
	<b>b</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? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>			
	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>	3a		
	<b>b</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>	3b		

Sch	edule A (Form 990 or 990-EZ) 2018 Richmond Art Center		94-61	04204	Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	anizat	ions		
1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organization	st on No ons mus	ov. 20, 1970 (explain in st complete Sections A	Part VI). <b>See</b> through E.	•
Sec	tion A — Adjusted Net Income		(A) Prior Year	(B) Curre (optio	
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			
Sec	tion B – Minimum Asset Amount		(A) Prior Year	(B) Curre (optio	
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):				
- 1	Average monthly value of securities	1a			
	Average monthly cash balances	1b			
	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			
Sec	tion C — Distributable Amount			Current	Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1			
2	Enter 85% of line 1.	2			<u> </u>
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	1 1 3	5			
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6			

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

Schedule A (Form 990 or 990-EZ) 2018

Sche	edule A (Form 990 or 990-EZ) 2018 Richmond Art Center	94-6104204	Page 7
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (con	tinued)	
Sec	ction D – Distributions	Curren	ıt 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		•

9 Distributable amount for 2018 from Section C, line 6

10 Line 8 amount divided by line 9 amount

in Part VI). See instructions.

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			
<b>a</b> From 2013			
<b>b</b> From 2014			
<b>c</b> From 2015			
<b>d</b> From 2016			
<b>e</b> From 2017			
f Total of lines 3a through e			
<b>g</b> 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.			
<b>4</b> Distributions for 2018 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
<b>b</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.			
<b>6</b> 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>b</b> Excess from 2015			
c Excess from 2016			
d Excess from 2017			
e Excess from 2018			
BAA		Schedule A (Fo	rm 990 or 990-EZ) 20

BAA

Schedule A (Form 990 or 990-EZ) 2018

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

#### Part II, Line 10 - Other Income

Nature and Source		2018	 2017	2016	 2015	 2014
Other Income	\$		504,743. \$			
	Total 🕏	629,317.	\$ 504,743. \$	402,985.	\$ 434,721.	\$ 0.

## SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection
Employer identification number

	Richmond Art Center			94-6104204
Par	t   Organizations Maintaining Dono	r Advised Funds or Othe	er Similar Fun	ds or Accounts.
	Complete if the organization answ	vered 'Yes' on Form 990	, Part IV, line	6.
		(a) Donor advised f	unds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and don are the organization's property, subject to the organization's	or advisors in writing that the organization's exclusive legal	assets held in do control?	nor advised funds Yes No
6	Did the organization inform all grantees, donor for charitable purposes and not for the benefit	of the donor or donor advisor.	or for any other	purpose conferring
_	impermissible private benefit?			les like
Par		word 'Vos' on Form 900	Part IV line	7
	Complete if the organization answ Purpose(s) of conservation easements held by			7.
	Preservation of land for public use (e.g., re			f a historically important land area
	Protection of natural habitat	ecreation of education)		f a certified historic structure
	Preservation of open space	L	Freservation o	a certified filstofic structure
2	Complete lines 2a through 2d if the organization h	old a gualified concernation cont	ribution in the form	of a concentration assument on the
2	last day of the tax year.	elu a qualifieu conservation cont		Tot a conservation easement on the
				Held at the End of the Tax Yea
a	Total number of conservation easements			2a
ŀ	Total acreage restricted by conservation easen	nents		2b
(	: Number of conservation easements on a certifi	ied historic structure included	in (a)	2c
C	Number of conservation easements included in structure listed in the National Register	(c) acquired after 7/25/06, ar	nd not on a histor	ic 2 d
3	Number of conservation easements modified, transtax year ►	sferred, released, extinguished,	or terminated by th	e organization during the
4	Number of states where property subject to conser	vation easement is located ►		
5	Does the organization have a written policy reg		g, inspection, han	dling of violations,
	and enforcement of the conservation easemen			
6	Staff and volunteer hours devoted to monitoring, in	nspecting, handling of violations,	and enforcing cor	servation easements during the year
7	Amount of expenses incurred in monitoring, inspect ►\$	cting, handling of violations, and	enforcing conserv	ation easements during the year
8	Does each conservation easement reported on and section 170(h)(4)(B)(ii)?	line 2(d) above satisfy the red	quirements of sec	tion 170(h)(4)(B)(i) Yes No
9	In Part XIII, describe how the organization reports include, if applicable, the text of the footnote to conservation easements.	conservation easements in its report the organization's financial s	evenue and expens statements that de	se statement, and balance sheet, and escribes the organization's accounting for
Par		ctions of Art, Historical vered 'Yes' on Form 990	Treasures, or , Part IV, line	Other Similar Assets. 8.
1 a	If the organization elected, as permitted under art, historical treasures, or other similar assets hel in Part XIII, the text of the footnote to its finance.	ld for public exhibition, education	n, or research in fu	nue statement and balance sheet works of rtherance of public service, provide,
ŀ	If the organization elected, as permitted under historical treasures, or other similar assets held fo following amounts relating to these items:	r public exhibition, education, or	research in further	rance of public service, provide the
	(i) Revenue included on Form 990, Part VIII, I			· ·
	(ii) Assets included in Form 990, Part X			
2	If the organization received or held works of art, hi amounts required to be reported under SFAS 1	istorical treasures, or other simil 16 (ASC 958) relating to thes	ar assets for finance e items:	cial gain, provide the following
á	Revenue included on Form 990, Part VIII, line	1		
ŀ	Assets included in Form 990, Part X			<b>▶</b> \$

Part III Organizations Mainta	ining Collections	of Art, Historic	cal freasures, or	Other Similar Ass	sets (continuea)
3 Using the organization's acquisition items (check all that apply):	, accession, and other	records, check any	of the following that are	e a significant use of its	collection
<b>a</b> Public exhibition		<b>d</b> Loan or e	exchange programs		
<b>b</b> Scholarly research		e Other			
c Preservation for future gener	ations				
4 Provide a description of the organiz Part XIII.	ation's collections and	explain how they fu	ther the organization's	exempt purpose in	
5 During the year, did the organiza to be sold to raise funds rather th	nan to be maintained	as part of the orga	nization's collection?		Yes No
Part IV Escrow and Custodia line 9, or reported an	Arrangements. (amount on Form s	Complete if the 990, Part X, lin	organization ans e 21.	wered 'Yes' on Fo	orm 990, Part IV,
1 a Is the organization an agent, trus on Form 990, Part X?	stee, custodian or othe	er intermediary for	contributions or othe	r assets not included	☐ Yes ☐ No
<b>b</b> If 'Yes,' explain the arrangement					
					Amount
<b>c</b> Beginning balance				1c	
<b>d</b> Additions during the year				1 d	_
e Distributions during the year				1e	
f Ending balance				1f	
2 a Did the organization include an a	mount on Form 990,	Part X, line 21, for	escrow or custodial a	account liability?	Yes No
<b>b</b> If 'Yes,' explain the arrangement					
Part V Endowment Funds. C	omplete if the org	anization answ	ered 'Yes' on For	rm 990, Part IV, lii	ne 10.
	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1 a Beginning of year balance	39,530.	36,672	. 32,894	. 32,214	. 31,289.
<b>b</b> Contributions	,	<u>,                                    </u>	,	,	,
• Not investigate and a surious continu					
c Net investment earnings, gains, and losses	2,987.	2,858	3,778	680	. 925.
<b>d</b> Grants or scholarships	_,		0,110		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
· '					
e Other expenditures for facilities and programs				0	•
f Administrative expenses					
<b>q</b> End of year balance	42,517.	39,530	36,672	. 32,894	. 32,214.
2 Provide the estimated percentage					, JZ,ZI4.
a Board designated or quasi-endowm	-		g, column (a)) nela c		
<b>b</b> Permanent endowment	100.00%				
		%			
c Temporarily restricted endowmer		_			
The percentages on lines 2a, 2b, ar	nd 2c should equal 100	%.			
3 a Are there endowment funds not in t	he possession of the or	ganization that are	held and administered	for the	
organization by:					Yes No
(i) unrelated organizations					3a(i) X
(ii) related organizations					3a(ii) X
<b>b</b> If 'Yes' on line 3a(ii), are the rela	ited organizations list	ed as required on	Schedule R?		. 3b
4 Describe in Part XIII the intended	duses of the organiza	tion's endowment	funds.		<u> </u>
Part VI Land, Buildings, and	Equipment.				
Complete if the organi		Yes' on Form 9	990. Part IV. line	11a. See Form 99	0. Part X. line 10.
Description of property			<b>(b)</b> Cost or other	(c) Accumulated	(d) Book value
Description of property	(a) Cost	vestment)	basis (other)	depreciation	(u) book value
<b>1 a</b> Land	`	,	(- ,)	p	
<b>b</b> Buildings					
c Leasehold improvements					
<b>d</b> Equipment					
<b>e</b> Other		74 260		40 700	04 561
Total. Add lines 1a through 1e. (Column		74,269.	ımn (D) lina 10a \	49,708.	24,561.
Total. Add lines to through te. (Column	ırı (u) must equal Fort	11 390, Part λ, COIL	iiiii (B), iiiie Tuc.)		24,561.

BAA Schedule D (Form 990) 2018

Part VII Investments — Other Securities. Complete if the organization answered	l 'Yes' on Form 991	N/A N Part IV line 11b See Form 9	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-	
(1) Financial derivatives	(4, 233, 333, 3	(O) mounds of canadian cost of one	
(2) Closely-held equity interests.			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
(l)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)	•	37 / 7	
Part VIII Investments — Program Related. Complete if the organization answered	l 'Yes' on Form 990	N/A N Part IV line 11c See Form 9	990 Part X line 13
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	d-of-vear market value
(1)	(1)		,
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.)			
Part IX Other Assets. Complete if the organization answered	N/A I 'Yes' on Form 991	N Part IV line 11d See Form 9	990 Part X line 15
	scription	0, 1 dr. 17, mie 11d. 000 1 0mi	(b) Book value
(1)	'		,,
(2)			
(3)			
(4)			
(5)			
<u>(6)</u> <u>(7)</u>			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (	B) line 15.)		•
Part X Other Liabilities.			
Complete if the organization answered 'Yes' on F			).
(a) Description of liability (1) Federal income taxes	(b) Book value		
(2) Payroll Clearing	-33	22	
(3) Sales Tax Payable	1,35		
(4)	1,50	,,,,	
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
(11)			
	1 00	) E	
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the fo			a liability for uncertain

		<u>_</u> _
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return. N/A	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d.	2e	
3 Subtract line 2e from line 1.	3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.) 4b		
c Add lines 4a and 4b.	4 с	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses p	er Return. N/A	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities		
b Prior year adjustments		
c Other losses. 2c		
d Other (Describe in Part XIII.) 2d		
e Add lines 2a through 2d.	2e	
3 Subtract line <b>2e</b> from line <b>1</b> .	3	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.) 4b		
c Add lines 4a and 4b.	4 с	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).	5	
Part XIII Supplemental Information.		

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

BAA Schedule D (Form 990) 2018

#### SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

#### Supplemental Information Regarding Fundraising or Gaming Activities

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number 94-6104204 Richmond Art Center **Fundraising Activities.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations Solicitation of non-government grants Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key **b** If 'Yes,' list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (vi) Amount paid to (iii) Did fundraiser (i) Name and address of individual (iv) Gross receipts (or retained by) (ii) Activity (or retained by) or entity (fundraiser) have custody or control of contributions? from activity fundraiser listed in organization column (i) Yes No 1 2 3 5 6 7 9 10 Total. 0. List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Sche	edule	G (Form 990 or 990-EZ) 2018 Richmon	d Art Center		94-610	04204 Page <b>2</b>	
Par			he organization ar	nswered 'Yes' on Fo s and gross income	rm 990, Part IV, li on Form 990-EZ,	ne 18, or reported lines 1 and 6b.	
REVENU			(a) Event #1  Spring Fundrai (event type)	(b) Event #2  HAF (event type)	(c) Other events  None (total number)	(d) Total events (add column (a) through column (c))	
	1	Gross receipts	53,685.	20,442.		74,127.	
Ē	2	Less: Contributions	15,850.	4,000.		19,850.	
	3	Gross income (line 1 minus line 2)	37,835.	16,442.		54,277.	
	4	Cash prizes					
D	5	Noncash prizes					
I R E C T	6	Rent/facility costs					
CT EXPENSES	7	Food and beverages					
	8	Entertainment					
	9	Other direct expenses	6,628.	2,473.		9,101.	
Ü	10 11	Direct expense summary. Add lines 4 thro Net income summary. Subtract line 10 fro	-			- /	
Part III Gaming. Complete if the organization answered 'Yes' on Form 990, Part IV, line 19, or reported more \$15,000 on Form 990-EZ, line 6a.							
R E V E N U E			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))	
U E	1	Gross revenue					
E X P E N S E S T S	2	Cash prizes					
	3	Noncash prizes					
	4	Rent/facility costs					
	5	Other direct expenses					
	6	Volunteer labor	Yes% No	Yes%	Yes % No		
	7	Direct expense summary. Add lines 2 thro	ough 5 in column (d)				
	8	Net gaming income summary. Subtract lin	ne 7 from line 1, colum	ın (d)			
9	Ent	er the state(s) in which the organization co	nducts gaming activitie	 es:			
	ls th	ne organization licensed to conduct gaming lo,' explain:				Yes No	

**b** If 'Yes,' explain:

10 a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?.....

Sche	edule G (Form 990 or 990-EZ) 2018 Richmond Art Center 9	4-61042	204	Page 3
	Does the organization conduct gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?		Yes	 ∏ No
12	Indicate the percentage of gaming activity conducted in:	1 1		
	a The organization's facility	13a		%
	<b>b</b> An outside facility.			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
	Enter the name and address of the person who prepares the organization's gaming/special events books and records			
	Name ►			
	Address ►			
ŀ	a Does the organization have a contract with a third party from whom the organization receives gaming revenue by If 'Yes,' enter the amount of gaming revenue received by the organization   of gaming revenue retained by the third party   for I'yes,' enter name and address of the third party:	ue? he amount		No
	Name ►			
	Address ►			
16	Gaming manager information:			
	Name ►			
	Gaming manager compensation ► \$			
	Description of services provided			
	□ Director/officer □ Employee □ Independent contractor			
17	Mandatory distributions:			
á	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		Yes	No
ŀ	b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in organization's own exempt activities during the tax year ► \$	the	_	_
Pai	Supplemental Information. Provide the explanations required by Part I, line 2b, co and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide ar information. See instructions.	lumns (i ıy additio	ii) and ( onal	v);

#### SCHEDULE O (Form 990 or 990-EZ)

#### Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Richmond Art Center

Employer identification number

94-6104204

#### Form 990, Part III, Line 4d - Other Program Services Description

Membership & Marketing - The Art Center has 730 members who pay dues and receive certain discounts and benefits. The dues received support the Center's operation. Marketing promotes and maintains the Center's brand, programs (Exhibition, Studio and AIC), public events through the printed and electronic media, website, and social media.

#### Form 990, Part VI, Line 11b - Form 990 Review Process

The Form 990 is reviewed by the Executive Director, Treasurer, Finance Committee members and the Board of Directors.

#### Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

A copy of the policy is furnished to each new director, officer, executive staff member and manager. It is summarized in the employee handbook. Each director, officer, and member of the executive staff completes a conflict of interest disclosure statement annually, and at the time any such person assumes his or her position. The meeting minutes of the Board or Committee shall reflect any potential conflict of interest that was disclosed and any interested party that was not present during the final discussion or vote and did not vote. The Board of Directors and Finance Committee review this policy annually.

#### Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO & Top Management

The Executive Director receives an annual review by the Board of Directors.

Compensation adjustments are determined based on this information, in accordance with an employment contract and after discussion of accomplishments, and with consideration of comparable local job market data.

Name of the organization	Employer identification number
Richmond Art Center	94-6104204

#### Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers & Key Employees

The Executive Director and the Board of Directors reviewed all proposed salary adjustments through the fiscal year within the salary scale and range approved by the Board, after consultation with a professional compensation specialist and based on a survey conducted in early 2016. The survey was of comparably-sized arts organizations in Northern California with job equivalence.

#### Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

Board meeting minutes are available at the reception desk.