

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form 990

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.

2022

Open to Public Inspection

A For the 2022 calendar year, or tax year beginning **JUL 1, 2022** and ending **JUN 30, 2023**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization SPRINGBOARD FOR THE ARTS		D Employer identification number 41-1690483
	Doing business as		E Telephone number 651-292-4381
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ 11,682,094.
	262 UNIVERSITY AVENUE WEST		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	City or town, state or province, country, and ZIP or foreign postal code SAINT PAUL, MN 55103		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No
F Name and address of principal officer: LAURA ZABEL SAME AS C ABOVE		If "No," attach a list. See instructions	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: WWW.SPRINGBOARDFORTHEARTS.ORG			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other			L Year of formation: 1991
M State of legal domicile: MN			

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO CULTIVATE VIBRANT ARTS COMMUNITIES BY CONNECTING ARTISTS WITH THE SKILLS, INFORMATION AND		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	11
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	11
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	23
	6 Total number of volunteers (estimate if necessary)	6	49
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 1,828,111.	Current Year 10,956,724.
	9 Program service revenue (Part VIII, line 2g)	341,554.	653,600.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,206.	42,093.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	20,753.	29,677.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,192,624.	11,682,094.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	431,500.	403,180.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,583,597.	1,820,620.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25)	129,498.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,476,332.	1,962,881.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	3,491,429.	4,186,681.	
19 Revenue less expenses. Subtract line 18 from line 12	-1,298,805.	7,495,413.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 8,950,194.	End of Year 16,056,163.
	21 Total liabilities (Part X, line 26)	1,844,469.	1,862,723.
	22 Net assets or fund balances. Subtract line 21 from line 20	7,105,725.	14,193,440.

Part II Signature Block

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

Sign Here	PUBLIC DISCLOSURE COPY		Date		
	Signature of officer LAURA ZABEL, EXECUTIVE DIRECTOR				
Paid Preparer Use Only	Print/Type preparer's name NEAL EVERT	Preparer's signature NEAL EVERT	Date 01/19/24	Check if self-employed <input type="checkbox"/>	PTIN P00046853
	Firm's name CARPENTER, EVERT & ASSOCIATES, LTD.	Firm's EIN 41-1534805	Phone no. (952) 831-0085		
Firm's address 7760 FRANCE AVE S, SUITE 940 BLOOMINGTON, MN 55435					

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: TO CULTIVATE VIBRANT ARTS COMMUNITIES BY CONNECTING ARTISTS WITH THE SKILLS, INFORMATION AND SERVICES THEY NEED TO MAKE A LIVING AND A LIFE.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code:) (Expenses \$ 1,304,723. including grants of \$) (Revenue \$) RURAL PROGRAMS - THE FERGUS FALLS OFFICE PROVIDES ONGOING PROFESSIONAL TRAINING AND CONSULTATIONS, A RESOURCE CENTER, LEGAL AND HEALTHCARE RESOURCES. THE RURAL REGENERATOR FELLOWSHIP SUPPORTS LONG TERM LEARNING AND EXCHANGE ACROSS RURAL GEOGRAPHIES AND PROVIDES FINANCIAL SUPPORT TO CREATIVE RURAL LEADERS SO THEY CAN THINK BIG AS THEY GROW, SHIFT OR EXPAND THEIR LEADERSHIP EFFORTS. BEGINNING IN OCTOBER 2021, THE RURAL REGENERATOR FELLOWSHIP HAS SUPPORTED 33 RURAL ARTISTS AND CREATIVES BY AWARDING FINANCIAL SUPPORT, GATHERING WITH RURAL ORGANIZERS AND OTHER CROSS-SECTOR LEADERS FOR LEARNING, EXCHANGE, AND PROBLEM SOLVING AROUND ISSUES FACING RURAL COMMUNITIES.

IN JUNE 2023, THE FIRST RURAL FUTURES SUMMIT WAS HOSTED IN FERGUS

4b (Code:) (Expenses \$ 1,026,850. including grants of \$) (Revenue \$) COMMUNITY DEVELOPMENT - OUR COMMUNITY DEVELOPMENT PROGRAM IS A MEANS FOR FOSTERING VIBRANT, EQUITABLE, AND INCLUSIVE ENVIRONMENTS BY FORGING VITAL CONNECTIONS BETWEEN ARTISTS AND THEIR COMMUNITIES. OPERATING BOTH LOCALLY AND NATIONALLY, WE COLLABORATE WITH A DIVERSE ARRAY OF PARTNERS, INCLUDING CITY GOVERNMENTS, NEIGHBORHOOD ORGANIZATIONS, PRIVATE INSTITUTIONS, AND COMMUNITY CENTRIC GROUPS COMMITTED TO HARNESSING THE POWER OF ARTISTS IN THE REALMS OF COMMUNITY DEVELOPMENT, CREATIVE PLACEMAKING, AND INNOVATIVE PROBLEM-SOLVING.

IN COLLABORATION WITH RACING MAGPIE, OUR COMMUNITY DEVELOPMENT TEAM IS CONCLUDING THE THIRD YEAR OF ITS STEWARDSHIP OF THE CREATIVE COMMUNITY LEADERSHIP INSTITUTE (CCLI). CCLI REPRESENTS AN IMMERSIVE AND VERSATILE

4c (Code:) (Expenses \$ 1,123,655. including grants of \$) (Revenue \$) ECONOMIC OPPORTUNITY - SPRINGBOARD FOR THE ARTS' ECONOMIC OPPORTUNITY PROGRAMMING ENCOMPASSES PROFESSIONAL DEVELOPMENT RESOURCES FOR ARTISTS, ECONOMIC OPPORTUNITY PROGRAMS, ACCESS TO HEALTH AND LEGAL RESOURCES, AND PHYSICAL RESOURCE CENTERS. IN FY23 WE CONTINUED TO BUILD THE CAPACITY OF OUR RESOURCE CENTER FOR ARTISTS, OFFERING COMPUTER WORKSTATIONS OUTFITTED WITH GRAPHIC AND SLIDE SCANNERS, ADOBE CREATIVE CLOUD, MICROSOFT OFFICE, A PUBLICATIONS LIBRARY, AND OTHER GRANT-MAKING AND OPPORTUNITIES DATABASES. SPECIAL TOPIC CLINICS WERE ALSO INTRODUCED WITH IN-PERSON 1:1 TA CONSULTATIONS DURING LAB HOURS. OUR A/V CLOSET ALLOWS ARTISTS TO CHECK OUT ART TECHNOLOGY SUCH AS CAMERAS AND LIGHTS. WE'VE CONTINUED OUR LEGAL REFERRAL SERVICE, CONNECTING OVER 100 ARTISTS WITH ONE-ON-ONE ATTORNEY REFERRALS IN FY23.

4d Other program services (Describe on Schedule O.) (Expenses \$ 139,298. including grants of \$) (Revenue \$)

4e Total program service expenses 3,594,526.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1 through 21, with sub-questions a-f for questions 11, 12, and 20. 'X' marks indicate 'Yes' responses for questions 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, 12b, 13, 14a, 14b, 15, 16, 17, 18, 19, 20a, 20b, and 21.

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	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>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	X	

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		
b Enter the number of Forms W-2G included on 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?	X	

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

Table with columns for question number, question text, and Yes/No columns. Includes questions 2a through 17 regarding employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and various organizational requirements.

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
	1a 11		
b	Enter the number of voting members included on line 1a, above, who are independent		
	1b 11		
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?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

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

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

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed MN
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records
LAURA ZABEL - 651-292-4381
262 UNIVERSITY AVENUE WEST, SAINT PAUL, MN 55103

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) LAURA ZABEL EXECUTIVE DIRECTOR	40.00			X			161,668.	0.	18,237.	
(2) ANDRIANA ABARIOTES TREASURER	1.00	X		X			0.	0.	0.	
(3) ANISHA MURPHY DIRECTOR	1.00	X					0.	0.	0.	
(4) GRETA BAUER REYES PAST PRESIDENT	4.00	X		X			0.	0.	0.	
(5) JARRETT REED PRESIDENT	2.00	X		X			0.	0.	0.	
(6) MADDE GIBBA DIRECTOR	1.00	X					0.	0.	0.	
(7) MAUREEN RAMIREZ DIRECTOR	1.00	X					0.	0.	0.	
(8) ROBERT RANSICK DIRECTOR	1.00	X					0.	0.	0.	
(9) ROSE TENG DIRECTOR	1.00	X					0.	0.	0.	
(10) SARAH SWEDBURG DIRECTOR	1.00	X					0.	0.	0.	
(11) SARINA O'TAIBI DIRECTOR	1.00	X					0.	0.	0.	
(12) SHANNON PETTITT DIRECTOR	1.00	X					0.	0.	0.	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
1b Subtotal							161,668.	0.	18,237.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							161,668.	0.	18,237.	

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

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 0

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	111,916.			
	f	All other contributions, gifts, grants, and similar amounts not included above ...	1f	10,844,808.			
	g	Noncash contributions included in lines 1a-1f	1g	\$			
	h	Total. Add lines 1a-1f		10,956,724.			
Program Service Revenue	2 a	PROJECT MANAGEMENT	Business Code				
			711300	206,736.	206,736.		
	b	FISCAL SPONSORSHIP	711300	200,974.	200,974.		
	c	ARTIST CONSULTATIONS	711300	110,854.	110,854.		
	d	CONTRACT WORKSHOPS	711300	73,318.	73,318.		
	e	RESOURCE CTR	711300	22,109.	22,109.		
	f	All other program service revenue	711300	39,609.	39,609.		
	g	Total. Add lines 2a-2f		653,600.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		42,093.		42,093.	
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6 a	Gross rents	6a	(i) Real			
				(ii) Personal			
	b	Less: rental expenses ...	6b				
	c	Rental income or (loss)	6c				
	d	Net rental income or (loss)					
	7 a	Gross amount from sales of assets other than inventory	7a	(i) Securities			
				(ii) Other			
	b	Less: cost or other basis and sales expenses	7b				
	c	Gain or (loss)	7c				
	d	Net gain or (loss)					
8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a					
b	Less: direct expenses	8b					
c	Net income or (loss) from fundraising events						
9 a	Gross income from gaming activities. See Part IV, line 19	9a					
b	Less: direct expenses	9b					
c	Net income or (loss) from gaming activities						
10 a	Gross sales of inventory, less returns and allowances	10a					
b	Less: cost of goods sold	10b					
c	Net income or (loss) from sales of inventory						
Miscellaneous Revenue	11 a	OTHER INCOME	Business Code				
			711300	29,677.	29,677.		
	b						
	c						
	d	All other revenue					
e	Total. Add lines 11a-11d		29,677.				
12	Total revenue. See instructions		11,682,094.	683,277.	0.	42,093.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	403,180.	403,180.		
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 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	269,674.	223,967.	28,048.	17,659.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,305,703.	1,076,290.	141,689.	87,724.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	142,758.	126,619.	9,001.	7,138.
10 Payroll taxes	102,485.	90,223.	7,138.	5,124.
11 Fees for services (nonemployees):				
a Management				
b Legal	6,217.		6,217.	
c Accounting	30,351.		30,351.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	752,345.	714,114.	32,820.	5,411.
12 Advertising and promotion	17,226.	8,706.	8,520.	
13 Office expenses	68,747.	49,436.	19,311.	
14 Information technology	73,602.	43,354.	24,516.	5,732.
15 Royalties				
16 Occupancy	79,627.	65,406.	14,221.	
17 Travel	151,862.	150,844.	1,018.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	17,614.	3,018.	14,596.	
20 Interest				
21 Payments to affiliates	5,657.	1,429.	4,228.	
22 Depreciation, depletion, and amortization	110,784.	80,570.	30,214.	
23 Insurance	16,874.	5,456.	11,418.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a FISCAL AGENCY SPONSORSH	367,851.	367,851.		
b MEALS AND ENTERTAINMENT	124,457.	111,432.	13,025.	
c PRINTING AND COPYING	49,101.	22,193.	26,198.	710.
d MISCELLANEOUS	47,659.	15,844.	31,815.	
e All other expenses	42,907.	34,594.	8,313.	
25 Total functional expenses. Add lines 1 through 24e	4,186,681.	3,594,526.	462,657.	129,498.
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	2,690,982.	1	1,903,137.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	1,502,633.	3	6,138,288.
	4 Accounts receivable, net	47,730.	4	127,753.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	47,783.	9	55,873.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 4,403,286.		
	b Less: accumulated depreciation	10b 282,883.		
	11 Investments - publicly traded securities	517,507.	11	3,710,709.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	1,963.	15	0.
16 Total assets. Add lines 1 through 15 (must equal line 33)	8,950,194.	16	16,056,163.	
Liabilities	17 Accounts payable and accrued expenses	97,437.	17	330,033.
	18 Grants payable		18	
	19 Deferred revenue	10,093.	19	13,505.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties	497,959.	23	0.
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	1,238,980.	25	1,519,185.
	26 Total liabilities. Add lines 17 through 25	1,844,469.	26	1,862,723.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	5,885,840.	27	7,583,092.
	28 Net assets with donor restrictions	1,219,885.	28	6,610,348.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	7,105,725.	32	14,193,440.
	33 Total liabilities and net assets/fund balances	8,950,194.	33	16,056,163.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	11,682,094.
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,186,681.
3	Revenue less expenses. Subtract line 2 from line 1	3	7,495,413.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	7,105,725.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-407,698.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	14,193,440.

Part 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: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		X
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:		
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
b Were the organization's financial statements audited by an independent accountant?	X	
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:		
<input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	X	
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

Form 990 (2022)

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

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

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

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

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

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1069158.	2566054.	4579877.	1383412.	10263371.	19861872.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	1069158.	2566054.	4579877.	1383412.	10263371.	19861872.
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)						12443939.
6 Public support. Subtract line 5 from line 4.						7417933.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7 Amounts from line 4	1069158.	2566054.	4579877.	1383412.	10263371.	19861872.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	2,398.	3,312.	2,834.	2,206.	42,092.	52,842.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	6,311.	5,709.	34,279.	20,753.	29,677.	96,729.
11 Total support. Add lines 7 through 10						20011443.
12 Gross receipts from related activities, etc. (see instructions)					12	2,115,171.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f))	14	37.07 %
15 Public support percentage from 2021 Schedule A, Part II, line 14	15	50.64 %
16a 33 1/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

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

Section A. Public Support

Table with 7 columns: (a) 2018, (b) 2019, (c) 2020, (d) 2021, (e) 2022, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support.

Section B. Total Support

Table with 7 columns: (a) 2018, (b) 2019, (c) 2020, (d) 2021, (e) 2022, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on; 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.); 13 Total support.

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Row 15: Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f)) 15 %; Row 16: Public support percentage from 2021 Schedule A, Part III, line 15 16 %

Section D. Computation of Investment Income Percentage

Table with 2 columns: Line number, Percentage. Row 17: Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f)) 17 %; Row 18: Investment income percentage from 2021 Schedule A, Part III, line 17 18 %

19a 33 1/3% support tests - 2022. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2021. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? Sub-rows 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? Row 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?

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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)?

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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? Row 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? Row 3: By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year?

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). Sub-rows a, b, c. Row 2: Activities Test. Answer lines 2a and 2b below. Sub-rows a, b. Row 3: Parent of Supported Organizations. Answer lines 3a and 3b below. Sub-rows a, b.

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

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

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

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2022 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1 Distributable amount for 2022 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2022 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2022			
a From 2017			
b From 2018			
c From 2019			
d From 2020			
e From 2021			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2022 distributable amount			
i Carryover from 2017 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2022 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2022 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2023. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2018			
b Excess from 2019			
c Excess from 2020			
d Excess from 2021			
e Excess from 2022			

Schedule A (Form 990) 2022

Part VI

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.)

Multiple horizontal lines for supplemental information.

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2022

Name of the organization

SPRINGBOARD FOR THE ARTS

Employer identification number

41-1690483

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

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

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

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

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

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

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	_____ _____ _____	\$ 240,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	_____ _____ _____	\$ 390,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	_____ _____ _____	\$ 1,600,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	_____ _____ _____	\$ 7,850,744.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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

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

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

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

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

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

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2022

Open to Public Inspection

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

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

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

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose(s) of conservation easements, a table for lines 2a-2d (Total number, acreage, certified historic structures, acquired after 2006), and questions 3-9 regarding monitoring, expenses, and reporting.

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include questions 1a, 1b, 2, and 2a, 2b regarding reporting of art and historical treasures.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2022

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____%
 - b Permanent endowment _____%
 - c Term endowment _____%
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|--------|----|
| (i) Unrelated organizations | 3a(i) | |
| (ii) Related organizations | 3a(ii) | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		765,000.		765,000.
b Buildings		3,388,648.	180,975.	3,207,673.
c Leasehold improvements		6,000.	2,800.	3,200.
d Equipment		243,638.	99,108.	144,530.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				4,120,403.

Part VII Investments - Other Securities.

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

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) FISCAL SPONSORSHIP	1,519,185.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	

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

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

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

1	Total revenue, gains, and other support per audited financial statements		1	10,906,546.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e		0.
3	Subtract line 2e from line 1		3	10,906,546.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		775,548.
c	Add lines 4a and 4b	4c		775,548.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	11,682,094.

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

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

1	Total expenses and losses per audited financial statements		1	3,818,831.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e		0.
3	Subtract line 2e from line 1		3	3,818,831.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		367,851.
c	Add lines 4a and 4b	4c		367,851.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	4,186,682.

Part XIII Supplemental Information.

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

PART IV, LINE 1B:

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

Part XIII Supplemental Information (continued)

SPRINGBOARD FROM ALL RELATED LIABILITY.

PART X, LINE 2:

SPRINGBOARD HAS A TAX-EXEMPT STATUS UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND HAS ADOPTED ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, ASC 740-10. SPRINGBOARDS POLICY IS TO EVALUATE UNCERTAIN TAX POSITIONS, AT LEAST ANNUALLY, FOR THE POTENTIAL FOR INCOME TAX EXPOSURE FROM UNRELATED BUSINESS INCOME OR FROM LOSS OF NONPROFIT STATUS.

SPRINGBOARD CONTINUES TO OPERATE CONSISTENT WITH ITS ORIGINAL EXEMPTION APPLICATION AND EACH YEAR TAKES THE NECESSARY ACTIONS TO MAINTAIN ITS EXEMPT STATUS. IT HAS BEEN CLASSIFIED AS AN ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION UNDER THE INTERNAL REVENUE CODE AND CHARITABLE CONTRIBUTIONS BY DONORS ARE TAX DEDUCTIBLE.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

FISCAL AGENCY SPONSORSHIP ACTIVITY

PART XII, LINE 4B - OTHER ADJUSTMENTS:

FISCAL AGENCY SPONSORSHIP ACTIVITY

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

**Open to Public
Inspection**

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

Part I General Information on Grants and Assistance

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
ELIZABETH LOUGHLIN P.O. BOX 133 BISON, SD 57620	38-6021204		10,000.	0.			RURAL REGENERATOR ARTIST FELLOWSHIP
RODERICK BRUCE JR. PO BOX 1491 BELCOURT, ND 58316	88-1413924		10,000.	0.			RURAL REGENERATOR ARTIST FELLOWSHIP
AUTUMN CAVENDER-WILSON 2643 540TH ST. GRANITE FALLS, MN 56241	47-7213025		10,000.	0.			RURAL REGENERATOR ARTIST FELLOWSHIP
DANCING CROW PRODUCTIONS, INC. 1243 LAKE AVE DETROIT LAKES, MN 56501	92-0568984		10,000.	0.			RURAL REGENERATOR ARTIST FELLOWSHIP
SIRIACO GARCIA 100 DEERWOOD DR #6 HUXLEY, IA 50124	46-8310099		10,000.	0.			RURAL REGENERATOR ARTIST FELLOWSHIP
GIIGE 1236 WILLIAMSON STREET MADISON, WI 53703	84-4784598		10,000.	0.			RURAL REGENERATOR ARTIST FELLOWSHIP

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

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

Schedule I (Form 990) 2022

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RUFUS JUPITER 216 N. EAST. AVE. VIROQUA, WI 54665	39-0926122		10,000.	0.			RURAL REGENERATOR ARTIST FELLOWSHIP
LYLE MILLER 717 N MONTANA ST #18 MITCHELL, SD 57301	50-3784752		10,000.	0.			RURAL REGENERATOR ARTIST FELLOWSHIP
NANCY X VALENTINE 18870 308TH AVE. UNDERWOOD, MN 56586	47-1258425		10,000.	0.			RURAL REGENERATOR ARTIST FELLOWSHIP
MELISSA WRAY 113 SOUTH BADGER ST CALEDONIA, MN 55921	46-9210889		10,000.	0.			RURAL REGENERATOR ARTIST FELLOWSHIP
APIA MN 7715 STAFFORD TRAIL SAVAGE, MN 55378	81-2656047		22,482.	0.			FISCAL AGENT ACTIVITY
ROSS ANDERSON 1469 SUMMIT SHORES DR. BURNSVILLE, MN 55306	47-1045701		13,950.	0.			FISCAL AGENT ACTIVITY
AYA COLLECTIVE 3819 COLFAX AVE. N. MINNEAPOLIS, MN 55412	84-3615769		23,799.	0.			FISCAL AGENT ACTIVITY
ANDREA BAGDON 308 PRINCE STREET, APT 310 ST. PAUL, MN 55101	47-5042848		7,975.	0.			FISCAL AGENT ACTIVITY
BLACK BEARS & BLUEBERRIES, LLC 615 SELFRIDGE DRIVE DULUTH, MN 55811	92-1153267		18,846.	0.			FISCAL AGENT ACTIVITY

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ERNEST BRIGGS 5412 43RD AVE S. MINNEAPOLIS, MN 55417	46-9088272		30,500.	0.			FISCAL AGENT ACTIVITY
BART BUCH 2633 15TH AVE. S. MINNEAPOLIS, MN 55407	48-3884781		9,300.	0.			FISCAL AGENT ACTIVITY
THE BUCKET BRIGADE 858 JUNO AVE. SAINT PAUL, MN 55102	47-7119006		31,500.	0.			FISCAL AGENT ACTIVITY
BURN SOMETHING COLLECTIVE LLC 1615 EMERSON AVE. N. APT. 1 MINNEAPOLIS, MN 55411	85-2558083		18,740.	0.			FISCAL AGENT ACTIVITY
SHARON BAILEY 3218 CLEVELAND STREET NE MINNEAPOLIS, MN 55418	58-7254093		44,000.	0.			FISCAL AGENT ACTIVITY
CAHOOT?! PHYSICAL THEATRE 3817 ELLIOT AVE. MINNEAPOLIS, MN 55407	84-2265280		6,200.	0.			FISCAL AGENT ACTIVITY
NANCY COOK 2543 MONTANA AVE. E. ST. PAUL, MN 55119	29-2488889		21,380.	0.			FISCAL AGENT ACTIVITY
COW TIPPING PRESS 1400 VAN BUREN ST. NE #200 MINNEAPOLIS, MN 55413	81-2431227		76,512.	0.			FISCAL AGENT ACTIVITY
DANCECO LLC 2801 32ND AVE. S. MINNEAPOLIS, MN 55406	82-4235716		12,500.	0.			FISCAL AGENT ACTIVITY

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DANCE MN 4505 BROWDALE AVENUE EDINA, MN 55424	88-1443231		7,395.	0.			FISCAL AGENT ACTIVITY
DANGER BOAT PRODUCTIONS LLC 5028 18TH AVE S. MINNEAPOLIS, MN 55417	45-4646985		9,377.	0.			FISCAL AGENT ACTIVITY
E/D LLC 315 MAIN STREET SE #301 MINNEAPOLIS, MN 55414	84-3319483		6,000.	0.			FISCAL AGENT ACTIVITY
EMERGING CURATORS INSTITUTE 1506 EMERSON AVENUE NORTH MINNEAPOLIS, MN 55411	83-4640140		64,000.	0.			FISCAL AGENT ACTIVITY
MARA EMMONS 1015 15TH AVE. N. MINNEAPOLIS, MN 55411	47-7290025		15,619.	0.			FISCAL AGENT ACTIVITY
LUCAS ERICKSON 2845 COLFAX AVENUE S #402 MINNEAPOLIS, MN 55408	47-4083790		13,314.	0.			FISCAL AGENT ACTIVITY
EYE OF THE HEART CENTER 4500 BLOOMINGTON AVE. S. MINNEAPOLIS, MN 55407	92-0881954		14,933.	0.			FISCAL AGENT ACTIVITY
FLIP THE SCRIPT LLC 2285 UNIVERSITY AVE. W. UNIT 211 ST. PAUL, MN 55114	92-1030733		40,503.	0.			FISCAL AGENT ACTIVITY
FUNNY ASIAN WOMEN KOLLECTIVE 685 RIVOLI STREET SAINT PAUL, MN 55130	83-0635886		109,882.	0.			FISCAL AGENT ACTIVITY

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ROSHAN GANU 1450 VAN BUREN STREET NE, #205 MINNEAPOLIS, MN 55413	28-6316486		9,300.	0.			FISCAL AGENT ACTIVITY
OLOLADE GBADAMOSI 8816 138TH STREET WEST APPLE VALLEY, MN 55124	46-8170480		13,950.	0.			FISCAL AGENT ACTIVITY
JENNIFER GLAWS 5206 DRUMMOND ROAD MOUND, MN 55364	33-9783853		14,188.	0.			FISCAL AGENT ACTIVITY
TANA HARGEST 3538 PILLSBURY AVE. S. MINNEAPOLIS, MN 55408	47-6020636		5,133.	0.			FISCAL AGENT ACTIVITY
HEADCANNON CREATIONS 8021 CLINTON AVE. S. BLOOMINGTON, MN 55420	87-3080426		9,424.	0.			FISCAL AGENT ACTIVITY
JAYSON HOHLEN 2417 HARRIET AVE APT 2 MINNEAPOLIS, MN 55405	47-7297649		11,850.	0.			FISCAL AGENT ACTIVITY
HOLY COW! PRESS 711 WOODLAND AVENUE DULUTH, MN 55812	46-9565394		12,135.	0.			FISCAL AGENT ACTIVITY
HONEYWORKS 2700 PRINCETON AVE MINNEAPOLIS, MN 55416	87-4074487		37,970.	0.			FISCAL AGENT ACTIVITY
JOURNEY PRODUCTIONS 528 HENNEPIN AVE SUITE 600 MINNEAPOLIS, MN 55403	47-1980595		9,300.	0.			FISCAL AGENT ACTIVITY

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JOLENE KONKEL 2817 SOUTHBROOK DR. BLOOMINGTON, MN 55431	88-4234428		9,528.	0.			FISCAL AGENT ACTIVITY
ERIC LARSON 517 SOUTHEAST 8TH ST., APT. 1 MINNEAPOLIS, MN 55414	38-7139540		64,903.	0.			FISCAL AGENT ACTIVITY
LEGACY ARTS GROUP 3217 14TH AVE. S., STE. 5 MINNEAPOLIS, MN 55407	84-2739761		25,600.	0.			FISCAL AGENT ACTIVITY
LESLIE PARKER DANCE PROJECT 765 N. HAMPDEN AVE. ST. PAUL, MN 55114	83-3702467		42,569.	0.			FISCAL AGENT ACTIVITY
LIGHTNING ROD 3112 DUPONT AVE S FLOOR 2 MINNEAPOLIS, MN 55408	83-3519725		75,712.	0.			FISCAL AGENT ACTIVITY
MAKE A SCENE LLC 7538 10TH AVENUE SOUTH RICHFIELD, MN 55423	85-0993924		10,000.	0.			FISCAL AGENT ACTIVITY
MELROSE AREA ARTS COUNCIL 10228 ALMOND DRIVE GREY GREY EAGLE, MN 56336	87-4812013		16,763.	0.			FISCAL AGENT ACTIVITY
KALEENA MILLER 57 WADSWORTH TERRACE 2A NEW YORK, NY 10040	47-1061842		13,630.	0.			FISCAL AGENT ACTIVITY
MILLION ARTIST MOVEMENT 2105 26TH AVE. S. MINNEAPOLIS, MN 55406	47-3237175		95,510.	0.			FISCAL AGENT ACTIVITY

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALANNA MORRIS 1160 CUSHING CIRCLE 323 SAINT PAUL, MN 55108	10-5763936		36,456.	0.			FISCAL AGENT ACTIVITY
NATIVE SKYWATCHERS 17101 76TH PL. N. MAPLE GROVE, MN 55311	81-2015231		69,979.	0.			FISCAL AGENT ACTIVITY
COLLEEN O'SCHAUGNESSY POLLACK 1999 JEFFERSON AVENUE ST. PAUL, MN 55105	47-6988436		7,113.	0.			FISCAL AGENT ACTIVITY
VALERIE OLIVEIRO 3731 PARK AVENUE #1 MINNEAPOLIS, MN 55407	04-1044438		72,200.	0.			FISCAL AGENT ACTIVITY
OPERA ON THE LAKE LLC 1382 ALBANY AVE. ST. PAUL, MN 55108	83-4165132		6,288.	0.			FISCAL AGENT ACTIVITY
PHANTOM CHORUS THEATRE 2341 UNIVERSITY AVENUE WEST APPARTMENT 214 - SAINT PAUL, MN 55114	88-2396092		12,641.	0.			FISCAL AGENT ACTIVITY
MARY PRESCOTT 5317 HUMBOLDT AVE. S. MINNEAPOLIS, MN 55419	47-4172457		23,250.	0.			FISCAL AGENT ACTIVITY
RARE PRODUCTIONS 3010 EAST LAKE STREET MINNEAPOLIS, MN 55406	86-1501196		98,400.	0.			FISCAL AGENT ACTIVITY
DEBORAH RAMOS 520 2ND ST SE, APT. 414 MINNEAPOLIS, MN 55414	45-5858903		6,100.	0.			FISCAL AGENT ACTIVITY

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JESSICA REYES 1043 BLAIR AVENUE SAINT PAUL, MN 55104	81-5414993		38,130.	0.			FISCAL AGENT ACTIVITY
SCOTT REYNOLDS 3440 18TH AVE. S. #3 MINNEAPOLIS, MN 55407	47-1082120		24,890.	0.			FISCAL AGENT ACTIVITY
SOBIESKI MUSIC, LLC 1590 RUSTIC HILLS DR. EAGAN, MN 55121	88-2194548		37,796.	0.			FISCAL AGENT ACTIVITY
SONORA WINDS, LLC 6308 MILDRED AVENUE EDINA, MN 55439	85-1411585		20,805.	0.			FISCAL AGENT ACTIVITY
STRIVE PUBLISHING, LLC 901 NICOLLET MALL, STE. 100 MINNEAPOLIS, MN 55402	81-3603371		65,790.	0.			FISCAL AGENT ACTIVITY
DARRIUS STRONG 1501 EAST BURNSVILLE PARKWAY BURNSVILLE, MN 55337	34-1842239		6,857.	0.			FISCAL AGENT ACTIVITY
SUMMIT MUSIC LLC 3312 SHEPHERD HILLS DRIVE BLOOMINGTON, MN 55431	88-2728136		27,444.	0.			FISCAL AGENT ACTIVITY
TANGIBLE COLLECTIVE LLC 5025 UPTON AVENUE NORTH MINNEAPOLIS, MN 55430	87-3981465		29,420.	0.			FISCAL AGENT ACTIVITY
JAMES TENBENSEL 3428 ST. PAUL AVE. MINNEAPOLIS, MN 55416	46-8420139		9,600.	0.			FISCAL AGENT ACTIVITY

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DONALD TESLOW II 7035 OAK GROVE BLVD. MINNEAPOLIS, MN 55423	47-4525600		6,000.	0.			FISCAL AGENT ACTIVITY
THEATRE 55 976 GOODRICH AVENUE, STE. 3 SAINT PAUL, MN 55105	83-2263013		42,259.	0.			FISCAL AGENT ACTIVITY
ELIZABETH MORGAN THORSON 3112 10TH AVENUE SOUTH MINNEAPOLIS, MN 55407	04-7622706		13,000.	0.			FISCAL AGENT ACTIVITY
TRU RUTS 3218 CLEVELAND STREET NE MINNEAPOLIS, MN 55418	47-5411254		20,000.	0.			FISCAL AGENT ACTIVITY
MOLLY VAN AVERY 3505 11TH AVE S. MINNEAPOLIS, MN 55407	46-9152979		49,447.	0.			FISCAL AGENT ACTIVITY
VOICES OF HOPE LLC 3408 BRYANT AVE. S. MINNEAPOLIS, MN 55408	82-1471747		37,000.	0.			FISCAL AGENT ACTIVITY
RORY WAKEMUP 781 MANOMIN AVENUE SAINT PAUL, MN 55107	47-6741464		24,274.	0.			FISCAL AGENT ACTIVITY
PING WANG 1361 MURRAY STREET ST. PAUL, MN 55116	07-2723199		31,500.	0.			FISCAL AGENT ACTIVITY

Schedule I (Form 990)

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization

SPRINGBOARD FOR THE ARTS

Employer identification number

41-1690483

Part I Questions Regarding Compensation

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

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

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

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

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

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

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

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

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

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

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

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

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

Schedule J (Form 990) 2022

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) LAURA ZABEL EXECUTIVE DIRECTOR	(i)	161,668.	0.	0.	0.	18,237.	179,905.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2022

Open to Public Inspection

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

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

Department of the Treasury
Internal Revenue Service

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

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	1	2,017,318.	FAIR MARKET VALUE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ()				
26 Other ()				
27 Other ()				
28 Other ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2022

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization

SPRINGBOARD FOR THE ARTS

Employer identification number

41-1690483

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

SERVICES THEY NEED TO MAKE A LIVING AND A LIFE.

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

FALLS, MN. 100 RURAL ARTISTS FROM ACROSS THE UPPER MIDWEST GATHERED FOR THIS EVENT TO CELEBRATE THE IDEAS AND WORK OF SPRINGBOARD'S RURAL REGENERATOR FELLOWS, WHILE EXPANDING THE PEER NETWORK OF LEARNING AND IDEAS TO OTHER RURAL CREATIVE CHANGEMAKERS IN THE UPPER MIDWEST. OUR GOAL IS TO PROVIDE SPACE TO DEVELOP REGIONAL COLLABORATIONS AND SOLIDARITY AROUND RURAL-SPECIFIC CHALLENGES AND OPPORTUNITIES, AND TO AMPLIFY AND CELEBRATE THE CONTRIBUTIONS OF RURAL ARTISTS TO CREATING AND IMAGINING A MORE JUST AND EQUITABLE WORLD. ALL PARTICIPANTS WERE SUPPORTED WITH TRAVEL STIPENDS, LODGING ACCOMODATIONS, AND MEALS.

THE RURAL FUTURES RESIDENCY IS A HYBRID ARTIST RESIDENCY AND CULTURAL TOURISM PROGRAM THAT SUPPORTS LONG TERM COMMUNITY VISIONS AND GOALS IN FERGUS FALLS, MN. OUR GOALS ARE TO, BRING NEW ATTENTION TO, AND ELEVATE, KEY COMMUNITY ASSETS AND CULTURAL INFRASTRUCTURE, INJECT ENERGY, RESOURCES, ACTIVITY, PEOPLE, AND ENTHUSIASM INTO FERGUS FALLS' DOWNTOWN AND LOCAL BUSINESSES, IMPLEMENT A NEW CROSS-SECTOR VISION FOR SPRINGBOARD'S SUCCESSFUL RURAL ARTIST RESIDENCY PROGRAM, AND RAISE THE VISIBILITY OF FERGUS FALLS AS AN UPPER MIDWEST HUB FOR RURAL ARTISTIC DEVELOPMENT.

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

PROGRAM THAT SEAMLESSLY BLENDS IN-PERSON AND VIRTUAL ELEMENTS,

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

Schedule O (Form 990) 2022

232211 10-28-22

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

PROVIDING A TRANSFORMATIVE EXPERIENCE FOR ARTISTS, CULTURE BEARERS, COMMUNITY ORGANIZERS, DEVELOPMENT PRACTITIONERS, AND OTHER VISIONARY LEADERS DEDICATED TO DEEPENING THEIR IMPACT IN CREATIVE COMMUNITY BUILDING. ADDITIONALLY, IN THE FISCAL YEAR 2022, OUR COMMUNITY DEVELOPMENT PROGRAM EXTENDED ITS SUPPORT TO OVER 30 ARTISTS, ENABLING THEM TO ACTIVATE OUR NEW SAINT PAUL SPACE THROUGH A DIVERSE ARRAY OF ENGAGING ACTIVITIES, INCLUDING FILM PREMIERES, COMMUNITY ART CREATION, CONCERTS, DANCE WORKSHOPS, DRUM CIRCLES, AND MORE.

OVER THE PAST YEAR, OUR COMMUNITY DEVELOPMENT TEAM HAS ORCHESTRATED AN ARRAY OF WORKSHOPS, ACTIVATIONS, AND GATHERINGS. THESE INITIATIVES HAVE REVERBERATED THROUGHOUT OUR LOCAL NEIGHBORHOODS IN FROGTOWN AND RONDO, AS WELL AS IN RURAL LANDSCAPES LIKE THE IRON RANGE AND CENTRAL MINNESOTA. WE HAVE ALSO HAD THE PRIVILEGE OF TAKING OUR EXPERTISE AND VISION TO OTHER CITIES, INCLUDING CHICAGO, BATON ROUGE, AND PITTSBURGH, WHERE WE WERE INVITED TO SHARE OUR APPROACH, ONE THAT RECOGNIZES ARTISTS AS ESSENTIAL TO THE VITALITY AND WELL-BEING OF COMMUNITIES AT LARGE.

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

SPRINGBOARD FOR THE ARTS' PROFESSIONAL DEVELOPMENT PROGRAMS SERVED 2,209 INDIVIDUAL ARTISTS AND COMMUNITY MEMBERS THROUGH PANELS, WORKSHOPS, LEGAL CLINICS, AND PARTICIPATION AT LOCAL AND NATIONALLY LEADING CONFERENCES. SPRINGBOARD FOR THE ARTS PRESENTED: 90+ WORKSHOPS ON BUSINESS SKILLS FOR ARTISTS AND PROFESSIONAL DEVELOPMENT, 533 INDIVIDUAL CONSULTATIONS, AND PRESENTED AT CONFERENCES LOCALLY AND NATIONALLY HIGHLIGHTING OUR CONTENT, ARTIST SERVICES, AND MISSION.

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

SPRINGBOARD FOR THE ARTS CONTINUED TO EXPAND ITS POOL OF ARTIST CAREER CONSULTANTS AND WORK OF ART WORKSHOP FACILITATORS TO REACH BROADER COMMUNITIES, AUDIENCES, AND PARTNERS. WOA WORKSHOPS STARTED THE TRANSITION FROM ZOOM TO HYBRID/IN-PERSON WORKSHOPS.

SPRINGBOARD FOR THE ARTS EXPANDED THE GUARANTEED MINIMUM INCOME PILOT TO INCLUDE 75 TOTAL ARTISTS, WHICH INCLUDES 50 WITHIN THE RONDO/FROGTOWN NEIGHBORHOOD AND 25 IN OTTER TAIL COUNTY, AS A WAY TO SUPPLEMENT, RATHER THAN REPLACE THE EXISTING SOCIAL SAFETY NET AND A TOOL FOR RACIAL AND GENDER EQUITY.

THE GROWTH FUND PILOT WAS ALSO LAUNCHED IN FY23, AS A WAY TO SUPPORT MN ARTISTS AND CREATIVE BUSINESS OWNERS WITH \$2,500 TO HELP SUSTAIN OR SCALE THEIR BUSINESS. 16 ARTISTS WERE SUPPORTED IN THIS PILOT PROGRAM. WITHIN THE MAKERS-TO-MARKET PROGRAM, SPRINGBOARD LAUNCHED 3 POP-UP MARKETS (LAST MINUTE GIFTS, SPRINGPOP!, AND CELEBRATE LITTLE MEKONG) WITH AN AVERAGE OF 35 MAKERS AND VENDORS AND 300 IN ATTENDANCE PER EVENT.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
 SPRINGBOARD FOR THE ARTS' INCUBATOR: A FISCAL SPONSORSHIP PROGRAM PROVIDES FISCAL SPONSORSHIP FOR ARTS GROUPS AND INDIVIDUAL ARTIST PROJECTS THAT DO NOT WANT (OR ARE NOT READY) TO BECOME TAX-EXEMPT NONPROFIT ORGANIZATIONS. IN FY23 WE MANAGED REVENUES FOR THE 207 ARTIST-LED PROJECTS IN THE PROGRAM DURING THAT PERIOD.
 EXPENSES \$ 139,298. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION B, LINE 11B:
 LINE 11B EXPLANATION - FULL BOARD OF DIRECTORS REVIEWS BOTH THE 990 AND

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

AUDIT AND VOTES TO APPROVE BEFORE FILING.

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

BOARD & STAFF SIGN ANNUAL CONFLICT OF INTEREST DISCLOSURE AGREEMENT. FULL BOARD OF DIRECTORS APPROVES OR DENIES BOARD MEMBERS & STAFF TO ACT WHEN THERE IS A CONFLICT OF INTEREST.

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

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

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

THROUGH CONTACTING THE OPERATIONS AND FINANCE DIRECTOR OR THE BUSINESS MANAGER

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

OTHER PROFESSIONAL FEES:

PROGRAM SERVICE EXPENSES	714,114.
MANAGEMENT AND GENERAL EXPENSES	32,820.
FUNDRAISING EXPENSES	5,411.
TOTAL EXPENSES	752,345.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	752,345.

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

FISCAL SPONSORSHIP ACTIVITY	-407,698.
-----------------------------	-----------