efile Public Visual Render ObjectId: 202501969349303255 - Submission: 2025-07-15

TIN: 91-1186639

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

Open to Public

		the Treasury nue Service	do to www.ms.igov/rominson	test illiorilla	cioiii		Inspection					
A Fo	or th	e 2023 ca	l alendar year, or tax year beginning 09-01-2023 , and ending 08-31	-2024								
		ipplicable:	C Name of organization		D Employe	r identii	fication number					
		change	PRATT FINE ARTS CENTER		91-1186	639						
O Na		-	Doing business as									
O Init		rurn n/terminated	boiling business as									
_		d return	Number and street (or P.O. box if mail is not delivered to street address) Room/sui	te	E Telephone	number	•					
О Арі	olicati	ion pending	1902 SOUTH MAIN STREET		(206) 32	8-2200)					
_			City or town, state or province, country, and ZIP or foreign postal code									
			SEATTLE, WA 98144		G Gross rec	eipts \$ 3	,474,229					
			F Name and address of principal officer: JESSICA BORUSKY	H(a) Is this	a group reti	urn for						
			1902 SOUTH MAIN STREET		dinates?		☐Yes ✓No					
			SEATTLE, WA 98144	H(b) Are all include		25	☐ Yes ☐No					
I Tax	-exer	mpt status:	✓ 501(c)(3) □ 501(c) () (insert no.) □ 4947(a)(1) or □ 527				instructions.					
J W	ebsit	te: WW	W.PRATT.ORG	H(c) Group	exemption r	number						
K Forn	n of o	rganization:	☑ Corporation ☐ Trust ☐ Association ☐ Other	L Year of forma		M State	of legal domicile:					
	()	<u> </u>										
Pa	rt I	Sum	mary scribe the organization's mission or most significant activities:									
	ı	PRATT FIN	E ARTS CENTER IS AN ARTS EDUCATION AND RESOURCE CENTER DEDICA	TED TO PROM	OTING CREA	TIVE DI	EVELOPMENT AND					
oce	!	ARTISTIC	ENGAGEMENT TO THE LOCAL AND GLOBAL COMMUNITY.									
nai												
Ve	•											
GO	_	Check thi	s box $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$			3	16					
×8			of independent voting members of the governing body (Part VI, line 1b)		4	16						
Activities & Governance	5		nber of individuals employed in calendar year 2023 (Part V, line 2a)	-	5	343						
tινί	_		nber of volunteers (estimate if necessary)	-	6	169						
Ac			elated business revenue from Part VIII, column (C), line 12	•	7a	0						
			ated business taxable income from Form 990-T, Part I, line 11		7b	0						
			acca sasmoss taxasis mosme norm som so i, i are 1, mile 11	Pric	r Year		Current Year					
	8	Contribut	ions and grants (Part VIII, line 1h)	<u> </u>	913,72	29	870,234					
Revenue			service revenue (Part VIII, line 2g)		1,521,82		1,676,283					
9.0		_	nt income (Part VIII, column (A), lines 3, 4, and 7d)		51,94	_	100,026					
æ			renue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		61,78		-5,383					
			enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,549,27		2,641,160					
			nd similar amounts paid (Part IX, column (A), lines 1–3)			0	0					
			paid to or for members (Part IX, column (A), line 4)			0	0					
S			other compensation, employee benefits (Part IX, column (A), lines 5–10)		1,800,92	26	2,013,819					
Expenses			nal fundraising fees (Part IX, column (A), line 11e)		<u> </u>	0	0					
реч			aising expenses (Part IX, column (D), line 25) 300,226									
ă			penses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,132,82	20	1,185,699					
			enses. Add lines 13–17 (must equal Part IX, column (A), line 25)		2,933,74	16	3,199,518					
		-	less expenses. Subtract line 18 from line 12		-384,46		-558,358					
Net Assets or Fund Balances				Beginning o	of Current Ye	ar	End of Year					
ets												
Ass Ba			ets (Part X, line 16)	6,385,927			5,928,806					
et)			ilities (Part X, line 26)		1,247,16	_	1,206,606					
24	22	Net asset	s or fund balances. Subtract line 21 from line 20	1	5,138,76	54	4,722,200					

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

Sign	Sign	2025-07-15 Signature of officer Date										
Here	JESS	SSICA BORUSKY EXECUTIVE DIRECTOR										
Paid	•	Print/Type preparer's name	Preparer's signature	Date	Check ☐ if	PTIN P00193404						
	parer	Firm's name VWC PS			self-employed Firm's EIN 91-1	007261						
Use	Only	Firm's address PO BOX 1458			Phone no. (425)	250-0051						
		BELLEVUE, WA 98009)		, ,							
May t	he IRS disc	cuss this return with the preparer s	hown above? See Instructions.			✓ Yes □ No						
For P	aperwork	Reduction Act Notice, see the	separate instructions.	Cat.	No. 11282Y	Form 990 (2023						
			Page 2									
			——————————————————————————————————————									
	990 (2023)	•				Page 2						
Par		atement of Program Service	-	. 111								
1		eck if Schedule O contains a respond scribe the organization's mission:	ise or note to any line in this Par									
		STER A CREATIVE, INCLUSIVE ART										
	AL ARTISTS	IOS FOR EVERYONE. WE PROMOTE .	THE JUY AND TRANSFORMATIVE	POWER OF ART AI	ND ACTIVELY SUR	PPORT THE DEVELOPMENT OF						
2	Did the or	ganization undertake any significar	nt program services during the ve	ar which were not	isted on							
_		Form 990 or 990-EZ?				🗆 Yes 🛂 No						
		escribe these new services on Sche										
3		ganization cease conducting, or ma	ake significant changes in how it o	conducts, any progi	ram	. 🗆 Yes 🗸 No						
	services? If "Yes." d	escribe these changes on Schedule	0.			. U Yes W No						
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses,											
		01(c)(3) and 501(c)(4) organization ue, if any, for each program service		unt of grants and a	llocations to othe	ers, the total expenses,						
4a	(Code:) (Expenses \$	2,173,735 including grants of	†) (Revenue \$	1,676,283)						
Ta	PROVIDING	CLASSES AND WORKSHOPS OFFERED I	N GLASS, METAL, SCULPTURE, JEWELF	RY, PAINTING, DRAWIN	IG AND PRINT MAKI	NG TO APPROXIMATELY 2,500						
		WHICH INCLUDES SPECIAL CLASSES FOOVER 1,000 STUDENTS AND ARTISTS V										
4b	(Code:) (Expenses \$	including grants of	\$) (Revenue \$)						
4c	(Code:) (Expenses \$	including grants of	\$) (Revenue \$)						
						·						
4d	Other prod	gram services (Describe in Schedul	e O.) ding grants of \$) (Revenue	s ¢	١						
4e		gram service expenses	2,173,735) (iveveilue	· Ψ	J						

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Form 990 (2023) Page **3**

Pai	tiv Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions. **	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		No
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D,Part I			No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	6		
7	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D,</i> Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 2	11b		No
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 📆	11f		No
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	201		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic	20b		No

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Form	990 (2023)			Page 4
Par	Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J </i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
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? If "Yes," complete Schedule L, Part II	26		No
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,</i> Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV			
	A 250/ controlled on the of one on a control individuals and (on a control individual on the con	28b		No
С	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>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M **	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Check if Schedule O contains a response or note to any line in this $\mathsf{Part}\,\mathsf{V}\,$.

D	Enter the number of Forms W-2G included on line 1a. Enter -U- 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?	1c	Yes	
		F	orm 99	0 (2023)

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Pa	statements Regarding Other IRS Filings and Tax Compliance (continued)			Page S
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country:	4a		No
b	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			

b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b								
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		No						
16	If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		No						
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17								
	If "Yes," complete Form 6069.									
		F	orm 99	0 (2023)						
	David C									
	Page 6 ———————————————————————————————————									
orm	990 (2023)			Page 6						
Par	Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "N	lo" resp	onse to	1						
	lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI			~						
Se	ction 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 16	1								
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.									
b	Enter the number of voting members included in line 1a, above, who are independent 1b	j								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No						
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No						
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No						
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No						
6	Did the organization have members or stockholders?	6	Yes							
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No						
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:									
а	The governing body?	8a	Yes							
b	Each committee with authority to act on behalf of the governing body?	8b	Yes							
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	Ļ	No						
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	e.) Yes	No						
10>	Did the organization have local chapters, branches, or affiliates?	10a	162	No						
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	134		110						
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b								
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes							
	Describe on Schedule O the process, if any, used by the organization to review this Form 990									
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes							
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes							
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12c	Yes							
13	Did the organization have a written whistleblower policy?	13	Yes	<u> </u>						
14	Did the organization have a written document retention and destruction policy?	14	Yes	<u> </u>						
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?									
a	The organization's CEO, Executive Director, or top management official	15a	Yes	<u> </u>						
b	Other officers or key employees of the organization	15b	Yes	I						

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

10/22/25, 6:21 AM

	25, 6:21 AM II Tes, and the organization ronow a writt in joint venture arrangements under applic status with respect to such arrangements?	en poncy or pro cable federal tax	ceuure x law, a	requ nd ta	ke s	teps	oryai to sa	IIIZa	onprofit Explorer - I Lion to evaluate its Jard the organization	рагистрастотт [
				•			•		•	161	ь
	ection C. Disclosure	200:		C.I							
17	List the states with which a copy of this Fo	orm 990 is requi	irea to t	е пе	ea	,	WA				
18	Section 6104 requires an organization to r 501(c)(3)s only) available for public inspec	ction. Indicate h	now you	mad	le th	ese	availa	ble.	Check all that app		
	Own website 🗸 Another's website										
19	Describe in Schedule O whether (and if so policy, and financial statements available t	to the public du	ring the	tax	year.						
20	State the name, address, and telephone n SARAH DANIEL PRATT 1902 SOUTH MAIN	umber of the pe STREET SEA	erson w ATTLE, W							d records:	F 000 (2022)
											Form 990 (2023)
				Page	. 7						
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Par	Compensation of Officers, D		stees,	Key	/ En	npl	oyee	s, I	lighest Compe	nsated Employ	ees,
	and Independent Contracto				.	Dort	. \ /11				
Se	Check if Schedule O contains a respection A. Officers, Directors, Truste										0
	omplete this table for all persons required to			-					-	-	ganization's tax
year.		·							, ,	•	9
	List all of the organization's current officen mpensation. Enter -0- in columns (D), (E), a							OF C	organizations), rega	ardiess of amount	
• L	ist all of the organization's current key em	ployees, if any.	See the	e inst	ructi	ons	for de	efini	tion of "key employ	ee."	
who r	ist the organization's five current highest of received reportable compensation (box 5 of rganization and any related organizations.										an \$100,000 from
• L	ist all of the organization's former officers, portable compensation from the organization.					pens	sated	emp	oloyees who receive	ed more than \$100	,000
	ist all of the organization's former directo nization, more than \$10,000 of reportable co										
See t	he instructions for the order in which to list	the persons ab	ove.								
	Check this box if neither the organization no	or any related o	rganizat	ion c	omp	ens	ated a	ny (current officer, dire	ctor, or trustee.	
	(A) Name and title	(B) Average hours per week (list any hours	verage Position (do not check more Reportable compensation from the rore lek (list person is both an officer person is both an officer rom the left compensation from the left left left left left left left lef							(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
		for related		1		_			2/1099-	(W-2/1099-	organization and
		organizations below dotted	Individual trustee or director	Institutional	Officer	Key employee	Highest compensated employee	Former	MISC/1099- NEC)	MISC/1099- NEC)	related organizations
		line)	dividual t	ituti	ě	em	est	ner	NEC)	NEC	organizations
			م ت	ona		ᇮ	900				
			นระ	₹		99	npe				
			8	Trustee			nsa				
				ø			ted				
(1) CF	HERYL BERENSON	4.00									
	D MEMBER		Х						0	0	0
(2) M	OLLIE PRICE	4.00	х						0	0	0
BOAR	D MEMBER		^						0	0	0
(3) KE	EITH COOKE	4.00									
BOAR	D MEMBER		Х						0	0	0
(4) JU	ILIE HAMM	4.00								0	0

4.00

4.00

4.00

4.00

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Χ

BOARD MEMBER, VICE PRESIDE

(5) EVE SANFORD-NICHOLSON

BOARD MEMBER

BOARD MEMBER, VICE PRESIDE

(6) FRANCISCO GUERRERO

(7) BECKY GELDER

(O) DIAN HARTONO

BOARD MEMBER

0

0

0

0

10/22/25, 6:21 AM	Pratt Fine Arts Center - Full Filing - Nonprofit Explorer - ProPublica													
BOARD MEMBER, PRESIDENT		Х						0	0	0				
(9) LEE CAMPBELL BOARD MEMBER	4.00	Х						0	0	0				
(10) SARAH SHAIKH BOARD MEMBER, TREASURER	4.00	Х						0	0	0				
(11) CYNTHIA HIBBARD BOARD MEMBER	4.00	Х						0	0	0				
(12) SUSAN MARABITO	4.00													

4.00

4.00

4.00

4.00

40.00

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118,824 0 13,829

Form **990** (2023)

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Page 8

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Form 990 (2023)

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		ne bo	ox, ι n of or/t	t che inles ficer	ss pers	son	(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
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			related organizations
										_
										_
										_
-										

BOARD MEMBER

(14) JO MIKESELL BOARD MEMBER

(13) BERNICE TERRELL

(15) MATTHEW SCHAUB
BOARD MEMBER

(16) SAMANTHA SONG

(17) JESSICA BORUSKY

BOARD MEMBER, SECRETARY

EXECUTIVE DIRECTOR

BOARD MEMBER

	670,234			
	Business Code			
2a CLASSES, WORKSHOPS AND	611600	1,641,952	1,641,952	
TOTHER	611600	34,331	34,331	
Φ .				

h Total. Add lines 1a-1f .

	/25, 6:21 AM			Pratt Fine /	Arts Center - Full Filing	g - Nonprofit Explore	r - ProPublica	
Sarvic								
Š	3 1							
Program								
ģ								
à	f All other program	serv	ice revenue.					
	9 Total. Add lines 2			1,676,28	23			
	3 Investment income				<u> </u>			<u> </u>
	similar amounts) .	•	· · · ·	iterest, and other	32,770			32,770
	4 Income from invest			nd proceeds				
	5 Royalties							
		ļ	(i) Real	(ii) Personal				
	6a Gross rents	6a						
	b Less: rental	6b						
	expenses c Rental income or	6c						
	(loss) d Net rental income	or (loss)		-			
	• Net rental income	01 ((i) Securities	(ii) Other	-			
	7a Gross amount	7a		. ,	-			
	from sales of		612,759					
I	assets other than inventory							
e	b Less: cost or	7b	545,503					
e le	other basis and sales expenses		2 13,2 32					
Revenue	c Gain or (loss)	7c	67,256					
Other		<u> </u>	·		67,256			67,256
	₃ Gross income from fu				·			, , , , , , , , , , , , , , , , , , ,
0	(not including \$		314,568 of					
	contributions reported See Part IV, line 18			282,183	3			
	b Less: direct expen	202	<u> </u>	287,566				
	c Net income or (los				-5,383			-5,383
	•	,	Ť					
	9a Gross income from							
	See Part IV, line 19		эа					
	b Less: direct expen						II.	
	c Net income or (los	ss) fr	om gaming activiti	es	_		r	
	10a Gross sales of inve	entor	v. less					
	returns and allowa	nces	10a					
	b Less: cost of good	s sol	d 10b					
	c Net income or (los	s) fr	om sales of invent	ory	_			
				Business Code				
	11a							
	b							
Oth	er R evenueMiscAmt							-
J.11	S. Revender iistAiiit							
	d All other revenue							
	e Total. Add lines 1				1			
	12 Total revenue. S							
	12 IUIAI FEVERUE. S	ee in	isu ucuOHS	· · ·	2,641,160	1,676,283	0	94,643
	·							Form 990 (2023)

----- Page 10 ---

Form 990 (2023) Page **10**

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 (D) (B) (C) Do not include amounts reported on lines 6b, (A) Program service Management and Fundraising 7b, 8b, 9b, and 10b of Part VIII. Total expenses general expenses expenses expenses 1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . 2 Grants and other assistance to domestic individuals. See Part IV, line 22 . **3** Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16. 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and 6 Compensation not included above, to disqualified persons (as 1,687,363 1,298,861 197,791 190,711 defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) **7** Other salaries and wages . 13,181 8,338 4,947 Pension plan accruals and contributions (include section 26,466 401(k) and 403(b) employer contributions) . 120,115 78,641 23,361 18,113 **9** Other employee benefits . . . 179,875 117,852 41,232 20,791 **10** Payroll taxes 11 Fees for services (non-employees): a Management . **b** Legal . 164,635 164,635 **c** Accounting . . . **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 30,183 15,765 14,418 (A) amount, list line 11g expenses on Schedule O) **12** Advertising and promotion . . . 116,321 102,646 7,615 6,060 43,799 **13** Office expenses . . 87,338 14,665 28,874 56,065 56,065 **14** Information technology . **15** Royalties . 236,659 124,291 105,209 7,159 **16** Occupancy 18 Payments of travel or entertainment expenses for any federal, state, or local public officials **19** Conferences, conventions, and meetings . . 47.994 20 Interest . 47.994 21 Payments to affiliates 54,791 41,623 8,882 4,286 22 Depreciation, depletion, and amortization . 23 Insurance . . . 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 362,786 a FDUCATION 364,237 1,451 **b** DEVELOPMENT 19.566 281 19,285 3,001 c OTHER COSTS 7.093 4.092 d BAD DEBT 817 423 394 e All other expenses 3,199,518 2,173,735 725,557 300,226 Total functional expenses. Add lines 1 through 24e **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720).

— Page 11 —

Form 990 (2023) Page **11**

Check if Schedule O contains a response or note to any line in this Part IX Cash—non-interest-bearing End of	
1	
2 Savings and temporary cash investments	ear
Pledges and grants receivable, net	30,069
4 Accounts receivable, net 507 4 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 6 Loans and other receivables from other disqualified persons (as defined under section 4958f()(1)), and persons described in section 4958(c)(3)(B) . 6 7 Notes and loans receivable, net 8 Inventories for sale or use 8 8 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10b 1,533,028 4,873,833 10c 11 Investments—publicly traded securities 12 Investments—publicly traded securities 12 Investments—program-related. See Part IV, line 11 12 Investments—program-related. See Part IV, line 11 13 Investments—program-related. See Part IV, line 11 160,530 15 Total assets. Add lines 1 through 15 (must equal line 33) 6,385,927 16 Investments—payable and accrued expenses 109,568 17 Investments—payable and accrued expenses 109,568 17 Investments—payable and accrued expenses 109,568 17 Investments—payable and accrued expenses 109,568 19 Investments—payable and accrued expenses 109,568 Investments—payable and accrued expenses 109,568 Investments—pay	68,597
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 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(8). 7 Notes and loans receivable, net	
trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B). 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 280 9 Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 11 Investments—publicly traded securities 11 Investments—publicly traded securities 12 Investments—other securities. See Part IV, line 11 13 Investments—program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 33) 17 Accounts payable and accrued expenses 10 Tax-exempt bond liabilities 20 Tax-exempt bond liabilities 21 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 Unsecured notes and loans payable to unrelated third parties 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 26 Total liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). 26 Total liabilities. Add lines 17 through 25 10 Total liabilities. Add lines 17 through 25 10 Total liabilities. Add lines 17 through 25 10 Total liabilities (including federal income tax, payables to related third parties, and other liabilities. Add lines 17 through 25 10 Total liabilities. Add lines 17 through 25 11 Total liabilities (including federal income tax, payables to related third parties, and other liabilities.	22,672
6 Loans and other receivables from other disqualified persons (as defined under section 4958(r)(1)), and persons described in section 4958(c)(3)(B)	
8 Inventories for sale or use	
8 Inventories for sale or use	
10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10b 1,533,028 4,873,833 10c 11 Investments—publicly traded securities 12 Investments—other securities. See Part IV, line 11 13 Investments—program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 33) 16 Grants payable and accrued expenses 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 10a 6,370,571 10b 1,533,028 4,873,833 10c 12,15,999 11 12 Investments—other securities. See Part IV, line 11 13 Investments—program-related. See Part IV, line 11 14 Intangible assets 16,9530 15 17 Accounts payable and accrued expenses 109,569 17 18 Grants payable 19 Deferred revenue 109,569 17 18 Grants payable 19 Deferred revenue 109,569 17 18 Cans 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 Secured mortgages and notes payable to unrelated third parties 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 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 26 Total liabilities. Add lines 17 through 25 .	
10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 6,370,571 b Less: accumulated depreciation 10b 1.533,028 4,873,833 10c 11 Investments—publicly traded securities 12 Investments—other securities. See Part IV, line 11 13 Investments—program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 33) 16 Accounts payable and accrued expenses 17 Accounts payable and accrued expenses 19 Deferred revenue 10a 6,370,571 10b 1.533,028 4,873,833 10c 12 Investments—other securities. See Part IV, line 11 11 Investments—program-related. See Part IV, line 11 12 Intangible assets 13 Intangible assets 14 Intangible assets 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 33) 16 385,927 16 17 Accounts payable and accrued expenses 109,569 17 18 Grants payable 19 Deferred revenue 10 Intervent of Inte	7,129
basis. Complete Part Vi of Schedule D b Less: accumulated depreciation 10b 1,533,028 4,873,833 10c 11 Investments—publicly traded securities 1,215,999 11 12 Investments—other securities. See Part IV, line 11 13 Investments—program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 33) 16 Total assets. Add lines 1 through 15 (must equal line 33) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 10 Tax-exempt bond liabilities 11 Escrow or custodial account liability. Complete Part IV of Schedule D 11 Escrow or custodial account liability. Complete Part IV of Schedule D 12 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 10 Secured mortgages and notes payable to unrelated third parties 10 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 16 Total liabilities. Add lines 17 through 25 10 Total liabilities. Add lines 17 through 25 10 Total liabilities. Add lines 17 through 25 10 Total liabilities. Add lines 17 through 25 11 Total liabilities. Add lines 17 through 25 12 Total liabilities.	
11 Investments—publicly traded securities	
12 Investments—other securities. See Part IV, line 11	4,837,543
Investments—program-related. See Part IV, line 11 Intangible assets Other assets. See Part IV, line 11 Total assets. Add lines 1 through 15 (must equal line 33) Accounts payable and accrued expenses Total assets. Add lines 1 through 15 (must equal line 33) Regrants payable Total assets. Add lines 1 through 15 (must equal line 33) Regrants payable Total assets. Add lines 1 through 15 (must equal line 33) Regrants payable and accrued expenses Regrants payable and accrued e	840,964
14 Intangible assets	
15 Other assets. See Part IV, line 11	
16 Total assets. Add lines 1 through 15 (must equal line 33)	
17 Accounts payable and accrued expenses	121,832
18 Grants payable	5,928,806
19 Deferred revenue	122,894
20 Tax-exempt bond liabilities	
21 Escrow or custodial account liability. Complete Part IV of Schedule D 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	182,934
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	
23 Secured mortgages and notes payable to unrelated third parties	
23 Secured mortgages and notes payable to unrelated third parties	
24 Unsecured notes and loans payable to unrelated third parties	712,894
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 26 Total liabilities. Add lines 17 through 25	11,091
	176,793
Organizations that follow FASB ASC 958, check here lines 27, 28, 32, and 33. Net assets without donor restrictions	1,206,606
	4,083,503
28 Net assets with donor restrictions	638,697
Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.	
5 29 Capital stock or trust principal, or current funds	
30 Paid-in or capital surplus, or land, building or equipment fund	
137 Intal net assets or filing halances 1 3 130 (041 37 1	4,722,200
33 Total liabilities and net assets/fund balances	5,928,806

Form **990** (2023)

– Page 12 –

Form 990 (2023) Page **12**

	Check if Schedule O contains a response or note to any line in this Part At				U	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2	,641,160	
2	Total expenses (must equal Part IX, column (A), line 25)	2			,199,518	
3	Revenue less expenses. Subtract line 2 from line 1	3			-558,358	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4			,138,764	
5	Net unrealized gains (losses) on investments	5	147			
6	Donated services and use of facilities	6	147,5			
7	Investment expenses	7			-6,150	
8	Prior period adjustments	8			-0,130	
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0	
	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10		4	,722,200	
	tXII Financial Statements and Reporting	10		7,	,722,200	
Гаі						
	Check if Schedule O contains a response or note to any line in this Part XII	•		Yes	No	
				103	110	
1	Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain on					
	Schedule O.					
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?					
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both:	on a				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes		
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both: $\frac{1}{2}$	basis,				
	✓ 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?		2c	Yes		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O				
За	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?					
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	ired	3b			
	addit of addits, explain why in schedule o and describe any steps taxen to undergo such addits.			orm 99	0 (2023)	
			·	01111 33	• (2023)	
	990 (2023)					
Ad	ditional Data		Return	to Fo	rm	
	Coffees TD:					

Software ID: Software Version:

Form 990 Special Condition Descriptions

efile Public Visual Render

ObjectId: 202501969349303255 - Submission: 2025-07-15

TIN: 91-1186639

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 <u>www.irs.gov/Form990</u> for instructions and the latest information.

OMB No. 1545-0047

2023

Open to Public Inspection

		he organization					Employer identific	ation number
PRAII	FINE A	ARTS CENTER					91-1186639	
	rt I	Reason for Public					See instructions.	
_	rganiz	ration is not a private fou		•	<i>J</i> ,	, ,		
1		A church, convention of	,			. ,, ,	(A)(i).	
2		A school described in se	ection 170(b)(1)(A)(ii). (Attach Sch	nedule E (Form	990).)		
3		A hospital or a cooperat	ive hospital ser	vice organization descr	ribed in sectior	170(b)(1)(A)(iii).	
4	A medical research organization operated in conjunction with a hospital described in secti name, city, and state:						170(b)(1)(A)(iii). E	nter the hospital's
5		An organization operate 170(b)(1)(A)(iv). (Co			rsity owned or o	pperated by a gov	ernmental unit descril	oed in section
6	6 A federal, state, or local government or governmental unit described in section 170(b)(1)					ion 170(b)(1)(A	ı)(v).	
7		An organization that no section 170(b)(1)(A)			s support from	a governmental u	nit or from the genera	al public described in
8		A community trust desc	ribed in sectio	170(b)(1)(A)(vi).	(Complete Part	II.)		
9		An agricultural research non-land grant college of						ege or university or a
10	✓	An organization that no from activities related to investment income and 30, 1975. See section	o its exempt fur unrelated busin	nctions—subject to cert less taxable income (le	tain exceptions,	and (2) no more	than 33 1/3% of its su	ipport from gross
11		An organization organiz	ed and operated	d exclusively to test for	r public safety.	See section 509	(a)(4).	
12		An organization organiz more publicly supported on lines 12a through 12	l organizations (described in section 5	09(a)(1) or s e	ection 509(a)(2)). See section 509(a	
а		Type I. A supporting or organization(s) the pow complete Part IV, Sec	er to regularly a	appoint or elect a majo	ontrolled by its ority of the direc	supported organizetors or trustees o	zation(s), typically by of the supporting orga	giving the supported nization. You must
b		Type II. A supporting of management of the sup	organization sup porting organiz	ervised or controlled in ation vested in the sar				
c		must complete Part I Type III functionally supported organization(integrated. A	supporting organizatio				ted with, its
d		Type III non-function functionally integrated. instructions). You mus	nally integrate The organizatio	d. A supporting organing generally must satis	ization operated fy a distribution	I in connection with requirement and	th its supported orgar	
e		Check this box if the orgintegrated, or Type III r				IRS that it is a Ty	pe I, Type II, Type III	functionally
f	Enter	the number of supported	,	3 11 3	_			
g		de the following informat	_				· · · · · · · · <u> </u>	
		Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the or	ganization listed ning document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		
						li .		
	aperv	work Reduction Act No or 990-EZ.	tice, see the I	nstructions for	Cat. No. 1128	 85F	Schedule	A (Form 990) 2023
				Pa	ge 2 ———			
Scheo	dule A	(Form 990) 2023		51	J -			Page 2
Pa	rt II			zations Described ne box on line 5, 7,				

If the organization failed to qualify under the tests listed below, please complete Part III.)

Pratt Fine Arts Center - Full Filing - Nonprofit Explorer - ProPublica

Tax revenues levied for the

10/22/25, 6:21 AM

10/22/	25, 6:21 AM	Prat	t Fine Arts Center	- Full Filing - Non	profit Explorer - Pr	oPublica			
	paid to or expended on its behalf								
5	The value of services or facilities furnished by a governmental unit to the organization without charge	80,686	98,318	88,467	92,382	96,55	7	4	456,410
6	Total. Add lines 1 through 5	2,891,185	1,973,721	1,942,607	2,772,133	2,706,80	1	12,2	286,447
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	141,598	170,233	30,940	26,540	74,61	7	4	443,928
b	Amounts included on lines 2 and 3								
	received from other than disqualified persons that exceed the greater of								0
	\$5,000 or 1% of the amount on line								· ·
_	13 for the year.	141,598	170,233	30,940	26,540	74,61	7		443,928
8	Add lines 7a and 7b Public support. (Subtract line 7c	141,390	170,233	30,940	20,340	74,01	<u> </u>		
_	from line 6.)							11,8	842,519
	ection B. Total Support	1	1	ı	1	ı			
	endar year fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f)	Total	
`9	Amounts from line 6	2,891,185	1,973,721	1,942,607	2,772,133	2,706,80	1	12,2	286,447
10a	Gross income from interest, dividends, payments received on								
	securities loans, rents, royalties and	49,654	32,727	51,662	51,942	32,77	0	2	218,755
	income from similar sources						-		
b	Unrelated business taxable income (less section 511 taxes) from								
	businesses acquired after June 30,								
С	1975. Add lines 10a and 10b.	49,654	32,727	51,662	51,942	32,77	0		218,755
11	Net income from unrelated business	12/00		52,002	32,012	52/11			
	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. (Add lines 9, 10c,	2,940,839	2,006,448	1,994,269	2,824,075	2,739,57	1	12,5	505,202
14	11, and 12.) First 5 years. If the Form 990 is for	the organization's	first, second, thir	d, fourth, or fifth	tax year as a sect	ion 501(c)(3) org	janiza	tion, ch	neck
	this box and stop here							!	
Se	ection C. Computation of Public								
15	Public support percentage for 2023 (I					15			.700 %
16	Public support percentage from 2022					16		94.	.500 %
	ection D. Computation of Inves Investment income percentage for 20			line 13 column (f))	1471			750.0/
17 18	Investment income percentage from	•				17			.750 % .820 %
	33 1/3% support tests-2023. If the						ne 17		.020 /0
19a	more than 33 1/3%, check this box ar							► ✓	
b	33 1/3% support tests—2022. If the	ne organization did	not check a box	on line 14 or line	19a, and line 16 is	s more than 33 1/			18 is
	not more than 33 1/3%, check this bo	x and stop here.	The organization	qualifies as a publ	licly supported org	janization	🕨	▶ □	
20	Private foundation. If the organizat	ion did not check	a box on line 14,	19a, or 19b, checl	k this box and see	instructions	!		
						Schedule A	(Form	990)	2023
			Page 4						
Sche	dule A (Form 990) 2023							Р	age 4
Pai	rt IV Supporting Organization								
	(Complete only if you checked box 12b, of Part I, complete S								
	12d, of Part I, complete Section	ons A and D, and o		, , ,	·				
Se	ection A. All Supporting Organi	zations						1	
						F		Yes	No
1	Are all of the organization's supported If "No," describe in Part VI how the								
	describe the designation. If historic a			ica. ii acsignated	. Ly ciass or purpt	,,,	1		
2	Did the organization have any suppor	ted organization t	hat does not have	an IRS determina	ation of status unc	ter section			
2			Hat udes Hot Have	an in and determine					
	509(a)(1) or (2)? If "Yes," explain in	Part VI how the		mined that the su	pporteu organizat	ion was			
	described in section $509(a)(1)$ or (2) ? If "Yes," explain in	Part VI how the		mined that the su	pporteu organizat		2		
За		Part VI how the o	organization deter	·		•	2		
За	described in section 509(a)(1) or (2).	Part VI how the o	organization deter	·		•	2 3a		
3a b	described in section 509(a)(1) or (2). Did the organization have a supporte 3c below. Did the organization confirm that each	Part VI how the o	organization deter scribed in section !	501(c)(4), (5), or inder section 501((6)? <i>If "Yes," ans</i> ((c)(4), (5), or (6)	wer lines 3b and and satisfied			
	described in section 509(a)(1) or (2). Did the organization have a supporte 3c below.	Part VI how the o	organization deter scribed in section !	501(c)(4), (5), or inder section 501((6)? <i>If "Yes," ans</i> ((c)(4), (5), or (6)	wer lines 3b and and satisfied			

	5, 6:21 AM Pratt Fine Arts Center - Full Filing - Nonprofit Explorer - ProPublica אום נותם נחפ סוק מותם נחפ ביינו אינים ביינו ביינו אינים ביינו אינים ביינו אינים ביינו ביינו ביינו אינים ביינו אינים ביינו	ı	ı	
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by	5a		
	amendment to the organizing document). Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5a		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .			
	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).	8		
	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	-		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9a 9b		
	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
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)? If "Yes," answer line 10b below.			
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10a 10b		
	Schedule A		990)	2023
	Page 5			
Sched	ule A (Form 990) 2023 Supporting Organizations (continued)		F	age 5
1 (11)	Supporting Organizations (continued)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to 11a, 11b, or 11c, provide detail in Part	11c		
Sec	<i>VI.</i> ction B. Type I Supporting Organizations			
	2. Type a supporting organizations		Yes	No
1	Did the officers, directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any,			

Section B. Type I Supporting Organizations

Yes No

Did the officers, directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.

Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.

Section C. Type II Supporting Organizations

Yes No

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1	were a majority of the organization's directors or trustees during the tax year also a r	najorit	ty of the directors or trustees of	ı	I	Ī
	each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).					
Se	ction D. All Type III Supporting Organizations			•		
					Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of tax year, (i) a written notice describing the type and amount of support provided during					
	Form 990 that was most recently filed as of the date of notification, and (iii) copies of	the or				
	documents in effect on the date of notification, to the extent not previously provided?			1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or el organization(s) or (ii) serving on the governing body of a supported organization? If "organization maintained a close and continuous working relationship with the supported	No," e	xplain in Part VI how the	2		
_	By reason of the relationship described in line 2 above, did the organization's supported organizations have a significant					
3	voice in the organization's investment policies and in directing the use of the organization's income or assets at all times					
	during the tax year? If "Yes," describe in Part VI the role the organization's supported	d orga	nizations played in this regard.	3		
Se	ction E. Type III Functionally-Integrated Supporting Organizations					
1	Check the box next to the method that the organization used to satisfy the Integral Pa	art Tes	t during the year (see instructi	ions):		
a						
b	The organization is the parent of each of its supported organizations. Complete	line	3 below.			
С	The organization supported a governmental entity. Describe in Part VI how yo	u sup	ported a government entity (see	instru	ctions)	
2	Activities Test. Answer lines 2a and 2b below.					
					Yes	No
а	Did substantially all of the organization's activities during the tax year directly further supported organization(s) to which the organization was responsive? <i>If "Yes," then in organizations and explain</i> how these activities directly furthered their exempt purp responsive to those supported organizations, and how the organization determined th	Part \	VI identify those supported how the organization was			
	substantially all of its activities.	at the	se activities constituted	2a		
b	Did the activities described on line 2a, above constitute activities that, but for the orgof the organization's supported organization(s) would have been engaged in? If "Yes," the organization's position that its supported organization(s) would have engaged in the organization organization organization organization.	' expla	in in Part VI the reasons for			
	organization's involvement.	nese a	ictivities but for the	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.					
	Did the organization have the power to regularly appoint or elect a majority of the offithe supported organizations? If "Yes" or "No", provide details in Part VI.	·	·	3a		
b	Did the organization exercise a substantial degree of direction over the policies, prograupported organizations? <i>If "Yes," describe in Part VI. the role played by the organizations</i>			3b		
			Schedule A	(Forn	n 990)	2023
	Page 6 ————					
C - l	hd- A (F 000) 2022					_
	dule A (Form 990) 2023		• • • • • • • • • • • • • • • • • • • •		F	Page 6
	t V Type III Non-Functionally Integrated 509(a)(3) Supporting O					
1	Check here if the organization satisfied the Integral Part Test as a qualifying tru instructions. All other Type III non-functionally integrated supporting organizations.				е	
	Section A - Adjusted Net Income		(A) Prior Year		rent Yea onal)	r
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		rent Yea onal)	r
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1				
а	Average monthly value of securities	1a				

1b

1c

1d

b Average monthly cash balances

d Total (add lines 1a, 1b, and 1c)

c Fair market value of other non-exempt-use assets

	3	•	
•	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 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	Section C - Distributable Amount Adjusted net income for prior year (from Section A, line 8, Column A)	1	Current Year
1 2		1 2	Current Year
	Adjusted net income for prior year (from Section A, line 8, Column A)	4	Current Year
2	Adjusted net income for prior year (from Section A, line 8, Column A) Enter 85% of line 1	2	Current Year
3	Adjusted net income for prior year (from Section A, line 8, Column A) Enter 85% of line 1 Minimum asset amount for prior year (from Section B, line 8, Column A)	3	Current Year
3	Adjusted net income for prior year (from Section A, line 8, Column A) Enter 85% of line 1 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3	2 3 4	Current Year

Schedule A (Form 990) 2023

– Page 7 *–*

Schedule A (Form 990) 2023

Page 7

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 exexcess of income from activity	xempt purposes of supported	organizations, in	2	
3 Administrative expenses paid to accomplish exempt purp	ooses of supported organization	ons	3	
4 Amounts paid to acquire exempt-use assets			4	
5 Qualified set-aside amounts (prior IRS approval required	- provide details in Part VI)		5	
6 Other distributions (describe in Part VI). See instruction	ıs		6	
7 Total annual distributions. Add lines 1 through 6.			7	
8 Distributions to attentive supported organizations to whi details in Part VI). See instructions	ch the organization is respons	sive (<i>provide</i>	8	
9 Distributable amount for 2023 from Section C, line 6			9	
10 Line 8 amount divided by Line 9 amount			10	
Section E - Distribution Allocations	(i)	(ii) Underdistributior	ns	(iii) Distributable

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

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b Applied to 2023 distributable amount		
c Remainder. Subtract lines 4a and 4b from line 4.		
5 Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI. See instructions.		
6 Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.		
7 Excess distributions carryover to 2024. Add lines 3j and 4c.		
8 Breakdown of line 7:		
a Excess from 2019		
b Excess from 2020		
c Excess from 2021		
d Excess from 2022		
e Excess from 2023		
Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, Part IV, Section D, lines 2 and 3; Part IV, Section	anations required by Part II, line 10; Part II, line 17a o 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 a on E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, n E, lines 2, 5, and 6. Also complete this part for any ac	nd 2; Part IV, Section C, line 1; Section B, line 1e; Part V
F	acts And Circumstances Test	
Return Reference	Explanation	
Return Reference	Explanation	Schedule A (Form 990) 202
Return Reference	Explanation	Schedule A (Form 990) 202

efile Public Visual Rer	nder ObjectId: 202501969349303255 - Submis	ssion: 2025-07-15	TIN: 91-1186639
Schedule B	Schedule of (OMB No. 1545-0047
(Form 990) Department of the Treasury Internal Revenue Service	► Attach to Form 990 ► Go to <u>www.irs.gov/Form99</u>		2023
Name of the organization PRATT FINE ARTS CENTE			Employer identification number
Organization type (ch	eck one):		91-1186639
Filers of:	Section:		
Form 990 or 990-EZ	☐ 501(c)() (enter number) organization	on	
	4947(a)(1) nonexempt charitable trus	st not treated as a private founda	ation
	☐ 527 political organization		
Form 990-PF	☐ 501(c)(3) exempt private foundation		
	4947(a)(1) nonexempt charitable trus	st treated as a private foundation	1
	☐ 501(c)(3) taxable private foundation		
contributions. Special Rules For an organization of the purposes of the purpose of the purpose of the purpose. Don't religious, charit. Caution: An organization of the purpose of the purpose. Don't religious, charit. Caution: An organization of the purpose	exproperty) from any one contributor. Complete Firstion described in section 501(c)(3) filing Form 99,509(a)(1) and 170(b)(1)(A)(vi), that checked Sching one contributor, during the year, total contribution 1h, or (ii) Form 990-EZ, line 1. Complete Part attion described in section 501(c)(7), (8), or (10) file total contributions of more than \$1,000 exclusive the prevention of cruelty to children or animals. In the prevention of cruelty to children or animals. In the prevention of cruelty to children or animals. In the secked, enter here the total contributions that were complete any of the parts unless the General Ruable , etc., contributions totaling \$5,000 or more contributions to that isn't covered by the General Rule and/or total tit must answer "No" on Part IV, line 2, of its Foreart I, line 2, to certify that it doesn't meet the filing the secked to the secked that it is the secked	90 or 990-EZ that met the 33 ¹ /3% nedule A (Form 990 or 990-EZ), Futions of the greater of (1) \$5,000 ts I and II. Illing Form 990 or 990-EZ that receively for religious, charitable, scient Complete Parts I, II, and III. Illing Form 990 or 990-EZ that receive etc., purposes, but no such corrected during the year for an ule applies to this organization beduring the year.	esupport test of the regulations Part II, line 13, 16a, or 16b, and that O or (2) 2% of the amount on (i) Form Delived from any one contributor, Intific, literary, or educational Delived from any one contributor, Intributions totaled more than \$1,000. In exclusively religious, charitable, etc., In ecause it received nonexclusively Interest to the regulations Interest to the regulation of the regulations Interest to the regulation of the regul
for Form 990, 990-EZ, or 9	}0-PF.		
	Page	e 2 ———————————————————————————————————	
Schedule B (Form 990)	(2023)		Page 2
Name of organization		Empl	loyer identification number

https://projects.propublica.org/nonprofits/organizations/911186639/202501969349303255/full

Part I Contributors	Contributors (see instructions). Use duplicate copies of Part I if addition	onal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
RESTRICTED			Person
		<u> </u>	Payroll
		\$ RESTRICTED	Noncash
	,		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
-			Payroll
		\$	Noncash
			(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
•		\$	Payroll
		<u> </u>	Noncash
			(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
•		Φ	Payroll
		\$	Noncash
			(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
•		<u> </u>	Payroll
	· -		Noncash
			(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
•		<u> </u>	Payroll
			Noncash
			(Complete Part II for noncash contributions.)
			Schedule B (Form 990) (2023)
	Page 3 —		
Schedule B (For	rm 990) (2023)		Page 3
Name of organiza PRATT FINE ARTS		Employer identification	on number
	ncash Property (see instructions). Use duplicate copies of Part II if additional space is neede	91-1186639	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate)	(d) Date received
Part I	besomption of noneasir property given	(See instructions)	Date received

-			\$	
(a) No. from Part I	(b) Description of noncash	property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-			\$	
(a) No. from Part I	(b) Description of noncash	property given	(c) FMV (or estimate) (See instructions)	(d) Date received
•			\$	
(a) No. from Part I	(b) Description of noncash	property given	(c) FMV (or estimate) (See instructions)	(d) Date received
- (-)			\$	
(a) No. from Part I	(b) Description of noncash	property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-			\$	
(a)	(b)		(c)	(d)
No. from Part I	Description of noncash	FMV (or estimate) (See instructions)	Date received	
-			\$	
Schedule	B (Form 990) (2023)	Page 4 ————		Schedule B (Form 990) (2023) Page 4
	rganization E ARTS CENTER			ntification number
Part III	Exclusively religious, charitable, etc., con than \$1,000 for the year from any one con organizations completing Part III, enter the the year. (Enter this information once. See Use duplicate copies of Part III if additional specific part in the year.)	tributor. Complete columns (a) the etotal of exclusively religious, characteristics.) **Tructions.** **Truct	rough (e) and the follow	ving line entry. For
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Descr	iption of how gift is held
-				
	Transferee's name, address, and	(e) Transfer of gift ZIP 4 R	elationship of transferor t	to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Descr	iption of how gift is held
-	Transferee's name, address, and	(e) Transfer of gift ZIP 4 R	elationship of transferor t	to transferee
(a)				

Part I	Prat (α) Purpose οτ gιπ	t Fine Arts Center - Full Filing - Ν (c) Use οτ gιπ	(a) Description of now gift is neig
	Transferee's name, address, and ZIF	(e) Transfer of gift	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and ZIF	(e) Transfer of gift F	Relationship of transferor to transferee
			Schedule B (Form 990) (202
	ıl Data		Return to Form

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TIN: 91-1186639

SCHEDULE D

(Form 990)

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.

OMB No. 1545-0047

	tment of the Treasury al Revenue Service	► Go to <u>www.irs.gov/Form</u>	Attach to Form 9	90.		rmation.		n to Public
Na	me of the organ	ization					r identification	
PRA	ATT FINE ARTS CENTI	ER				91-11866		
Pa	art I Organi	zations Maintaining Donor Advi	sed Funds or Ot	her	Similar Funds o			
		te if the organization answered "Ye						
			(a) Donor	advi	sed funds	(b) F	unds and other	accounts
1	Total number at	end of year						
2	Aggregate value	of contributions to (during year)						
3	Aggregate value	of grants from (during year)						
4	Aggregate value	at end of year						
5		ation inform all donors and donor adviso roperty, subject to the organization's ex					_	Yes No
6	charitable purpo	ation inform all grantees, donors, and do oses and not for the benefit of the donor	or donor advisor, or	for	any other purpose of			Yes 🗆 No
Pa	rt II Conser	vation Easements.						
		te if the organization answered "Ye						
1		onservation easements held by the orga	-	at a				
	☐ Preservation	on of land for public use (e.g., recreation	n or education)		Preservation of an	historically	important land	area
	Protection	of natural habitat			Preservation of a	certified hist	oric structure	
	Preservation	on of open space						
2		2a through 2d if the organization held a e last day of the tax year.	qualified conservation	on co	entribution in the fo		servation	of the Year
а	Total number of	conservation easements				2a		
b	Total acreage re	stricted by conservation easements				2b		
c	Number of conse	ervation easements on a certified histori	ic structure included	in (a)	2c		
d		ervation easements included in (c) acquie listed in the National Register	ired after July 25, 20	06,	and not on a	2d		
3	Number of cons tax year ▶	ervation easements modified, transferre	ed, released, extingu	ished	d, or terminated by	the organiza	ation during the	
4	Number of state	es where property subject to conservation	on easement is locate	ed 🕨				
5	Does the organi	ization have a written policy regarding th	he periodic monitorir	ıg, ir	spection, handling	of violations	5,	
	and enforcemen	nt of the conservation easements it holds	s?				☐ Yes	□ No
6	Staff and volunt	teer hours devoted to monitoring, inspec	cting, handling of vio	latio	ns, and enforcing c	onservation	easements duri	ng the year
7	Amount of expe	enses incurred in monitoring, inspecting,	handling of violation	ıs, a	nd enforcing conser	vation easer	ments during th	e year
8	Does each conso	ervation easement reported on line 2(d) $\theta(h)(4)(B)(ii)$?	above satisfy the re	quir	ements of section 1	70(h)(4)(B)	(i) Yes	□ No
9	balance sheet, a	scribe how the organization reports cons and include, if applicable, the text of the n's accounting for conservation easemen	footnote to the orga					
Pai	rt III Organi	zations Maintaining Collections te if the organization answered "Ye	of Art, Historica			er Simila	r Assets.	
1a		ite if the organization answered Televice in the organization answered Televice ion elected, as permitted under FASB AS				nt and balan	ce sheet works	of art.
10	historical treasu Part XIII, the te	ires, or other similar assets held for pub ext of the footnote to its financial statem	lic exhibition, educat ents that describes t	ion, hese	or research in furthe items.	erance of pu	ublic service, pr	ovide, in
b	historical treasu	ion elected, as permitted under FASB AS ires, or other similar assets held for pub nts relating to these items:						
((i) Revenue includ	led on Form 990, Part VIII, line 1				>:	\$	
		in Form 990, Part X						
2	If the organizati	ion received or held works of art, historints required to be reported under FASB	cal treasures, or oth	er si	milar assets for fina			
а	Revenue include	ed on Form 990, Part VIII, line 1						
b	Assets included	in Form 990. Part X				▶	\$	

Cat. No. 52283D

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

Schedule D (Form 990) 2022

——— Page 2 —————

Sche	dule D	(Form 990) 2022													Page 2
Par	t III	Organizations Ma	aintaining Coll	ections o	f Art, Hi	storic	al Tre	asur	es, o	r Other	Similar A	ssets (continu	ed)	
3		the organization's acquicheck all that apply):	uisition, accession	, and other	records, c	heck a	ny of th	e follo	owing t	hat are a	significant	use of its	collect	ion	
а		Public exhibition				d		oan o	r exch	ange prog	rams				
b		Scholarly research				e		Other							
С		Preservation for future	generations												
4	Provid Part X	de a description of the o	organization's coll	ections and	explain ho	ow they	/ further	r the	organiz	zation's ex	empt purp	ose in			
5		g the year, did the orga s to be sold to raise fun										✓ Ye	es C	⊃ Ne	D
Pai	t IV	Escrow and Custo Complete if the org line 21.			' on Form	ı 990,	Part IV	/, line	e 9, or	reporte	d an amoi	unt on F	orm 99	90, F	Part X,
1a		e organization an agent led on Form 990, Part X										☐ Ye	es (⊃ N	0
b	If "Ye	es," explain the arrange	ment in Part XIII	and comple	te the follo	owing t	able:					Amount			_
С	Begin	ning balance								1c					_
d	Additi	ions during the year .								1d					_
е	Distri	butions during the year								1e					_
f	Ending balance														
2a	a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?														
b	If "Ye	s," explain the arrange	ment in Part XIII.	Check here	if the exp	lanatio	n has b	een p	rovide	d in Part X	(III	. \square			
Pa	rt V	Endowment Fund		1 1157 1		000	D . T	, .:	10						
		Complete if the org	ganization answ	(a) Currer			Part IV			ears back	(d) Three y	ears back	(e) Fou	r vear	rs hack
1a	Beginn	ing of year balance .		(4)	16,100	(-,	16,1		- , ,	16,100	(,	16,100	(-,		16,100
b	Contrib	outions			605,671										
c	Net inv	estment earnings, gain	s, and losses		60,502										
d	Grants	or scholarships													
		expenditures for facilitie	es		59,676										
f	Admini	strative expenses .													
g	End of	year balance			638,697		16,1	.00		16,100		16,100			16,100
2 a		de the estimated percer I designated or quasi-e	ndowment 🕨	nt year end	•	line 1g	, columr	n (a))	held a	s:					
b	Perma	anent endowment 🕨	3.000 %												
c			000 %												
_		ercentages on lines 2a,	•	•											
3а		nere endowment funds nization by:	not in the possess	sion of the o	organizatio	n tnat	are neic	a ana	aamin	isterea foi	r tne		Y	'es	No
	(i) Ur	nrelated organizations										3	a(i)		No
	(ii) R	elated organizations .										38	a(ii)		No
b		s" on 3a(ii), are the rel	-		•			•				·	3b		
4		ibe in Part XIII the inte			n's endown	nent fu	inds.								
Pai	t VI	Land, Buildings, Complete if the org			' on Form	990	Part IV	/ line	2 11a	See For	m 990 Pa	rt X lin	e 10		
	Descri	ption of property	(a) Cost or othe (investmen	er basis	(b) Cost or					cumulated d			d) Book	value	
1a	Land			4,250,000										4,:	250,000
		gs		552,265							482,019				70,246
		old improvements		314,263							303,026				11,237
		nent		1,161,434							657,372				504,062
				92,609							90,611				1,998
		lines 1a through 1e. (C	olumn (d) must e	qual Form S	990, Part X	, colun	nn (B), I	line 1	0(c).)		>			4,8	837,543
												hadula F			

Schedule D (Form 990) 2022

Schedule D (Form 990) 2022 Page 3 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 (b) (c) Method of valuation: Cost or end-of-year market value (including name of security) Book value (1) Financial derivatives (2) Closely-held equity interests (3)Other _ (A) (B) (C) (D) (E) (F) (G) (H) Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) **Investments - Program Related.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (c) Method of valuation: (a) Description of investment (b) Book value Cost or end-of-year market value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (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. (a) Description of liability (b) Book value

(1) Federal income taxes

REFU	NDABLE ADVANCES					54,961
OPER	ATING LEASE LIABILITY					121,832
					_	
					+	
Total	(Column (b) must equal Form 990, Part X, col.(B) line 25.)				•	176,793
	ability for uncertain tax positions. In Part XIII, provid	de the text of the footnote to	the o	organization's financial stat	ements tha	<u> </u>
	nization's liability for uncertain tax positions under F.			-		
	, , , , , , , , , , , , , , , , , , ,	. (,			-	D (Form 990) 2022
						z (. c 220) zcz
		Page 4				
		ruge r				
Sche	dule D (Form 990) 2022					Page 4
Pai	rt XI Reconciliation of Revenue per Au	dited Financial Statem	ents	With Revenue per Re	eturn.	
	Complete if the organization answere	d 'Yes' on Form 990, Par	t IV, I	ine 12a.		
1	Total revenue, gains, and other support per audited	d financial statements .			1	2,897,016
2	Amounts included on line 1 but not on Form 990, F	Part VIII, line 12:				
а	Net unrealized gains (losses) on investments .		2a	147,944		
b	Donated services and use of facilities		2b	96,557		
С	Recoveries of prior year grants		2c	·		
d	Other (Describe in Part XIII.)		2d	17,505		
e	Add lines 2a through 2d			/2 5 2	2e	262,006
3	Subtract line 2e from line 1		•		3	2,635,010
			•		3	2,033,010
4	Amounts included on Form 990, Part VIII, line 12,		1 -	1		
а	Investment expenses not included on Form 990, Pa	•	4a	6,150		
b	Other (Describe in Part XIII.)		4b			
С	Add lines 4a and 4b		•		4c	6,150
5	Total revenue. Add lines 3 and 4c. (This must equa	al Form 990, Part I, line 12.)			5	2,641,160
Par	t XII Reconciliation of Expenses per Au				Return.	
	Complete if the organization answere		t IV, I	ine 12a.	•	2 212 500
1	Total expenses and losses per audited financial sta		•		1	3,313,580
2	Amounts included on line 1 but not on Form 990, F	·	1			
а	Donated services and use of facilities		2a	96,557		
b	Prior year adjustments		2b			
С	Other losses		2c			
d	Other (Describe in Part XIII.)		2d	17,505		
е	Add lines 2a through 2d				2e	114,062
3	Subtract line 2e from line 1				3	3,199,518
4	Amounts included on Form 990, Part IX, line 25, but	ut not on line 1:				<u> </u>
a	Investment expenses not included on Form 990, Pa		4a			
b	Other (Describe in Part XIII.)	•	4b			
c	Add lines 4a and 4b			<u> </u>	4c	0
с 5	Total expenses. Add lines 3 and 4c . (This must equ				4c 5	3,199,518
	1	uai Form 990, Part I, line 18	.) •		5	3,199,518
	t XIII Supplemental Information					
	vide the descriptions required for Part II, lines 3, 5, s 2d and 4b; and Part XII, lines 2d and 4b. Also com				V, line 4; P	art X, line 2; Part XI,
	Return Reference			Explanation		
PART	III, LINE 4:	ARTISTS INVOLVED WITH FUNDRAISING EVENTS. AT ARTISTS RECEIVE A PERCE THE END OF THE YEAR, TH	TIME NTAG	S THE ART WORK IS DONA E OF THE SALE PROCEEDS	TED OUTR	IGHT, AND AT TIMES THE THE ART WORK IS SOLD
		YET SOLD; SUCH ART WOF				
PART	V, LINE 4:	ANNUAL SCHOLARSHIPS E	THERE	IS A RESTRICTED TERM E	NDOWMEN	
DADT	VI LINE 2D OTHER ADHICTMENTS.	OPERATIONS OF THE ORGA				
				= = • = mic		

PART XII, LINE 2D - OTHER ADJUSTMENTS:

RECLASS OF ADDITIONAL AUCTION FUNDRAISING EXPENSES 17,505.

Schedule D (Form 990) 2022

Additional Data

Return to Form

Software ID: Software Version:

efile Public Visual Render

ObjectId: 202501969349303255 - Submission: 2025-07-15

TIN: 91-1186639 OMB No. 1545-0047

SCHEDULE G (Form 990)

Supplemental Information Regarding

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

	ortment of the Treasury	Go to www.			990 or Form 990-EZ. Instructions and the latest in	formation		Inspection
	ne of the organization	P GO to WWW	.ns.gov/ro	1111990 101	instructions and the latest in	iioiiiiatioii.		entification number
PRA	TT FINE ARTS CENTER						91-1186639	
Pa	art I Fundraising Activ	ities. Complete if	the ora	anization	answered "Yes" on Fo	orm 990.	. Part IV. line 1	
	Form 990-EZ filers	•	_			,		
1	Indicate whether the organiza	ation raised funds th	nrough an	y of the fo	ollowing activities. Check	all that a	pply.	
а	☐ Mail solicitations			e	Solicitation of non	-governm	ent grants	
b	☐ Internet and email solicita	ations		f	Solicitation of gov	ernment g	grants	
С	☐ Phone solicitations			g	Special fundraisin	g events		
d	☐ In-person solicitations							
2a	or key employees listed in Fo	rm 990, Part VII) o	r entity in	connectio	n with professional fund	raising sei	rvices?	es 🗆 No
b	If "Yes," list the 10 highest parts to be compensated at least \$			idraisers)	pursuant to agreements	under wh	ich the fundraise	er is
(i)	Name and address of individual or entity (fundraiser)	(ii) Activity	fundrai cust con) Did ser have ody or trol of outions?	(iv) Gross receipts from activity	(or re fundra	nount paid to etained by) siser listed in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No				
				-				
Tot	al			. ▶				
	List all states in which the orga licensing.	nization is registere	d or licen	sed to sol	cit contributions or has t	peen notifi	ied it is exempt	from registration or
==								
For	Paperwork Reduction Act Notice,	see the Instructions	for Form	990 or 99	0-EZ. Cat. No.	50083H	S	chedule G (Form 990) 2023
				Pa	ge 2 ————			

Schedule G (Form 990) 2023 Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more

Part II than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a)Event #1	(b) Event #2	(c)Other events	(d) Total events (add col. (a) through
		(event type)	(event type)	(total number)	col. (c))
		(event type)	(event type)	(total number)	
1115210					
Revenue					
eve					
ĕ					
	1 Gross receipts	596,751			596,751
	2 Less: Contributions	314,568			314,568
	3 Gross income (line 1 minus line 2)	282,183			282,183
		202,103			202,103
	4 Cash prizes				
ses	6 Rent/facility costs	0F F42			0F F42
pen	7 Food and beverages	85,543			85,543
页	8 Entertainment	69,940			69,940
Direct Expenses	9 Other direct expenses	122.002			422.002
Ω	10 Direct expense summary. Add lines 4 th	132,083			132,083
	11 Net income summary. Subtract line 10				287,566
Par	rt III Gaming. Complete if the orga		s" on Form 990. Part I	V. line 19. or reported	-5,383 more than \$15,000
	on Form 990-EZ, line 6a.			-,	1
Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col.(c))
Rev	1 Gross revenue				
enses	2 Cash prizes				
Exper	3 Noncash prizes				
Direct 8	4 Rent/facility costs				
Ö	5 Other direct expenses				
		☐ Yes %	☐ Yes %	☐ Yes %	
	6 Volunteer labor	☐ No	□ No	□ No	
	7 Direct expense summary. Add lines 2 th	nrough 5 in column (d)			
	8 Net gaming income summary. Subtract	line 7 from line 1, colum	n (d)		
_	•				
9 a	Enter the state(s) in which the organization licensed to conduct ga				☐ Yes ☐ No
b	If "No," explain:				
					1
10a	, , , , , , , , , , , , , , , , , , , ,	enses revoked, suspended			
b	ir "Yes," explain:				
				s	chedule G (Form 990) 2023

Sche	dule G (Form 990) 2023							Page 🏻
.1	Does the organization conduct gami	ng activities with nonmember	s?			Yes	□No	
.2	Is the organization a grantor, benefit formed to administer charitable gam			entity		Yes		
L3	Indicate the percentage of gaming a	ctivity conducted in:			1 1	∪ res	∪ NO	
а	The organization's facility				13a			%
b	An outside facility				13b			%
L 4	Enter the name and address of the $\ensuremath{\mu}$	person who prepares the orga	nization's gaming/special events b	ooks and r	ecords:			
	Name							
L5a	Address Does the organization have a contra revenue?	ct with a third party from who		ng				
b	If "Yes," enter the amount of gaming amount of gaming revenue retained	g revenue received by the org	anization 🕨 \$	and t	ne	_ 103	_ 110	
c	If "Yes," enter name and address of	the third party:						
	Name							
	Address							
	Name ► Gaming manager compensation ► \$							
	Description of services provided							
	☐ Director/officer	Employee	☐ Independent contr	actor				
l7 a	Mandatory distributions: Is the organization required under s retain the state gaming license? .	tate law to make charitable di	stributions from the gaming proce	eds to		☐ Yes	□No	
b	Enter the amount of distributions re-	quired under state law distrib	uted to other exempt organization	s or spent		U fes	∪ NO	
	in the organization's own exempt ac		<u> </u>					
Par			ions required by Part I, line 2 licable. Also provide any addit					s.
	Return Reference		Explanation					
				Sched	lule G (F	orm 990) 2	023	
Δc	lditional Data					Deturn t	to Earn	

Software Version:

efile Public Visual Render ObjectId: 202501969349303255 - Submission: 2025-07-15 TIN: 91-1186639 **Compensation Information** OMB No. 1545-0047 Schedule J (Form 990) 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. Department of the Treasury ► Go to <u>www.irs.gov/Form990</u> for instructions and the latest information. Internal Revenue Service Name of the organization PRATT FINE ARTS CENTER Employer identification number 91-1186639 **Questions Regarding Compensation** Yes No 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. $\hfill \Box$ Housing allowance or residence for personal use First-class or charter travel Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Personal services (e.g., maid, chauffeur, chef) Discretionary spending account If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all 2 Yes directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a? . Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee Written employment contract Independent compensation consultant Compensation survey or study **V** Form 990 of other organizations Approval by the board or compensation committee 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: Receive a severance payment or change-of-control payment? . . . No Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b No Participate in, or receive payment from, an equity-based compensation arrangement? . 4c No If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. 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: The organization? No Any related organization? 5b Nο If "Yes," on line 5a or 5b, describe in Part III. 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: 6a No 6b Nο If "Yes," on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Nο Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe 8 No For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 50053T Page 2 -Schedule J (Form 990) 2023 Page 2 Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. Part II 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 are not 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, 1099-MISC compensation, and/or (C) Retirement and (D) Nontaxable (E) Total of (F) Compensation 1099-NEC other deferred in column (B) (B)(i)-(D) reported as (i) Base (ii) (iii) Other deferred on prior Form 990 Bonus & incentive compensation compensation

	•		Page 3			Schedule J (Form 990) 2023
Schedule J (Form 990) 2023							Page 3
Part III Supplemental Ir		I.C. D. 17 II. 4 41	2 4 4 5 5	6 6 7 10 16	D 177 Al		· ·
Provide the information, explanation Return Reference	on, or descriptions required	for Part I, lines 1a, 1r), 3, 4a, 4b, 4c, 5a, 5b,	Explanation	or Part II. Also complete this	s part for any additional in	formation.
PART I, LINE 3			RVEYS, INDUSTRY TREM		TION COMMITTEE IS USED V	VHEN DETERMINING THE	SALARY AND
	•					Schedule J (Form 990) 2023

Software ID: Software Version: SCHEDULE M

(Form 990)

efile Public Visual Render

ObjectId: 202501969349303255 - Submission: 2025-07-15

Noncash Contributions

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

TIN: 91-1186639

OMB No. 1545-0047

▶ Attach to Form 990.

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

Open to Public

	Revenue Service					Inspe	ection	
	e of the organization				Employer ide			
	FINE ARTS CENTER							
					91-1186639			
Pa	rt 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) od of determi contribution a		s
1	Art—Works of art	Χ	50	150,000	AUCTION ART	VARIES		
2	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household							
6	goods							
	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .							
	Securities—Closely held stock .							
	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							
	Collectibles							
	Food inventory	X	1	2,338	BEVERAGES F	OR AUCTION		
	Drugs and medical supplies .							
	Taxidermy				1			
22 23	Historical artifacts Scientific specimens							
	Archeological artifacts							
27	ART SUPPLIES	X	5	10 642	DONOR STATE	D VALUE		
	AND			10/012	DOMOR SIA	in theor		
	Other ► (EQUIPMENT)							
	Other ► ()							
	Other ▶ ()							
	Other ► ()							
	Number of Forms 8283 received by t for which the organization completed				29			
	To which the organization completed	1 1 01111 020.	5, Tare IV, Donce Acknowledg	gemene			Yes	No
302	During the year, did the organization	n rocoivo h	, contribution any property r	anartad in Part I lines 1 the	rough 28 that	it must	165	NO
50 a	hold for at least three years from th					ic iliusc		
	purposes for the entire holding period	od?						
						30a		No
ъ 31	If "Yes," describe the arrangement i Does the organization have a gift ac		olicy that requires the review	v of any nonstandard contri	hutions?	31		No
				•				
	Does the organization hire or use the contributions?	ira parties	or related organizations to so	DIICIT, process, or sell nonca	sn • • •	32a		No
	If "Yes," describe in Part II.							
33	If the organization didn't report an a	amount in c	column (c) for a type of prope	erty for which column (a) is	cnecked,			
	describe in Part II.							
For P	aperwork Reduction Act Notice, see the	Instruction	ns for Form 990.	Cat. No. 51227J	Sch	edule M (Form	990) ((2023)

35/36

10/22/25, 6:21 AM

Schedule M (Form 990) (2023)

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Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference

Explanation

Schedule M (Form 990) (2023)

Additional Data

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Software ID:

efile Public Visual Render ObjectI

ObjectId: 202501969349303255 - Submission: 2025-07-15

TIN: 91-1186639OMB No. 1545-0047

SCHEDULE O (Form 990) Supplemental Information to Form 990 or 990-EZ

2023

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

Open to Public Inspection

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

Name of the organization PRATT FINE ARTS CENTER

Employer identification number

91-1186639

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	MEMBERSHIP IS OPEN TO THE PUBLIC. A MEMERSHIP FEE IS REQUIRED TO BE PAID IN ORDER TO BE A CURRENT MEMBER.
FORM 990, PART VI, SECTION B, LINE 11B	THE BOARD RECEIVES THE FORM 990 AND RATIFIES THE 990. THE PREPARER FIRST REVIEWES THE 990 WITH THE EXECUTIVE DIRECTOR AND TREASURER.
FORM 990, PART VI, SECTION B, LINE 12C	THE FINANCE COMMITTEE REVIEWS RELATED PARTY AND POSSIBLE CONFLICTS OF INTEREST AS THEY ARISE AND APPROPRIATELY NOTIFIES THE BOARD OR DEALS WITH EACH INSTANCE IN ACCORDANCE WITH THE WRITTEN CONFLICT OF INTEREST POLICY.
FORM 990, PART VI, SECTION B, LINE 15	THE FINANCE AND EXECUTIVE COMMITTEES REVIEW COMPARABLE DATA AND EMPLOYEE PERFORMANCE TO DETERMINE COMPENSATION FOR THE EXECUTIVE DIRECTOR, WHICH IS THEN APPROVED BY THE BOARD. THE EXECUTIVE DIRECTOR AND SENIOR MANAGEMENT STAFF DETERMINE APPROPRIATE COMPENSATION RANGES FOR ALL OTHER EMPLOYEE CLASSES.
FORM 990, PART VI, SECTION C, LINE 18	FINANCIAL STATEMENTS, POLICY INFORMATION, FORM 1023 AND 990 ARE AVAILABLE FOR PUBLIC INSPECTION UPON WRITTEN REQUEST MAILED TO THE ORGANIZATION AND ON GUIDESTAR'S WEBSITE AT HTTP://WWW2.GUIDESTAR.ORG
FORM 990, PART VI, SECTION C, LINE 19	FINANCIAL STATEMENTS, POLICY INFORMATION, FORM 1023 AND 990 ARE AVAILABLE FOR PUBLIC INSPECTION UPON WRITTEN REQUEST MAILED TO THE ORGANIZATION AND ON GUIDESTAR'S WEBSITE AT HTTP://WWW2.GUIDESTAR.ORG

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

Cat. No. 51056K

Schedule O (Form 990) 2023

Additional Data

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