

0-088-26

**NEIGHBORHOOD DEVELOPMENT FUND
Not-for-Profit Transmittal and Approval Form**

Applicant/Program: Kentucky Shakespeare Inc.//Free Kentucky Shakespeare Festival in Central Park
Applicant Requested Amount: \$10,000
Appropriation Request Amount: \$10,000

Executive Summary of Request
Funding to Kentucky Shakespeare Inc. for 2.4% of the total operating cost for the Kentucky Shakespeare Festival that is free to the public all summer long in Old Louisville's Central Park.

Is this program/project a fundraiser? Yes No
Is this applicant a faith based organization? Yes No
Does this application include funding for sub-grantee(s)? Yes No

I have reviewed the attached Neighborhood Development Fund Application and have found it complete and within Metro Council guidelines and request approval of funding in the following amount(s). I have read the organization's statement of public purpose to be furthered by the funds requested and I agree that the public purpose is legitimate. I have also completed the disclosure section below, if required.

6 District # [Signature] Primary Sponsor Signature \$10,000 Amount 04/03/2026 Date
\$5,000

Primary Sponsor Disclosure
List below any personal or business relationship you, your family or your legislative assistant have with this organization, its volunteers, its employees or members of its board of directors.
No relationship.

Approved by:

Appropriations Committee Chairman Date
Final Appropriations Amount: _____

Applicant/Program:
Kentucky Shakespeare Inc.//Free Kentucky Shakespeare Festival in Central Park

Additional Disclosure and Signatures

Additional Council Office Disclosure
List below any personal or business relationship you, your family or your legislative assistant have with this organization, its volunteers, its employees or members of its board of directors.

Council Member Signature and Amount

District 1 _____ \$ _____
District 2 _____ \$ _____
District 3 _____ \$ _____
District 4 _____ \$ _____
District 5 _____ \$ _____
District 6 _____ \$ _____
District 7 _____ \$ _____
District 8 _____ \$ _____
District 9 _____ \$ _____
District 10 _____ \$ _____
District 11 _____ \$ _____
District 12 _____ \$ _____
District 13 _____ \$ _____
District 14 _____ \$ _____
District 15 _____ \$ _____

Applicant/Program:

Kentucky Shakespeare Inc.//Free Kentucky Shakespeare Festival in Central Park

Additional Disclosure and Signatures

Additional Council Office Disclosure

List below any personal or business relationship you, your family or your legislative assistant have with this organization, its volunteers, its employees or members of its board of directors.

District 16 _____ \$ _____

District 17 _____ \$ _____

District 18 _____ \$ _____

District 19 _____ \$ _____

District 20 _____ \$ _____

District 21 _____ \$ _____

District 22 _____ \$ _____

District 23 _____ \$ _____

District 24 _____ \$ _____

District 25 _____ \$ _____

District 26 _____ \$ _____

**LOUISVILLE METRO COUNCIL
NEIGHBORHOOD DEVELOPMENT FUND APPLICATION**

Legal Name of Applicant Organization Kentucky Shakespeare Inc.

Program Name and Request Amount \$10,000 for Free Kentucky Shakespeare Festival in Central Park

	Yes/No/NA
Is the NDF Transmittal Sheet Signed by all Council Member(s) Appropriating Funding?	<input type="checkbox"/> Yes
Is the funding proposed by Council Member(s) less than or equal to the request amount?	<input type="checkbox"/> Yes
Is the proposed public purpose of the program viable and well-documented?	<input type="checkbox"/> Yes
Will all of the funding go to programs specific to Louisville/Jefferson County?	<input type="checkbox"/> Yes
Has Council or Staff relationship to the Agency been adequately disclosed on the cover sheet?	<input type="checkbox"/> Yes
Has prior Metro Funds committed/granted been disclosed?	<input type="checkbox"/> Yes
Is the application properly signed and dated by authorized signatory?	<input type="checkbox"/> Yes
Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?	<input type="checkbox"/> Yes
If Metro funding is for a separate taxing district is the funding appropriated for a program outside the legal responsibility of that taxing district?	<input type="checkbox"/> N/A
Is the entity in good standing with: <ul style="list-style-type: none"> ▶ Kentucky Secretary of State? ▶ Louisville Metro Revenue Commission? ▶ Louisville Metro Government? ▶ Internal Revenue Service? ▶ Louisville Metro Human Relations Commission? 	<input type="checkbox"/> Yes
Is the current Fiscal Year Budget included?	<input type="checkbox"/> Yes
Is the entity's board member list (with term length/term limits) included?	<input type="checkbox"/> Yes
Is recommended funding less than 33% of total agency operating budget?	<input type="checkbox"/> Yes
Does the application budget reflect only the revenue and expenses of the project/program?	<input type="checkbox"/> Yes
Is the cost estimate(s) from proposed vendor (if request is for capital expense) included?	<input type="checkbox"/> No <input type="checkbox"/> NA
Is the most recent annual audit (if required by organization) included?	<input type="checkbox"/> Yes
Is a copy of Signed Lease (if rent costs are requested) included?	<input type="checkbox"/> N/A
Is the Supplemental Questionnaire for churches/religious organizations (if requesting organization is faith-based) included?	<input type="checkbox"/> N/A
Are the Articles of Incorporation of the Agency included?	<input type="checkbox"/> Yes
Is the IRS Form W-9 included?	<input type="checkbox"/> Yes
Is the IRS Form 990 included?	<input type="checkbox"/> Yes
Are the evaluation forms (if program participants are given evaluation forms) included?	<input type="checkbox"/> N/A
Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if required to do so)?	<input type="checkbox"/> N/A
Has the Agency agreed to participate in the BBB Charity review program? If so, has the applicant met the BBB Charity Review Standards?	<input type="checkbox"/> Yes

Prepared by: Nick Conder

Date: 04/03/2026

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 1 – APPLICANT INFORMATION			
Legal Name of Applicant Organization:			
<i>(as listed on: http://www.sos.ky.gov/business/records Kentucky Shakespeare, Inc.</i>			
Main Office Street & Mailing Address: 616 Mvrtle Street, Louisville, KY 40208			
Website: <i>Kyshakespeare.com</i>			
Applicant Contact:	Matt Wallace	Title:	Producing Artistic Director
Phone:	502.574.9900, ex. 12	Email:	matt@kvshakespeare.com
Financial Contact:	Matt Wallace	Title:	Producing Artistic Director
Phone:	502.574.9900, ex. 12	Email:	matt@kvshakespeare.com
Organization’s Representative who attended NDF Training: <i>Matt Wallace</i>			
GEOGRAPHICAL AREA(S) WHERE PROGRAM ACTIVITIES ARE (WILL BE) PROVIDED			
Program Facility Location(s):	C. Douglas Ramev Amphitheater in Central Park		
Council District(s):	6	Zip Code(s):	40208
SECTION 2 – PROGRAM REQUEST & FINANCIAL INFORMATION			
PROGRAM/PROJECT NAME: Free Kentucky Shakespeare Festival in Central Park			
Total Request: (\$)	10,000	Total Metro Award (this program) in previous year: (\$)	5,000
Purpose of Request (check all that apply):			
<input type="checkbox"/> Operating Funds (generally cannot exceed 33% of agency’s total operating budget) <input checked="" type="checkbox"/> Programming/services/events for direct benefit to community or qualified individuals <input type="checkbox"/> Capital Project of the organization (equipment, furnishing, building, etc)			
The Following are Required Attachments:			
<input checked="" type="checkbox"/> IRS Exempt Status Determination Letter <input checked="" type="checkbox"/> Current year projected budget <input checked="" type="checkbox"/> Current financial statement <input checked="" type="checkbox"/> Most recent IRS Form 990 or 1120-H <input checked="" type="checkbox"/> Articles of Incorporation (current & signed) <input type="checkbox"/> Cost estimates from proposed vendor if request is for capital expense		<input type="checkbox"/> Signed lease if rent costs are being requested <input checked="" type="checkbox"/> IRS Form W9 <input type="checkbox"/> Evaluation forms if used in the proposed program <input checked="" type="checkbox"/> Annual audit (if required by organization) <input type="checkbox"/> Faith Based Organization Certification Form, if applicable	
For the current fiscal year ending June 30, list all funds appropriated and/or received from Louisville Metro Government for this or any other program or expense, including funds received through Metro Federal Grants, from any department or Metro Council Appropriation (Neighborhood Development Funds). Attach additional sheet if necessary.			
Source:	EAF Grant Creative Industries	Amount: (\$)	50.000
Source:	NDF Shakes in Parks Tour	Amount: (\$)	28.500
Source:		Amount: (\$)	
Has the applicant contacted the BBB Charity Review for participation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Has the applicant met the BBB Charity Review Standards? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 3 – AGENCY DETAILS

Describe Agency's Vision, Mission and Services:

Mission □ Grounded in the works of Shakespeare, we enrich communities through accessible, inclusive, professional theatre experiences that educate, inspire, and entertain diverse audiences.

Vision □ To use Shakespeare's truths and the power of the arts to transform lives. Shakespeare belongs to everyone.

About Kentucky Shakespeare □ Kentucky Shakespeare serves communities through the Kentucky Shakespeare Festival in Central Park, education programs for schools, public performances, and community outreach programs. Now in its 66th season, the Kentucky Shakespeare Festival in Central Park is the longest-running free, non-ticketed Shakespeare festival in the United States. As the most comprehensive in-school arts education provider in the Commonwealth, Kentucky Shakespeare serves schools throughout the region with interactive educational programming directly tied to academic standards, helping impact student achievement. Our many community programs explore conflict resolution, empathy building, and communication, in a range of settings from preschools to senior centers.

What we do: □ **PERFORMANCES:** Kentucky Shakespeare Festival in Central Park, Shakespeare in the Parks tour, Shakespeare in the Libraries tour, Indoor productions during the year

EDUCATION PERFORMANCE AND WORKSHOP TOUR 25-26: Two-Actor The Tempest, Shakespeare Alive!, The Tempest Spring Tour, Voice of Social Change: Ira Aldridge, Living History: We the People, Living History: Kentucky History, Bard Buddies, Fairy Tales from Around the World, Hip-Hop Shakespeare, Conflict Resolution and Anti-Bullying, Acting Fundamentals, Stage Combat, Staging Shakespeare, Renaissance Dance, Discovering Shakespeare, Mathematics of Shakespearean Design, and Voices of Young Women

CAMPS AND CLASSES: Camp Shakespeare, Shakespeare Off the Page

COMMUNITY PROGRAMS: Shakespeare with Veterans, Juvenile Justice Arts Program, Survivorship Shakespeare, Hosparus program, community residencies

Kentucky Shakespeare has been recognized by the Folger Library and the Kentucky Humanities Council for exemplary programming, is a multiyear recipient of the National Endowment for the Arts Shakespeare in American Communities program, and is a past recipient of the Kentucky Governor's Award in the Arts. Kentucky Shakespeare has been awarded multiple LEO Weekly Reader's Choice Awards, Broadway World Louisville Regional Awards, the Center for Nonprofit Excellence's Art of Vision Pyramid Award, the Louisville Awards in the Arts Bobby Petrino Family Foundation Arts Impact Award, and the Arts for All Kentucky Community Partner Award for arts inclusion work with people with disabilities.

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 4 - BOARD OF DIRECTORS AND PAID STAFF

Board Member	Term End Date
Anya Bond-Beckley, Board Chair – Givaudan Sense Colour	08/2028
Michelle Jarboe, Vice Chair – Healthpeak Properties	08/2029
Brad Comer, Treasurer/Finance Committee Chair – Republic Bank	08/2026
Lincoln Snyder, Secretary – Humana	08/2028
Kay Madrick, Immediate Past Chair – Kentucky Humanities	08/2029
Randall Caldwell, Events & Promotions Committee Chair – Norton Audubon Hospital	08/2029
Paula O. Lockhart, Community Engagement & Development Committee Chair – comi	08/2029
Alan K. MacDonald, Nominating & Governance Committee Chair – FBT Gibbons LLP	08/2029
Charley Nold, Education & Outreach Committee Chair – White Clay	08/2029
Sara Smith Bowman – community liaison	08/2028
Meghan Greenwell Caplan – MG Caplan Strategic Philanthropy	08/2028
Elizabeth A. Cherry – community liaison	08/2027
Emilee Crawford – LG&E and KU Energy LLC	08/2029
Jonese Franklin – BirdNote	08/2027
McKenzie Gary – RoamVista LLC	08/2028
Pamela Holwerda – PNC Bank	08/2027
LaShondra Hood – University of Louisville African American Theatre Program	08/2027

Describe the Board term limit policy:

By-Laws: Voting Directors shall serve for three-year terms beginning immediately upon their election by the Board and ending on the fiscal year-end following the third anniversary of the date of election. Voting Members can be elected to no more than two consecutive three-year terms. After serving two consecutive three-year terms, a Voting Director may be re-nominated to the Board after a one-year hiatus. During this hiatus, at the discretion of the Board, a Voting Director may hold the position of Emeritus. Nonvoting Directors, including Emeritus and/or Ex Officio Directors, shall not be subject to the term limits set forth above. Notwithstanding the above, the Board may by Resolution authorize any Voting Director to serve one (1) additional year beyond the two (2) three-year terms, to ensure continuity. In addition, if a Voting Director serves at any point in their term as an Officer, upon the expiration of that term as an Officer the Voting Director's term shall then restart as if newly elected to the Board.

Three Highest Paid Staff Names	Annual Salary
Matt Wallace, Producing Artistic Director	109,769
Amy Attaway, Associate Artistic Director	58,593
Kyle Ware, Director of Education	58,391

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 5 – PROGRAM/PROJECT NARRATIVE

A: Describe the program/project start and end dates, a description of the program/project and applicable data with regards to specific client population the program will address (attach related flyers, planning minutes, designs, event permits, proposals for services/goods, etc.):

Kentucky Shakespeare is designated the Official Shakespeare Company of the Commonwealth by the state Legislature. 2026 marks the 66th season of our free summer festival in Central Park as the oldest, free, non-ticketed Shakespeare Festival in the United States.

We serve Louisville's historically underserved, making the work available and accessible to our diverse community regardless of financial limitations. We operate in a city park, and our audience is one of the most diverse of any professional arts organization in the area. From the end of May through mid-August, any family can experience this public service and community festival at absolutely no cost to them.

The free Festival season runs for 11 weeks from May 27-August 9, 2026 for 55 performances.

100% of these performances and the pre-show interactive youth activities are offered at absolutely no cost to the public for a total of over 200 hours of free arts experiences for our community.

We will also be distributing four-hour TARC passes in west and south Louisville to help remove access barriers to professional community arts experiences.

B: Describe specifically how the funding will be spent including identification of funding to sub grantee(s):

The Kentucky Shakespeare Festival summer season budget is \$412K to produce and provide the 11-week free community festival at no cost to those we serve.

We are seeking support of \$10,000 = 2.4% of the total summer season budget to provide the summer season of Kentucky Shakespeare Festival in Central Park. (This would be an increase from last year and returning to pre-COVID level of support from the district.)

During the summer season, Kentucky Shakespeare employs 85+ people, with 95%+ of them living here in the area. We are able to employ these professionals in the summer months when they may otherwise be unemployed.

The fund assists in also professional artistic staff including educators implementing the educational components in our productions and Kids' Globe interactive youth tent.

The 2026 summer season consists of three main stage professional Shakespeare productions - AS YOU LIKE IT, ANTONY AND CLEOPATRA, and THE TWO GENTLEMEN OF VERONA, plus a production from our Globe Players high school training program - ROMEO AND JULIET and the Louisville Ballet with a week of a world premiere Shakespeare in Dance production of HAMLET & OPHELIA.

Having the funds support locally-based summer season artistic staff, enables us to use other funds to pay for rehearsals, production materials, and preparation as well. The many summer season expenses include nightly security staff, 85+ Kentucky Shakespeare staff members, production materials, and playbills.

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

C: If this request is a fundraiser, please detail how the proceeds will be spent:

Not applicable. This event is not a fundraiser. It's a free, event/program for all of our community.

D: For Expenditure Reimbursement Only – The grant award period begins with the Metro Council approval date and ends on June 30 of Metro fiscal year in which the grant is approved. If any part of this funding request is for funds to be spent before the grant award period, identify the applicable circumstances:

- The funding request is a reimbursement of the following expenditures that will probably be incurred after the application date, but prior to the execution of the grant agreement:

✓ If selecting this option, the invoice, receipt and payment documentation should not be available as of the date of this application.

The Grantee will be required to submit financial reporting in accordance with the reporting schedule provided in the grant agreement.

- Reimbursements should not be made before application date unless an emergency can be demonstrated by the primary council sponsor. The funding request is a reimbursement of the following expenditures (attach invoices or proof of payment):

- ✓ Attach a copy of invoices and/or receipts to provide proof of purchase of activities associated with the work plan identified in this application.
- ✓ Attach a copy of cancelled checks to provide proof of payment of the invoices or receipts associated with the work plan identified in this application.

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

E: Describe the program's benefits to those being served (measurable outcomes). Include the program's process for collecting data and the indicators that will be tracked to measure the benefits to those being served:

Kentucky Shakespeare will provide arts experiences to community members at no cost to them - 25,000K+ people in the summer of 2026. Louisville community will be engaged throughout summer through intergenerational, shared artistic experiences. A safe, community experience will be provided. The arts have shown to develop empathy, conflict resolution skills, confidence, communication, influence thought and action, and improve mental health and well-being.

Survey results from our 2025 summer season in Central Park, illustrated that:

- 100% of Louisville ZIP codes were served
- demographics served mirror the demographics of Louisville Metro
- 97% felt the community was positively impacted; 96% felt Central Park was more energized; 95% gained a better appreciation for the arts; 95% felt more comfortable with the arts; 92% reported increased pride in their community; 88% felt more connected to the community and neighbors; and 83% felt less lonely as a result of the experience

As there is no charge for the event, all community members will have the opportunity to attend and experience this unique community service and event in their a neighborhood park. To measure attendance, gage participation and demographics, Kentucky Shakespeare will have a voluntarily survey for participants/attendees to assess the event, demographics, and their experience. We will measure increase in community pride, sense of belonging, comfort level with the arts, connection to community, and levels of loneliness. The event will aid in strengthening family and community bonds, welcoming them to this positive, communal event in a neighborhood park. The targeted population is all members of the districts. As the programs are presented free of charge, there is no cost barrier.

F: Briefly describe any existing collaborative relationships the organization has with other community organizations. Describe what those partners are bringing to the relationship in general and to this program/project specifically.

Kentucky Shakespeare engages community members in varieties of ways. We seek to increase the way in which we engage. Kentucky Shakespeare is also partnering this summer with the Louisville Ballet and Louisville Improvisors in addition to the many other organizations in making sure our community has access to the free summer arts experience.

During the summer, we open the stage to 50+ community groups to perform pre-shows on our stage as part of the season, including last year Lunar Lion Dance, Louisville Fencing Center, Three Witches Shakespeare, Hui Kaululehua, The Thoroughbreds, Derby City Chamber Brass, Stephen Foster Story, Allegro Dance Project, Louisville Ballet School, Flamenco Louisville, and more. We will invite these groups to return, including many others.

Kentucky Shakespeare has been working with Louisville Metro Parks and Olmsted Parks to continue to improve the park experience and drive more people to this Metro and Olmsted Park home of Central Park. Olmsted Parks Conservancy and Metro Parks and Recreation are partners and will help to publicize the events, in addition to Metro Council members and numerous community organizations, including the Old Louisville Neighborhood Council, among others. Kentucky Shakespeare will work with community centers, churches, library branches, community and neighborhood associations to publicize the event. We hire the advertising firm Scopechchio, to help publicize and advertise throughout Louisville Metro.

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 6 – PROGRAM/PROJECT BUDGET SUMMARY

THE PROGRAM/PROJECT BUDGET SHOULD REALISTICALLY ESTIMATE WHAT AMOUNT IS NEEDED FROM METRO GOVERNMENT AND WHAT IS EXPECTED FROM OTHER SOURCES.

Program/Project Expenses	Column 1	Column 2	Column (1+2)=3
	Proposed Metro Funds	Non-Metro Funds	Total Funds
A: Personnel Costs Including Benefits	10,000	262,400	272,400
B: Rent/Utilities		40,000	40,000
C: Office Supplies		500	500
D: Telephone			0
E: In-town Travel		5,000	5,000
F: Client Assistance (See Detailed List on Page 8)			0
G: Professional Service Contracts			0
H: Program Materials		95,000	95,000
I: Community Events & Festivals (See Detailed List on Page 8)			0
J: Machinery & Equipment			0
K: Capital Project			0
L: Other Expenses (See Detailed List on Page 8)			0
*TOTAL PROGRAM/PROJECT FUNDS	10,000	402,900	412,900
% of Program Budget	2.4%	97.6%	100%

List funding sources for total program/project costs in Column 2, Non-Metro Funds:

Other State, Federal or Local Government	40,000
United Way	
Private Contributions (do not include individual donor names)	272,900
Fees Collected from Program Participants	
Other (please specify)	90,000
Total Revenue for Columns 2 Expenses **	402,900

*Total of Column 1 MUST match "Total Request on Page 1, Section 2"

**Must equal or exceed total in column 2.

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

Detail of In-Kind Contributions for this PROGRAM only: Includes Volunteers, Space, Utilities, etc. (Include anything not bought with cash revenues of the agency).

Donor*/Type of Contribution	Value of Contribution	Method of Valuation
<p align="center"><i>Total Value of In-Kind</i> (to match Program Budget Line Item. Volunteer Contribution & Other In Kind)</p>	0	

*** DONOR INFORMATION REFERS TO WHO MADE THE IN KIND CONTRIBUTION. VOLUNTEERS NEED NOT BE LISTED INDIVIDUALLY, BUT GROUPED TOGETHER ON ONE LINE AS A TOTAL NOTING HOW MANY HOURS PER PERSON PER WEEK**

Agency Fiscal Year Start Date: 09/01/2025

Does your Agency anticipate a significant increase or decrease in your budget from the current fiscal year to the budget projected for next fiscal year? NO YES

If YES, please explain:

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 7 – CERTIFICATIONS & ASSURANCES

By signing Section 7 of the Grant Application, the authorized official signing for the applicant organization certifies and assures to the best of his or her knowledge and/or belief the following Assurances and Certifications. If there is any reason why one or more of the assurances or certifications listed cannot be certified or assured, please explain in writing and attach to this application.

Standard Assurances

1. Applicant understands this application and its attachments as well as any resulting grant agreement, reports and proof of expenditure is subject to Kentucky's open records law.
2. Applicant understands if the grant agreement is not returned to Louisville Metro within 90 days of its mailing to the applicant, the approval is automatically revoked and the funds will not be disbursed to our organization.
3. Applicant and any sub grantee will give Louisville Metro Government access to and the right to examine all paper or electronic records related to the awarded grant for up to five years of the grant agreement date.
4. Applicant assures compliance with the grant requirements and will monitor the performance of any third party (sub-grantee).
5. The Agency is in good standing with the Kentucky Secretary of State, Louisville Metro Government, the Jefferson County Revenue Commission, the Internal Revenue Service, and the Louisville Metro Human Relations Commission.
6. Applicant understands failure to provide the services, programs, or projects included in the agreement will result in funds being withheld or requested to be returned if previously disbursed.
7. Applicant understands they must return to Louisville Metro any unexpended funds by July 31 following the Metro Louisville's fiscal year end.
8. Applicant understands they must provide proof of all expenditures (canceled checks, receipts, paid invoices). The Applicant understands the failure to provide proof of expenditures as required in the grant agreement could result in funding being withheld or request to be returned if previously disbursed.
9. Applicant understands if this application is approved, the grant agreement will identify an award period that begins with the Metro Council approval date, and will end with June 30 of the fiscal year in which the grant is approved. Expenditures associated with this award expected to occur prior to the award period (approval date) must be disclosed in this application in order to be considered compliant with the grant agreement.
10. Applicant understands if we choose to incur expenditures prior to the approval of the application by the Metro Council, there is no guarantee that funding will be reimbursed, as the Council may choose not to award the application.
11. Applicant will establish safeguards to prohibit employees or any person that receives compensation from awarded funds from using their position for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.


Standard Certifications

1. The Agency certifies it will not use Louisville Metro Government funds for any religious, political or fraternal Activities.
2. The Agency has a written Affirmative Action/Equal Opportunity Policy.
3. The Agency does not discriminate in employment or in provision of any service/program/activity/event based on age, color, disabled status, national origin, race, religion, sex, gender identity or sexual orientation, or Vietnam era veteran status.
4. The Agency certifies it will not require clients, recipients, or beneficiaries to participate in religious, political, fraternal or like activities in order to receive services/benefits provided with Louisville Metro Government funds.
5. The Agency understands the Americans with Disabilities Act (ADA) and makes reasonable accommodations.

Relationship Disclosure: List below any relationship you or any member of your Board of Directors or employees has with any Councilperson, Councilperson's family, Councilperson's staff or any Louisville Metro Government employee.

SECTION 8 – CERTIFICATIONS & ASSURANCES

I certify under the penalty of law the information in this application (including, without limitation, "Certifications and Assurances") is accurate to the best of my knowledge. I am aware my organization will not be eligible for funding if investigation at any time shows falsification. If falsification is shown after funding has been approved, any allocations already received and expended are subject to be repaid. I further certify that I am legally authorized to sign this application for the applying organization and have initialed each page of the application.

Signature of Legal Signatory:	 Matt Wallace (Mar 7, 2026 10:04:26 EST)	Date:	Mar 7, 2026
Legal Signatory: (please print):	Matt Wallace	Title:	Producing Artistic Direc
Phone:	502.574.9900	Extension:	12
Email:	matt@kyshakespeare.com		



IRS Department of the Treasury
Internal Revenue Service

P.O. Box 2508
Cincinnati OH 45201

In reply refer to: 0752857510
Nov. 17, 2014 LTR 4168C 0
61-6036654 201312 67

00021617
BODC: TE

KENTUCKY SHAKESPEARE FESTIVAL INC
323 W BROADWAY STE 401
LOUISVILLE KY 40202-2476



014000

Employer Identification Number: 61-6036654
Person to Contact: TAX EXEMPT & GOVERNMENT
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your Nov. 05, 2014, request for information regarding your tax-exempt status.

Our records indicate that you were recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in JULY 1965.

Our records also indicate that you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section(s) 509(a)(1) and 170(b)(1)(A)(vi).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

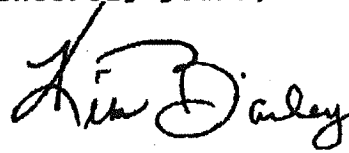
Please refer to our website www.irs.gov/eo for information regarding filing requirements. Specifically, section 6033(j) of the Code provides that failure to file an annual information return for three consecutive years results in revocation of tax-exempt status as of the filing due date of the third return for organizations required to file. We will publish a list of organizations whose tax-exempt status was revoked under section 6033(j) of the Code on our website beginning in early 2011.

0752857510
Nov. 17, 2014 LTR 4168C 0
61-6036654 201312 67
00021618

KENTUCKY SHAKESPEARE FESTIVAL INC
323 W BROADWAY STE 401
LOUISVILLE KY 40202-2476

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely yours,

A handwritten signature in cursive script that reads "Kim D. Bailey". The signature is written in black ink and is positioned below the typed name.

Kim D. Bailey
Operations Manager, AM Operations 3

Kentucky Shakespeare - 2025-2026 BUDGET

INCOME	BUDGET
3000 CONTRIBUTED INCOME	
3010 Corporate	
3011 Restricted	\$60,000
3012 Unrestricted	\$45,000
Total 3010 Corporate	\$105,000
3020 Foundation	
3021 Restricted	\$90,000
3022 Unrestricted	\$160,000
Total 3020 Foundation	\$250,000
3030 Government	
3031 Restricted	\$15,000
3032 Unrestricted	\$72,000
Total 3030 Government	\$87,000
3040 Individuals	
3041 Barreling/Park	\$58,000
3042 Board	\$48,000
3043 Patrons - Restricted	\$25,000
3044 Patrons - Sustainers	\$5,200
3045 Patron - Unrestricted	\$310,000
Total 3040 Individuals	\$446,200
Total 3000 Contributed Income	\$888,200
4000 EARNED INCOME	
4010 Production - Summer	
4011 Bar	\$55,000
4012 Concessions	\$17,000
4013 Merchandise	\$35,000
Total 4010 Production Summer	\$107,000
4100 Programs	
4110 Touring Programs	\$337,000
4200 Youth Tuition	\$64,000
Total 4110 Touring Programs	\$401,000
4300 Production 1 - Fall Production	
4310 Tickets	\$47,000
4320 Bar	\$4,500
Total 4300 Fall Production	\$51,500
4400 Production 2 - Winter Production	
4410 Tickets	\$76,000
4430 Merch	\$2,700
Total 4400 Winter Production	\$78,700
4500 Other Earned Income	
4510 Miscellaneous Income	\$9,000
4531 Special Event Tickets	\$34,000
Total 4500 Other Earned Income	\$43,000
Total 4000 Earned Income	\$681,200

Kentucky Shakespeare - 2025-2026 BUDGET

5000 IN-KIND CONTRIBUTIONS

5010 Materials and Supplies	\$4,000
5030 Services	\$8,000
Total In-Kind Contributions	\$12,000
5100 Discounts	\$16,000
TOTAL INCOME	\$1,565,400

EXPENSE

6000 ADMINISTRATION

6010 Communications - phone, Internet	\$3,000
6012 Utilities	\$11,500
6013 Security/Alarm Monitoring	\$1,200
6014 Building Maintenance	\$2,000
6020 Conferences & Staff Development	\$2,000
6030 Equipment leases (meter, copier)	\$4,600
6040 Marketing - General	\$1,000
6050 Membership and Dues	\$1,000
6060 Miscellaneous	\$750
6070 Office Supplies	\$1,000
6072 Office Cleaning	\$3,500
6072.1 Lawn Care	\$2,000
6090 Postage	\$2,000
6100 Professional Fees	
6101 Auditor	\$16,500
6102 IT/Computer	\$750
6105 Bookkeeper	\$14,000
Total Professional Fees	\$31,250
6110 Rent	
6111 Office	\$36,000
6113 Warehouse	\$18,000
Total 6110 Rent	\$54,000
6120 Refund	\$0
6130 Salaries	
6134 Payroll	\$318,000
6135 Payroll taxes	\$62,000
Total 6130 Salaries	\$380,000
6140 Service Fees and Charges	
6142 Intuit/Paycor	\$8,000
6143 PayPal	\$2,000
6145 Square	\$3,000
6146 Trinity Retirement	\$2,500
6147 Web Hosting	\$400
6148 Interest	\$500
Total 6140 Service Fees and Charges	\$16,400
6150 Subscriptions and Publications	\$1,000
Total 600 Administration	\$518,200

Kentucky Shakespeare - 2025-2026 BUDGET

6200 DEVELOPMENT

6210 Marketing	\$4,000
6220 Postage	\$2,500
6230 Special Event	\$24,000
6255 Subscriptions and Publications	\$400
Total 6200 Development	\$30,900

6300 EDUCATION

6310 Administration

6311 Housing/Tour Lodging	\$22,000
6312 Postage	\$1,000
6313 Supplies	\$8,000
Total 6310 Administration	\$31,000

6320 Conferences/Staff Development

\$3,000

6330 Labor

6331 Camp Instructor	\$18,500
6332 Camp Assistant	\$13,000
6333 Choreographer	\$750
6334 Crew	\$9,000
6335 Designer	\$4,000
6336 Dramaturg	\$750
6337 Educator - Contract	\$58,000
6338 Educator - Artist Educators	\$99,000
Total 6330 Labor	\$203,000

6350 Marketing

6351 Digital	\$3,000
6352 Printing	\$5,400
Total 6350 Marketing	\$8,400

6360 Production Materials

6361 Costumes	\$5,500
6362 Properties	\$1,000
6363 Set	\$3,500
6364 Sound	\$500
Total 6360 Production Materials	\$10,500

6370 Refunds

\$2,500

6380 Rentals

\$2,500

6390 Touring Expense

6391 Fuel and Maintenance	\$8,000
6392 Lodging	\$10,500
6393 Meal Allowance	\$6,000
6394 Van Rental - spring tour	\$5,000
6395 Mileage	\$1,200
Total Touring Expense	\$30,700

Total 6300 Education **\$291,600**

Kentucky Shakespeare - 2025-2026 BUDGET

6400 PRODUCTION 1 - FALL

6410 Front of House Expense

6411 Bar	\$1,500
6412 Merchandise	\$2,300
Total 6410 Front of House Expens	\$3,800

6420 Labor

6421 Actors	\$21,250
6422 Crew	\$7,450
6423 Designers	\$9,200
Total Labor	\$37,900

6430 Production - Fall Marketing **\$4,000**

6440 Production - Fall Materials

6441 Costumes	\$2,000
6442 Lighting	\$500
6443 Properties	\$1,000
6444 Set	\$3,000
6445 Sound	\$100
6455 Rights	\$2,000
Total 6400 Production Fall Materi	\$8,600

Total 6400 Production 1 - Fall \$54,300

6460 PRODUCTION 2 - WINTER

6470 Labor

6471 Actors	\$23,600
6472 Crew	\$7,500
6473 Designers	\$10,100
Total 6470 Labor	\$41,200

6480 Marketing **\$7,100**

6485 Production Materials

6486 Costumes	\$2,500
6488 Props	\$200
6489 Set	\$3,500
6499.6 Rights	\$2,000
Merch	\$1,900
Total 6485 Production Materials	\$10,100

Number TBD Space Rental **\$19,300**

Total 6400 Production 2 - WINTER \$77,700

6500 PRODUCTION - SUMMER

6510 Administration **\$500**

6520 Equipment Rental **\$40,000**

6530 Front of House Expense

6531 Bar	\$17,000
6532 Merchandise	\$15,500
6533 Permits and Licenses	\$700
6534 Security	\$10,500
6535 FOH Expense - Other	\$3,000

Kentucky Shakespeare - 2025-2026 BUDGET

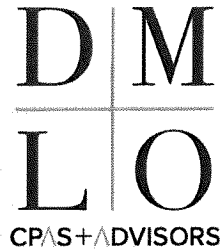
	Total 6530 Front of House Expens	\$46,700
6550 Housing		\$5,000
6560 Labor		
	6561 Actors	\$90,000
	6562 Crew	\$94,000
	6563 Designers	\$31,000
	6564 Choreographers	\$2,000
	6565 Dramaturg, Coaches	\$2,000
	6567 Interns	\$51,000
	6569 Labor - Other	\$2,400
	Total 6560 Labor	\$272,400
6570 Marketing		
	6571 Broadcast - Radio/TV	\$2,500
	6572 Digital	\$8,500
	6573 Photography/Video	\$2,500
	6574 Printing	\$3,500
	Total 6570 Marketing	\$17,000
6580 Production Materials		
	6581 Costumes	\$14,000
	6582 Lighting	\$3,000
	6583 Properties	\$1,500
	6584 Set	\$10,000
	6585 Sound	\$2,000
	6886 Production Management	\$0
	6587 Stage Management	\$800
	Total 6580 Production Materials	\$31,300
6590 Postage		\$0
Total Production - Summer		\$412,900
7000 OTHER TYPES OF EXPENSES		
7010 Insurances		
	7011 Insurance D&O	\$4,043
	7012 Employee Health	\$61,212
	7013 General Liability	\$30,000
	7014 Insurance - Workers Comp	\$6,500
Total 7010 Insurances		\$101,755
	7020 Sales and Use Tax	\$7,500
	7044 Vehicle Property Tax	\$300
7030 Other Payroll Expenses		
	7032 401K Match	\$8,000
Total 7030 Payroll Expense		\$8,000
Total 7000 Other Types of Expenses		\$117,555
Total Expense		\$1,503,155
Net Operating Income		\$62,245

Statement of Financial Position
Kentucky Shakespeare, Inc.
As of March 6, 2026

Distribution account	Total
Assets	
Current Assets	
Bank Accounts	
1000 Republic Bank - Checking	97,353.48
1015 Republic Bank - Fundraising	1.00
Total for Bank Accounts	\$97,354.48
Accounts Receivable	
1100 Accounts Receivable	238,125.15
Total for Accounts Receivable	\$238,125.15
Other Current Assets	
1200 Undeposited Funds	2,996.79
1240 Prepaid Expenses	1,776.99
1500 Right of Use Asset	234,165.51
Total for Other Current Assets	\$238,939.29
Total for Current Assets	\$574,418.92
Fixed Assets	
1300 Furniture and Equipment	
1305 Property & Equipment	98,378.21
1310 KSF Equipment	33,219.07
1311 Vehicles	59,996.00
1312 Accum Deprec Vehicles	-56,464.17
1313 Lighting & Sound Equipment	125,672.24
1320 Accum Deprec Equipment	-213,199.85
1321 Accum Deprec Furn/Fix	-2,143.02
1330 Leasehold Improvements	914,410.97
1340 Accum Deprec Leaseholds	-540,432.79
1350 Furniture & Fixtures	4,317.04
Total for 1300 Furniture and Equipment	\$423,753.70
Total for Fixed Assets	\$423,753.70
Other Assets	
8000 Discrepancy Correction	13,161.89
Total for Other Assets	\$13,161.89
Total for Assets	\$1,011,334.51
Liabilities and Equity	
Liabilities	
Current Liabilities	
Accounts Payable	
2000 Accounts Payable	600.00

Total for Accounts Payable	\$600.00
Credit Cards	
Total for Credit Cards	\$25,374.89
Other Current Liabilities	
2101 Sales & Use Tax Payable	2,001.01
2111 Operating Lease Liability - Short Term	40,848.72
2200 Payroll Tax Liabilities	0.00
2232 KY State Unemployment	-319.76
Total for 2200 Payroll Tax Liabilities	-\$319.76
2222 Current Maturities of LTD	3,402.59
2270 Employee 403B Retire Plan	0.00
2271 403B Company Match	1,995.73
Total for 2270 Employee 403B Retire Plan	\$1,995.73
2273 Payroll Liabilities	14,301.84
2275 American Funds	-14,142.25
Total for 2273 Payroll Liabilities	\$159.59
2400 Accrued Interest - SBA Loan	11,163.50
Total for Other Current Liabilities	\$59,251.38
Total for Current Liabilities	\$85,226.27
Long-term Liabilities	
2300 Long Term Liabilities	49.62
2311 SBAD Loan	128,008.41
2312 CL SBA Loan	-641.00
2335 Operating Lease Liability - Long Term	198,349.83
Total for 2300 Long Term Liabilities	\$325,766.86
Total for Long-term Liabilities	\$325,766.86
Total for Liabilities	\$410,993.13
Equity	
2340 Opening Balance Equity	447,233.95
32000 2370 Unrestricted Net Assets	4,268.96
Net Income	135,205.38
Total for Equity	\$586,708.29
Total for Liabilities and Equity	\$997,701.42

Accrual Basis Friday, March 06, 2026 03:23 PM GMTZ



February 12, 2026

Mr. Matt Wallace
Kentucky Shakespeare, Inc.
616 Myrtle Street
Louisville, KY 40208

Re: Public Disclosure of Exempt Organization Income Tax Return(s)

The attached copy of your organization's Exempt Organization Income Tax Return(s) is to be used as your Public Disclosure Copy. As you may be aware, the income tax law now requires tax exempt organizations to provide and/or make available copies of their income tax returns for the most recent three years to any person requesting them. In addition, the organization must provide and/or make available a copy of its Application for Recognition of Tax Exempt Status (Form 1023) if the organization had a copy in its files in July 1987 or later.

All information in the Exempt Organization Income Tax Return(s) and Form 1023 must be provided, except donors' names may be masked on Schedule B, if applicable.

We have prepared the attached "Public Disclosure" copy of the Exempt Organization Income Tax Return(s) for your organization to use in making copies when requested, and we recommend that you assign someone on your staff to establish a procedure for addressing requests for copies. The IRS may impose significant penalties when organizations do not provide copies of their Exempt Organization Income Tax Return(s) and Form 1023.

Should you have questions regarding the public disclosure requirements, please feel free to call us.

Yours very truly,

A handwritten signature in cursive script that reads "Deming, Malone, Lussary & Ostroff".

Enclosures

CREATE A BETTER FUTURE.

9300 Shelbyville Road, Suite 1100
Louisville, Kentucky 40222
502.426.9660

www.dmllo.com

702 North Shore Drive, Suite 500
Jeffersonville, Indiana 47130
812.945.5236

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form 990

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2024

Do not enter social security numbers on this form as it may be made public.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A For the 2024 calendar year, or tax year beginning SEP 1, 2024 and ending AUG 31, 2025

Header section containing organization name (KENTUCKY SHAKESPEARE, INC.), EIN (61-6036654), address (616 MYRTLE ST, LOUISVILLE, KY 40208), and principal officer (MATT WALLACE).

Part I Summary

Table with 3 columns: Description, Prior Year, Current Year. Rows include Revenue (Total: 1,511,540), Expenses (Total: 1,530,823), and Net Assets or Fund Balances (End of Year: 418,250).

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature and preparer information section including officer signature (MATT WALLACE) and preparer information (CHRISTINE N KOENIG, DEMING MALONE LIVESAY & OSTROFF PSC).

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:
GROUNDING IN THE WORKS OF SHAKESPEARE, WE ENRICH COMMUNITIES THROUGH ACCESSIBLE, INCLUSIVE, PROFESSIONAL THEATRE EXPERIENCES THAT EDUCATE, INSPIRE, AND ENTERTAIN DIVERSE AUDIENCES.

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

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

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

4a (Code:) (Expenses \$ 829,700. including grants of \$) (Revenue \$ 237,372.)
THE OFFICIAL SHAKESPEARE FESTIVAL OF THE COMMONWEALTH OF KENTUCKY, KENTUCKY SHAKESPEARE, INC. IS A PROFESSIONAL THEATRE COMPANY PRODUCING A SEASON OF WILLIAM SHAKESPEARE PLAYS EACH SUMMER. KENTUCKY SHAKESPEARE FESTIVAL IN CENTRAL PARK IS THE LONGEST RUNNING FREE, NON-TICKETED SHAKESPEARE FESTIVAL IN THE UNITED STATES. OTHER PERFORMANCES BY KENTUCKY SHAKESPEARE, INC. INCLUDE SHAKESPEARE IN THE PARKS TOUR, SHAKESPEARE IN THE LIBRARIES TOUR, AND INDOOR PRODUCTIONS.

4b (Code:) (Expenses \$ 515,496. including grants of \$) (Revenue \$ 357,565.)
THE ORGANIZATION OPERATES AN EDUCATIONAL OUTREACH PROGRAM OFFERED THROUGHOUT THE KENTUCKIANA AREA WITH PROGRAMS FOR SCHOOLS, ADULTS, VETERANS, AND VULNERABLE GROUPS WITHIN THE COMMUNITY. KENTUCKY SHAKESPEARE, INC. IS THE MOST COMPREHENSIVE IN-SCHOOL ARTS EDUCATION PROVIDER IN THE COMMONWEALTH OF KENTUCKY.

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

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

4e Total program service expenses 1,345,196.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Rows include questions 1 through 21 regarding organizational requirements and schedules A through H.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question, Yes, No. Rows 22-38 covering various IRS requirements like grants, compensation, tax-exempt bonds, excess benefits, controlled entities, and contributions.

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with 3 columns: Question, Yes, No. Rows 1a-1c regarding Form 1096, Forms W-2G, and backup withholding rules.

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

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 17 regarding employee reporting, tax returns, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

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

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (23); 1b Enter the number of voting members included on line 1a, above, who are independent (23); 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? (X); 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? (X); 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? (X); 5 Did the organization become aware during the year of a significant diversion of the organization's assets? (X); 6 Did the organization have members or stockholders? (X); 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? (X); 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? (X); 8a Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? (X); 8b Each committee with authority to act on behalf of the governing body? (X); 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O (X).

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? (X); 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? (X); 11b Describe on Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 (X); 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done; 13 Did the organization have a written whistleblower policy? (X); 14 Did the organization have a written document retention and destruction policy? (X); 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?; 15a The organization's CEO, Executive Director, or top management official (X); 15b Other officers or key employees of the organization (X); 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? (X); 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed KY
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
[] Own website [] Another's website [X] Upon request [] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records
KENTUCKY SHAKESPEARE, INC. - (502) 574-9900
616 MYRTLE ST, LOUISVILLE, KY 40208

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

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

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MATT WALLACE PRODUCING ARTISTIC DIRECTOR	40.00			X				109,769.	0.	14,722.
(2) ANYA BOND-BECKLEY BOARD CHAIR	1.00	X		X				0.	0.	0.
(3) KERRY WANG DIRECTOR	1.00	X						0.	0.	0.
(4) LINCOLN SNYDER SECRETARY	1.00	X		X				0.	0.	0.
(5) BRAD COMER TREASURER	1.00	X		X				0.	0.	0.
(6) EMILEE CRAWFORD DIRECTOR	1.00	X						0.	0.	0.
(7) JONESE FRANKLIN DIRECTOR	1.00	X						0.	0.	0.
(8) LASHONDRA HOOD DIRECTOR	1.00	X						0.	0.	0.
(9) TRACY E. K'MEYER DIRECTOR	1.00	X						0.	0.	0.
(10) STEPHEN KUBIATOWSKI DIRECTOR	1.00	X						0.	0.	0.
(11) PAULA LOCKHART DIRECTOR	1.00	X						0.	0.	0.
(12) CHARLEY NOLD DIRECTOR	1.00	X						0.	0.	0.
(13) JAVAN REED DIRECTOR	1.00	X						0.	0.	0.
(14) JODI SMILEY DIRECTOR	1.00	X						0.	0.	0.
(15) RANDALL CALDWELL DIRECTOR	1.00	X						0.	0.	0.
(16) ALAN K. MACDONALD DIRECTOR	1.00	X						0.	0.	0.
(17) PAMELA HOWLERDA DIRECTOR	1.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) KAY MADRICK IMMEDIATE PAST CHAIR	1.00	X		X				0.	0.	0.
(19) MICHELLE JARBOE VICE CHAIR	1.00	X		X				0.	0.	0.
(20) SARA SMITH BOWMAN DIRECTOR	1.00	X						0.	0.	0.
(21) MEGAN GREENWALL CAPLAN DIRECTOR	1.00	X						0.	0.	0.
(22) ELIZABETH A. CHERRY DIRECTOR	1.00	X						0.	0.	0.
(23) MCKENZIE GARY DIRECTOR	1.00	X						0.	0.	0.
(24) CRAIGH SCHMITT DIRECTOR	1.00	X						0.	0.	0.
1b Subtotal								109,769.	0.	14,722.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								109,769.	0.	14,722.

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

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

Section B. Independent Contractors

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

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

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

Part VIII Statement of Revenue

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

				(A)	(B)	(C)	(D)
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a 119,913.				
	b	Membership dues	1b				
	c	Fundraising events	1c 16,835.				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e 130,000.				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f 656,920.				
	g	Noncash contributions included in lines 1a-1f	1g \$ 4,000.				
	h	Total. Add lines 1a-1f		923,668.			
Program Service Revenue	2 a	EDUCATION PROGRAMS	Business Code 711190	357,565.	357,565.		
	b	PRODUCTIONS	711190	230,808.	230,808.		
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		588,373.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)					
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6 a	Gross rents	(i) Real				
			(ii) Personal				
	6 b	Less: rental expenses					
	6 c	Rental income or (loss)					
	d	Net rental income or (loss)					
	7 a	Gross amount from sales of assets other than inventory	(i) Securities				
			(ii) Other				
	7 b	Less: cost or other basis and sales expenses					
7 c	Gain or (loss)						
d	Net gain or (loss)						
8 a	Gross income from fundraising events (not including \$ 16,835. of contributions reported on line 1c). See Part IV, line 18						
			14,718.				
			21,783.				
8 b	Less: direct expenses						
c	Net income or (loss) from fundraising events		-7,065.		-7,065.		
9 a	Gross income from gaming activities. See Part IV, line 19						
9 b	Less: direct expenses						
c	Net income or (loss) from gaming activities						
10 a	Gross sales of inventory, less returns and allowances						
10 b	Less: cost of goods sold						
c	Net income or (loss) from sales of inventory						
Miscellaneous Revenue	11 a	OTHER INCOME	Business Code 711190	6,564.	6,564.		
	b						
	c						
	d	All other revenue					
	e	Total. Add lines 11a-11d		6,564.			
12	Total revenue. See instructions		1,511,540.	594,937.	0.	-7,065.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	128,492.	70,678.	28,907.	28,907.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	568,809.	557,339.	2,851.	8,619.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	34,853.	31,401.	1,510.	1,942.
10 Payroll taxes	63,989.	57,632.	2,908.	3,449.
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	16,800.		16,800.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	11,593.		11,593.	
12 Advertising and promotion	47,495.	40,232.		7,263.
13 Office expenses	72,274.	44,246.	24,836.	3,192.
14 Information technology				
15 Royalties				
16 Occupancy	52,148.	42,450.	8,979.	719.
17 Travel	31,963.	31,963.		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	2,150.		2,150.	
20 Interest	13,711.		13,711.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	87,419.	82,174.	5,245.	
23 Insurance	41,862.	37,676.	4,186.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a PRODUCTION EXPENSE	272,411.	272,411.		
b EDUCATION EXPENSE	76,318.	76,318.		
c MISCELLANEOUS	5,880.		5,880.	
d DUES, SUBSCRIPTIONS	2,656.	676.	1,980.	
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	1,530,823.	1,345,196.	131,536.	54,091.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	46,531.	1	63,009.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	210,257.	3	214,233.
	4 Accounts receivable, net	6,679.	4	9,635.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	1,777.	9	1,777.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,227,952.		
	b Less: accumulated depreciation	10b 814,364.	462,589.	10c 413,588.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	234,166.	15	191,800.
16 Total assets. Add lines 1 through 15 (must equal line 33)	961,999.	16	894,042.	
Liabilities	17 Accounts payable and accrued expenses	119,637.	17	110,214.
	18 Grants payable		18	
	19 Deferred revenue	15,630.	19	17,228.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties	150,000.	23	150,000.
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	239,199.	25	198,350.
	26 Total liabilities. Add lines 17 through 25	524,466.	26	475,792.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	260,876.	27	185,014.
	28 Net assets with donor restrictions	176,657.	28	233,236.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
32 Total net assets or fund balances	437,533.	32	418,250.	
33 Total liabilities and net assets/fund balances	961,999.	33	894,042.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,511,540.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,530,823.
3	Revenue less expenses. Subtract line 2 from line 1	3	-19,283.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	437,533.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	418,250.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

Form 990 (2024)

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2024

Open to Public
Inspection

Name of the organization KENTUCKY SHAKESPEARE, INC.	Employer identification number 61-6036654
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Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

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

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

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1177978.	937,153.	858,907.	896,545.	923,668.	4794251.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	1177978.	937,153.	858,907.	896,545.	923,668.	4794251.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						205,538.
6 Public support. Subtract line 5 from line 4.						4588713.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7 Amounts from line 4	1177978.	937,153.	858,907.	896,545.	923,668.	4794251.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	8,700.	6,621.	14,309.	2,234.	6,564.	38,428.
11 Total support. Add lines 7 through 10						4832679.
12 Gross receipts from related activities, etc. (see instructions)					12	2,013,933.

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f))	14	94.95 %
15 Public support percentage from 2023 Schedule A, Part II, line 14	15	95.32 %

16a **33 1/3% support test - 2024.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b **33 1/3% support test - 2023.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a **10% -facts-and-circumstances test - 2024.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization

b **10% -facts-and-circumstances test - 2023.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2023 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2023 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2024. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2023. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
2 Activities Test. Answer lines 2a and 2b below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3 Parent of Supported Organizations. Answer lines 3a and 3b below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No," provide details in Part VI.</i>		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

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

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

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

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 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		(A) Prior Year	Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	

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

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2024 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2024	(iii) Distributable Amount for 2024
1	Distributable amount for 2024 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2024 (reasonable cause required - explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2024		
a	From 2019		
b	From 2020		
c	From 2021		
d	From 2022		
e	From 2023		
f	Total of lines 3a through 3e		
g	Applied to under distributions of prior years		
h	Applied to 2024 distributable amount		
i	Carryover from 2019 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2024 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2024 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.		
6	Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	Excess distributions carryover to 2025. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2020		
b	Excess from 2021		
c	Excess from 2022		
d	Excess from 2023		
e	Excess from 2024		

Schedule A (Form 990) 2024

Part VI

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

Lined area for supplemental information.

Schedule B (Form 990)

(Rev. December 2024) Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

Name of the organization

KENTUCKY SHAKESPEARE, INC.

Employer identification number

61-6036654

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

[X] 501(c)(3) (enter number) organization

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

[] 527 political organization

Form 990-PF

[] 501(c)(3) exempt private foundation

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

[] 501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

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

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

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

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

Name of organization KENTUCKY SHAKESPEARE, INC.	Employer identification number 61-6036654
---	---

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	<hr/> <hr/> <hr/>	\$ <u>119,913.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>2</u>	<hr/> <hr/> <hr/>	\$ <u>30,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>3</u>	<hr/> <hr/> <hr/>	\$ <u>55,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>4</u>	<hr/> <hr/> <hr/>	\$ <u>50,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>5</u>	<hr/> <hr/> <hr/>	\$ <u>25,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>6</u>	<hr/> <hr/> <hr/>	\$ <u>20,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization KENTUCKY SHAKESPEARE, INC.	Employer identification number 61-6036654
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>7</u>	<hr/> <hr/> <hr/>	\$ <u>45,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>8</u>	<hr/> <hr/> <hr/>	\$ <u>25,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization KENTUCKY SHAKESPEARE, INC.	Employer identification number 61-6036654
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

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

Name of organization KENTUCKY SHAKESPEARE, INC.	Employer identification number 61-6036654
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047

**Open to Public
 Inspection**

Name of the organization

KENTUCKY SHAKESPEARE, INC.

Employer identification number

61-6036654

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included on line 2a	2c
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year _____

4 Number of states where property subject to conservation easement is located _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year _____

8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.

(i) Revenue included on Form 990, Part VIII, line 1 \$ _____

(ii) Assets included in Form 990, Part X \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 \$ _____

b Assets included in Form 990, Part X \$ _____

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

Schedule D (Form 990) (Rev. 12-2024)

LHA 432051 01-02-25

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

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

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

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

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

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

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

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

Part VI Land, Buildings, and Equipment

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		914,411.	548,489.	365,922.
d Equipment		253,555.	209,411.	44,144.
e Other		59,986.	56,464.	3,522.
Total. Add lines 1a through 1e. (Column (c) must equal Form 990, Part X, line 10c, column (B))				413,588.

Part VII Investments - Other Securities

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

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

Part VIII Investments - Program Related

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

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

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) OPERATING LEASE RIGHT-OF-USE ASSET	191,800.
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	191,800.

Part X Other Liabilities

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) OPERATING LEASE LIABILITY	198,350.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	198,350.

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

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

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

1	Total revenue, gains, and other support per audited financial statements	1	1,526,605.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	8,000.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	8,000.
3	Subtract line 2e from line 1	3	1,518,605.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	-7,065.
c	Add lines 4a and 4b	4c	-7,065.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	1,511,540.

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

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

1	Total expenses and losses per audited financial statements	1	1,545,888.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	8,000.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	7,065.
e	Add lines 2a through 2d	2e	15,065.
3	Subtract line 2e from line 1	3	1,530,823.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	1,530,823.

Part XIII Supplemental Information

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

PART X, LINE 2:

THE ORGANIZATION IS EXEMPT FROM FEDERAL, STATE AND LOCAL INCOME TAXES AS A NOT-FOR-PROFIT ORGANIZATION AS DESCRIBED UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. THE ORGANIZATION FILES AN INFORMATIONAL TAX RETURN IN THE U.S. FEDERAL JURISDICTION. HOWEVER, INCOME FROM CERTAIN ACTIVITIES NOT DIRECTLY RELATED TO THE ORGANIZATION'S TAX EXEMPT PURPOSE MAY BE SUBJECT TO TAXATION AS UNRELATED BUSINESS INCOME.

AS OF AUGUST 31, 2025 AND 2024, THE ORGANIZATION DID NOT HAVE ANY ACCRUED INTEREST OR PENALTIES RELATED TO INCOME TAX LIABILITIES, AND NO INTEREST OR PENALTIES HAVE BEEN CHARGED TO OPERATIONS FOR THE YEARS THEN ENDED.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSES -7,065.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSES 7,065.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more 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 col. (c))
	SHAKESPEARE IN LOVE GALA		NONE	
Revenue	(event type)	(event type)	(total number)	
1 Gross receipts	28,469.			28,469.
2 Less: Contributions	16,835.			16,835.
3 Gross income (line 1 minus line 2)	11,634.			11,634.
Direct Expenses	4 Cash prizes			
	5 Noncash prizes			
	6 Rent/facility costs	1,292.		1,292.
	7 Food and beverages	16,232.		16,232.
	8 Entertainment	850.		850.
	9 Other direct expenses	3,409.		3,409.
10 Direct expense summary. Add lines 4 through 9 in column (d)				21,783.
11 Net income summary. Subtract line 10 from line 3, column (d)				-10,149.

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue				
1 Gross revenue				
Direct Expenses	2 Cash prizes			
	3 Noncash prizes			
	4 Rent/facility costs			
	5 Other direct expenses			
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
7 Direct expense summary. Add lines 2 through 5 in column (d)				
8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain: _____

**SCHEDULE O
(Form 990)**

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization

KENTUCKY SHAKESPEARE, INC.

Employer identification number

61-6036654

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

FORM 990 IS REVIEWED BY MANAGEMENT AND AGREED TO AUDITED FINANCIAL STATEMENTS PRIOR TO FILING. THE FORM 990 IS PRESENTED TO THE BOARD OF DIRECTORS FOR APPROVAL BEFORE FILING THE RETURN.

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

THE PRODUCING ARTISTIC DIRECTOR'S COMPENSATION IS PER AN EMPLOYMENT AGREEMENT APPROVED BY THE BOARD OF DIRECTORS.

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

THE ORGANIZATION MAKES ITS ARTICLES OF INCORPORATION AND BYLAWS AVAILABLE UPON REQUEST.

FORM 990, PART XII, LINE 2C:

THE ORGANIZATION'S BOARD OF DIRECTORS ASSUMES RESPONSIBILITY FOR THE SELECTION OF THE INDEPENDENT ACCOUNTANTS AND OVERSIGHT OF THE AUDIT OF THE FINANCIAL STATEMENTS.

**Application for Extension of Time To File an Exempt Organization
Return or Excise Taxes Related to Employee Benefit Plans**

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

File a separate application for each return.
Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Part I - Identification

Type or Print	Name of exempt organization, employer, or other filer, see instructions. KENTUCKY SHAKESPEARE, INC.	Taxpayer identification number (TIN) 61-6036654
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 616 MYRTLE ST	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. LOUISVILLE, KY 40208	

Enter the Return Code for the return that this application is for (file a separate application for each return) 01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 4720 (other than individual)	09
Form 4720 (individual)	03	Form 5227	10
Form 990-PF	04	Form 6069	11
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 8870	12
Form 990-T (trust other than above)	06	Form 5330 (individual)	13
Form 990-T (corporation)	07	Form 5330 (other than individual)	14
Form 1041-A	08	Form 990-T (governmental entities)	15

• After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330.

• If this application is for an extension of time to file Form 5330, you must enter the following information.

Plan Name _____
Plan Number _____
Plan Year Ending (MM/DD/YYYY) _____

MAILED
JAN 07 2026
DMLO

Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions)

The books are in the care of **KENTUCKY SHAKESPEARE, INC.**
616 MYRTLE ST - LOUISVILLE, KY 40208

Telephone No. **(502) 574-9900** Fax No. _____

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **JULY 15**, 20 **26**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 calendar year 20 _____ or
 tax year beginning **SEP 1**, 20 **24**, and ending **AUG 31**, 20 **25**

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8868** (Rev. 1-2025)

**MAIL TO: INTERNAL REVENUE SERVICE
MAIL STOP 6054
1973 N RULON WHITE BLVD.
OGDEN, UT 84201-0045**

10680

Commonwealth of Kentucky

Department of State



Office of Secretary of State

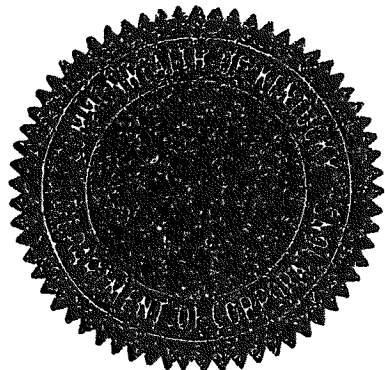
HENRY H. CARTER, SECRETARY
DOMESTIC CORPORATION DEPARTMENT
NON-STOCK CORPORATION

I, HENRY H. CARTER, Secretary of the State of Kentucky, hereby certify that Articles of Incorporation of the

~~THE COMMITTEE FOR SHAK SPOON IN GENERAL PARK, INC.~~ (Louisville, Kentucky)

has this day been filed in my office.

It appearing from said Articles of Incorporation that the said Corporation has no capital stock, and no private pecuniary profit is to be derived therefrom, the said Corporation is not required by law to pay a tax on organization; and it further appearing that the aforesaid Corporation has complied with all the requirements of the law, this certificate is issued as evidence of the fact that the said Corporation is now authorized and empowered to do business in this State under its charter, subject to the restrictions imposed by the statutes of Kentucky.



SECRETARY OF STATE

Given under my hand as Secretary of State, this 8th day of May 1963

By Henry H. Carter
Secretary of State

A. J. Lyon
~~Assistant Secretary of State~~

ARTICLES OF INCORPORATION
OF
THE COMMITTEE FOR SHAKESPEARE
IN CENTRAL PARK, INC.

Pursuant to the provisions of KRS 273.010 to 273.150, the undersigned persons do hereby organize a corporation for educational purposes, having no capital stock, from which no pecuniary profit is to be derived, as follows:

ARTICLE I

The name of the corporation will be:

THE COMMITTEE FOR SHAKESPEARE IN CENTRAL PARK, INC.

Hereinafter referred to as "The Committee".

ARTICLE II

The principal office of the corporation will be at 200 West Chestnut Street, Louisville, Kentucky.

ARTICLE III

The agent for service of process upon the corporation will be ELIZABETH HOERTH, whose post office address is 609 Marion E. Taylor Building, Louisville 2, Kentucky.

ARTICLE IV

The aims and objectives of the corporation will be to foster, aid and encourage the production of the plays of William Shakespeare for the educational values to be derived therefrom by young and old alike from viewing or participating in the staging and interpretation of this great and continuing contribution to our culture.

ARTICLE V

The duration of the life of the corporation shall be perpetual, or until terminated by its own action.

ARTICLE VI

The names and post office addresses of three (3) of the natural persons over twenty-one (21) years of age who are associated in the formation of this corporation, and who have subscribed to these ARTICLES as incorporators are:

Stuart R. Paine, 131 Breckenridge Lane, Louisville 7, Ky.

C. Douglas Ramey, 1011 South 5th St., Louisville 3, Ky.

Elizabeth Hoerth, 609 Marion E. Taylor Bldg., Louisville 2, Ky.

ARTICLE VII

After these Articles are filed and recorded and a certificate of that fact is issued by the Secretary of State of Kentucky, the undersigned incorporators are authorized to call a meeting of those persons known to them to have agreed tentatively to serve on THE COMMITTEE FOR SHAKESPEARE IN CENTRAL PARK, INC., for the purposes of organizing THE COMMITTEE to function for the accomplishment of its objectives and to adopt rules for its government and operation.

IN TESTIMONY WHEREOF, witness the hands of the undersigned incorporators on this 6th day of May, 1963.

Stuart R. Paine
C. Douglas Ramey
Elizabeth Hoerth

STATE OF KENTUCKY)
(SS
COUNTY OF JEFFERSON)

I, the undersigned, a Notary Public in and for the State and County aforesaid, hereby certify that the foregoing Articles of Incorporation of THE COMMITTEE FOR SHAKESPEARE IN CENTRAL PARK, INC., were this day produced to me in my office, and acknowledged and delivered by Stuart R. Paine, C. Douglas Ramey, and Elizabeth Hoerth, parties thereto, to be their act and deed.

WITNESS my hand this 6th day of May, 1963.

My Commission expires April 3, 1966.

Herbert H. Mowley
Notary Public
Jefferson County, Kentucky

ORIGINAL COPY
FILED AND RECORDED
Henry H. Carter

MAY 6 1963

SECRETARY OF STATE OF KENTUCKY
FRANKFORT, KENTUCKY
BY [Signature]

RESTATED ARTICLES OF INCORPORATION
OF
THE KENTUCKY SHAKESPEARE FESTIVAL, INC.
A NOT FOR PROFIT CORPORATION

Pursuant to the provisions of KRS 273 et seq., the undersigned persons do hereby certify that the above corporation has restated its Articles of Incorporation.

The foregoing articles are accurate, supersede any previous articles, and were adopted by a majority vote of the Board of Directors.

The undersigned further certifies that Articles I, II, III, IV, V, VII, and VIII are amended articles and that except for these amendments, these Restated Articles of Incorporation set forth without change corresponding provisions of the Articles and that they supersede said Articles of Incorporation as amended:

ARTICLE I

The name of the corporation will be: Kentucky Shakespeare Festival, Inc., and shall do business as Kentucky Shakespeare Festival. The corporation was previously listed as The Committee for Shakespeare in Central Park, Inc.

ARTICLE II

The principal office of the corporation will be at 1114 S. Third St.,
Louisville, Kentucky 40208.

ARTICLE III

The agent for service of process upon the corporation will be Curt L.
Tofteland, whose mailing address is the principal office of the corporation above.

ARTICLE IV

The purpose of the corporation will be to foster, aid, and encourage the
production of the plays of William Shakespeare for the educational values to be
derived thereof by young and old alike from viewing or participating in the
staging and interpretation of this great and continuing contribution to our culture.
The corporation is organized for any lawful purpose and is irrevocably dedicated
and operating exclusively for non-profit purposes.

The corporation is further organized and operated exclusively under the
provisions of Section 501 (C) (3) of the Internal Revenue Code and is
organized and operated exclusively for any religious, charitable, scientific testing for
public safety, literary or educational purposes. The organization is expressly
prohibited from devoting more than an insubstantial part of its activities in an
attempt to influence legislation, directly or indirectly participating in any political
campaign on behalf of, or in opposition to any candidate for public office, or
having objectives and engaging in activities which characterize it as an "action"
organization.

Further, the organization is not a foundation, etc., pursuant to Section 509 (a) of the Internal Revenue Code.

ARTICLE V

In the event of dissolution of the Corporation, the Board of Directors shall, after paying or making provision for the payment of all liabilities of the Corporation, dispose of all assets of the Corporation exclusively for the purposes of the Corporation, in such manner, or to such organizations organized and operated exclusively for charitable or educational purposes as shall at the time qualify as an exempt organization under Section 501 (c) (3) of the Internal Revenue Code (or corresponding provisions of any later Federal tax laws), as the Board of Directors shall determine.

The remaining assets, if any, shall be disposed of by the Circuit Court of the County in which the principal office for the Corporation is then located, exclusively for such purposes or to such organizations as said Court shall determine are organized and operated exclusively for such purposes.

ARTICLE VI

The duration of the life of the corporation shall be perpetual or until terminate by its own action.

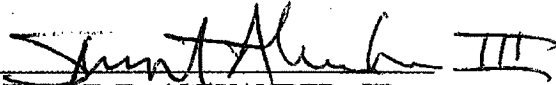
ARTICLE VII

No Director of the corporation shall be liable for monetary damages for breach of his or her duty as a Director except in the manner provided under KRS 273.248.

The above Restated Articles of Incorporation were adopted by resolution of the Board of Directors and submitted to a vote of the Directors at a special meeting. A written notice of which setting forth the proposed amendments was given to the Directors and that the above amendments were approved by a majority of the membership.

ARTICLE VIII

The corporation shall be governed by its By-laws.


STUART E. ALEXANDER, III
CO- CHAIR STRATEGIC PLANNING
KENTUCKY SHAKESPEARE FEST.
BOARD OF DIRECTORS

Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

**Give form to the
requester. Do not
send to the IRS.**

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	<p>1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)</p> <p>Kentucky Shakespeare, Inc.</p>	
	<p>2 Business name/disregarded entity name, if different from above.</p>	
	<p>3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes.</p> <p><input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate</p> <p><input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) _____</p> <p>Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner.</p> <p><input checked="" type="checkbox"/> Other (see instructions) not-for-profit charitable organization</p>	<p>4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____</p> <p style="text-align: right;"><i>(Applies to accounts maintained outside the United States.)</i></p>
	<p>3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions <input type="checkbox"/></p>	
	<p>5 Address (number, street, and apt. or suite no.). See instructions.</p> <p>616 Myrtle Street</p>	<p>Requester's name and address (optional)</p>
	<p>6 City, state, and ZIP code</p> <p>Louisville, KY 40208</p>	
	<p>7 List account number(s) here (optional)</p>	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Social security number									
or									
Employer identification number									
6	1	-	6	0	3	6	6	5	4

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here Signature of U.S. person

Date **04/17/2026**

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

KENTUCKY SHAKESPEARE, INC.
FINANCIAL STATEMENTS
Years Ended August 31, 2025 and 2024

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Independent Auditors' Report	1 and 2
Financial Statements	
Statements of financial position	3 and 4
Statements of activities	5
Statements of functional expenses	6
Statements of cash flows	7 and 8
Notes to financial statements	9 - 17



Independent Auditors' Report

To the Board of Directors
Kentucky Shakespeare, Inc.
Louisville, Kentucky

Opinion

We have audited the accompanying financial statements of Kentucky Shakespeare, Inc. (a not-for-profit organization), which comprise the statements of financial position as of August 31, 2025 and 2024, and the related statements of activities, functional expenses, and cash flows for the years then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Kentucky Shakespeare, Inc. as of August 31, 2025 and 2024, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Kentucky Shakespeare, Inc. and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Kentucky Shakespeare, Inc.'s ability to continue as a going concern within one year after the date that the financial statements are available to be issued.

Auditors' Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Kentucky Shakespeare, Inc.'s internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Kentucky Shakespeare, Inc.'s ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control related matters that we identified during the audit.

Deming, Malone, Liversay & Petroff

Louisville, Kentucky
January 30, 2026

KENTUCKY SHAKESPEARE, INC.

STATEMENTS OF FINANCIAL POSITION

August 31, 2025 and 2024

Assets	<u>2025</u>	<u>2024</u>
Current Assets		
Cash and cash equivalents	\$ 63,009	\$ 46,531
Grants receivable	214,233	210,257
Other receivables	9,635	6,679
Prepaid expenses	<u>1,777</u>	<u>1,777</u>
Total current assets	<u>288,654</u>	<u>265,244</u>
 Property and Equipment		
Leasehold improvements	914,411	914,411
Vehicles	59,986	59,986
Furniture, fixtures and equipment	<u>253,555</u>	<u>221,069</u>
	1,227,952	1,195,466
Less accumulated depreciation	<u>814,364</u>	<u>732,877</u>
	<u>413,588</u>	<u>462,589</u>
 Operating lease right-of-use asset	 <u>191,800</u>	 <u>234,166</u>
 Total assets	 <u>\$ 894,042</u>	 <u>\$ 961,999</u>

See Notes to Financial Statements.

KENTUCKY SHAKESPEARE, INC.

STATEMENTS OF FINANCIAL POSITION

August 31, 2025 and 2024

Liabilities and Net Assets	<u>2025</u>	<u>2024</u>
Current Liabilities		
Accounts payable	\$ 97,074	\$ 114,170
Accrued expenses	13,140	5,467
Deferred revenue	17,228	15,630
Current maturities of note payable	3,595	
Current portion of operating lease liability	<u>38,089</u>	<u>40,849</u>
Total current liabilities	<u>169,126</u>	<u>176,116</u>
Long-Term Liabilities		
Note payable, less current maturities	146,405	150,000
Operating lease liability, less current portion	<u>160,261</u>	<u>198,350</u>
	<u>306,666</u>	<u>348,350</u>
Total liabilities	<u>475,792</u>	<u>524,466</u>
Net Assets		
Without donor restrictions	185,014	260,876
With donor restrictions	<u>233,236</u>	<u>176,657</u>
Total net assets	<u>418,250</u>	<u>437,533</u>
Total liabilities and net assets	<u>\$ 894,042</u>	<u>\$ 961,999</u>

See Notes to Financial Statements.

KENTUCKY SHAKESPEARE, INC.

STATEMENTS OF ACTIVITIES
Years Ended August 31, 2025 and 2024

	2025			2024		
	Without Donor Restrictions	With Donor Restrictions	Total	Without Donor Restrictions	With Donor Restrictions	Total
Support and Revenues						
Support						
Grants	\$ 121,062	\$ 337,009	\$ 458,071	\$ 170,897	\$ 267,180	\$ 438,077
Contributions	386,686	58,076	444,762	411,758	30,743	442,501
Gifts in-kind	12,000		12,000	12,000		12,000
Special events (net of cost of direct benefits to donors of \$14,718 and \$15,473 in 2025 and 2024, respectively)	16,835		16,835	11,967		11,967
	536,583	395,085	931,668	606,622	297,923	904,545
Revenues						
Education programs	357,565		357,565	274,589		274,589
Productions	230,808		230,808	205,800		205,800
Other income	6,564		6,564	2,234		2,234
	594,937		594,937	482,623		482,623
Net assets released from restrictions	338,506	(338,506)		300,075	(300,075)	
Total support and revenues	1,470,026	56,579	1,526,605	1,389,320	(2,152)	1,387,168
Expenses						
Program services	1,353,196		1,353,196	1,205,329		1,205,329
Management and general	131,536		131,536	156,369		156,369
Fundraising	61,156		61,156	60,841		60,841
Total expenses	1,545,888		1,545,888	1,422,539		1,422,539
Net change in total net assets	(75,862)	56,579	(19,283)	(33,219)	(2,152)	(35,371)
Net assets, beginning of year	260,876	176,657	437,533	294,095	178,809	472,904
Net assets, end of year	\$ 185,014	\$ 233,236	\$ 418,250	\$ 260,876	\$ 176,657	\$ 437,533

See Notes to Financial Statements.

KENTUCKY SHAKESPEARE, INC.

STATEMENTS OF FUNCTIONAL EXPENSES

Years Ended August 31, 2025 and 2024

	2025					2024						
	Productions	Education	Total Program Services	Management and General	Fund-raising	Total	Productions	Education	Total Program Services	Management and General	Fund-raising	Total
Salaries	\$ 346,753	\$ 266,792	\$ 613,545	\$ 30,954	\$ 36,722	\$ 681,221	\$ 100,243	\$ 205,999	\$ 306,242	\$ 40,011	\$ 37,706	\$ 383,959
Employee benefits	25,926	19,947	45,873	2,314	2,746	50,933	12,373	25,426	37,799	4,938	4,654	47,391
Payroll taxes	32,570	25,062	57,632	2,908	3,449	63,989	9,254	19,017	28,271	3,694	3,481	35,446
Production contract labor	101,693		101,693			101,693	278,997		278,997			278,997
Production	107,999		107,999			107,999	101,958		101,958			101,958
Housing		22,481	22,481			22,481	1,695	26,604	28,299			28,299
Merchandise and concessions	48,238		48,238			48,238	45,696		45,696			45,696
Education contract labor		59,722	59,722			59,722	94,132	94,132	94,132			94,132
Education		16,596	16,596			16,596	10,123	10,123	10,123			10,123
Advertising	31,377	8,855	40,232		7,263	47,495	43,604	8,847	52,451	50	2,094	54,595
Rent	25,915	16,535	42,450	8,979	719	52,148	25,961	15,819	41,780	8,329	667	50,776
Insurance	27,210	10,466	37,676	4,186		41,862	25,865	9,948	35,813	3,979		39,792
Equipment rental and expense	39,150	2,000	41,150	4,530		45,680	33,476	214	33,690	5,089		38,779
Office supplies				6,873	3,010	9,883				8,305	5,648	13,953
Bank, credit card, and service fees				13,069		13,069				13,150		13,150
Professional fees				28,393		28,393				19,670		19,670
Telephone	364	2,732	3,096	364	182	3,642	246	1,846	2,092	246	123	2,461
Dues, subscriptions, taxes, and licenses	676		676	1,980		2,656	411		411	3,939		4,350
Travel		31,963	31,963			31,963	28,236	3,893	28,236			28,236
Conferences				2,150		2,150				20,593		20,593
Interest				13,711		13,711						13,711
Development					7,065	7,065					6,468	6,468
Miscellaneous				5,880		5,880				19,560		19,560
Total expenses before depreciation	787,871	483,151	1,271,022	126,291	61,156	1,458,469	679,779	450,104	1,129,883	151,553	60,841	1,342,277
Depreciation	49,829	32,345	82,174	5,245		87,419	45,749	29,697	75,446	4,816		80,262
Total	\$ 837,700	\$ 515,496	\$ 1,353,196	\$ 131,536	\$ 61,156	\$ 1,545,888	\$ 725,528	\$ 479,801	\$ 1,205,329	\$ 156,369	\$ 60,841	\$ 1,422,539

See Notes to Financial Statements.

KENTUCKY SHAKESPEARE, INC.

STATEMENTS OF CASH FLOWS

Years Ended August 31, 2025 and 2024

	<u>2025</u>	<u>2024</u>
Cash Flows from Operating Activities		
Cash received from grants and contributions	\$ 878,457	\$ 851,406
Cash received from productions, education and other sources	627,232	523,493
Cash paid to suppliers and employees	(1,451,910)	(1,336,198)
Interest paid	<u>(17,183)</u>	<u>(24,160)</u>
Net cash provided by operating activities	36,596	14,541
Cash Flows Used in Investing Activities		
Expenditures for property and equipment	(40,518)	(332)
Cash Flows Provided by Financing Activities		
Contributions and grants restricted for property and equipment	<u>20,400</u>	<u>17,600</u>
Net change in cash and cash equivalents	16,478	31,809
Cash and cash equivalents, beginning of year	<u>46,531</u>	<u>14,722</u>
Cash and cash equivalents, end of year	<u>\$ 63,009</u>	<u>\$ 46,531</u>

See Notes to Financial Statements.

KENTUCKY SHAKESPEARE, INC.

STATEMENTS OF CASH FLOWS
Years Ended August 31, 2025 and 2024

	<u>2025</u>	<u>2024</u>
Reconciliation of Net Change in Total Net Assets to Net Cash Provided by Operating Activities		
Net change in total net assets	\$ (19,283)	\$ (35,371)
Adjustments to reconcile net change in total net assets to net cash provided by operating activities:		
Depreciation	87,419	80,262
Other change in operating lease	1,517	2,516
Loss on disposal of property and equipment	2,100	
Contributions and grants restricted for property and equipment	(20,400)	(17,600)
Change in assets and liabilities:		
(Increase) decrease in:		
Grants receivable	(3,976)	(11,572)
Other receivables	(2,956)	1,965
Prepaid expenses		16,378
Increase (decrease) in:		
Accounts payable	(17,096)	(8,332)
Accrued expenses	7,673	(25,170)
Deferred revenue	1,598	11,465
Total adjustments	<u>55,879</u>	<u>49,912</u>
Net cash provided by operating activities	<u>\$ 36,596</u>	<u>\$ 14,541</u>

See Notes to Financial Statements.

KENTUCKY SHAKESPEARE, INC.

NOTES TO FINANCIAL STATEMENTS

Note 1. Nature of Operations and Summary of Significant Accounting Policies

Nature of operations:

Kentucky Shakespeare, Inc. (Organization) is a not-for-profit organization which locally produces plays by William Shakespeare that are performed free to the public at Central Park's C. Douglas Ramey Amphitheater in Louisville, Kentucky. The stage and seating at the amphitheater are the property of the Organization, and the land is the property of Louisville Metro Parks. The plays are performed during the summer months using professional actors, summer interns, and high school apprentices. The plays are also performed in various schools, community centers, corporations, prisons and juvenile centers in Kentucky and surrounding states. Through the Education Outreach Program, the Organization provides theater classes for children and adults, workshops in performing arts, and cultural opportunities to introduce children in Kentucky and the surrounding states to theater. The Organization is supported by contributions, grants, and program service fees.

Summary of significant accounting policies:

This summary of significant accounting policies of the Organization is presented to assist in understanding the Organization's financial statements. The financial statements and notes are representations of the Organization's management who is responsible for the integrity and objectivity of the financial statements. These accounting policies conform to accounting principles generally accepted in the United States of America and have been consistently applied in the preparation of the financial statements.

Basis of presentation:

The accompanying financial statements of the Organization have been prepared on the accrual basis of accounting. The Organization is required to report information regarding its financial position and activities according to the two classes of net assets – without donor restrictions and with donor restrictions:

Net assets without donor restrictions – Net assets available for use in general operations and not subject to donor (or certain grantor) restrictions.

Net assets with donor restrictions – Net assets subject to donor- (or certain grantor-) imposed restrictions. The Organization's donor-imposed restrictions are temporary in nature that will be met by the passage of time or other events specified by the donor. Donor-imposed restrictions are released when a restriction expires, that is, when the stipulated time has elapsed, when the stipulated purpose for which the resource was restricted has been fulfilled, or both.

NOTES TO FINANCIAL STATEMENTS

Cash and cash equivalents:

For purposes of the statements of cash flows, the Organization considers only undesignated cash and investments with original maturities of three months or less to be cash and cash equivalents.

Grants receivable:

Grants receivable consist of unconditional promises to give that are recorded at net realizable value upon receipt. The valuation of grants receivable is based upon historical experience and management's evaluation of the current status of receivables. Receivables are considered uncollectible if payment is not received in accordance with the contractual terms. As of August 31, 2025 and 2024, there is no allowance for uncollectible grants recorded as balances are considered fully collectible. If an amount becomes uncollectible, the balance will be charged to an allowance in the year when that determination is made.

Accounts receivable:

Accounts receivable represent contract assets and consist of amounts due for education programs and productions. Accounts receivable are included in other receivables on the statement of financial position at historical value adjusted for any charge offs and the allowance for current expected credit losses (CECL). Accounts receivable are charged off in the period in which they are deemed uncollectible. The allowance for current expected credit losses is management's estimate of probable losses determined on the basis of historical collection experience, known troubled accounts, and management's expectations about current and future economic conditions. There was no allowance for credit losses at August 31, 2025 and 2024. If an amount becomes uncollectible, the balance is written off through an allowance in the year so determined.

Property, equipment and depreciation:

Property and equipment are recorded at cost, if purchased, or fair value as of the date of donation, if donated. The Organization's policy is to capitalize asset purchases in excess of \$5,000. Depreciation of property and equipment is computed on the straight-line method over their estimated useful lives:

Leasehold improvements	5-31 years
Vehicles	5 years
Equipment	5-10 years
Furniture and fixtures	5 years

Deferred revenue:

Deferred revenue represents contract liabilities for education programs and ticket sales received in advance for future activities and programs. The beginning of year deferred revenue balances are \$15,630 and \$4,165 for the years ending August 31, 2025 and 2024, respectively. Contract revenues are reported in the fiscal year in which they are earned.

NOTES TO FINANCIAL STATEMENTS

Revenue recognition:

Contract revenue:

The Organization's contract revenues are derived primarily from education programs and activities, and sales of tickets and merchandise. Revenue is recognized at a point in time or over time as the performance obligations are satisfied.

Revenue from education programs is recognized at a point in time as the programs are performed. These programs have set rates depending on the type of program with payments generally made in advance of or at the time of the performance. The Organization also receives revenue from educational camps held during the summer. Revenue from these camps is recognized over time as instructional services are rendered over a period ranging from 1 – 5 weeks, depending on the duration of the camp. Camp tuition is recognized using the input method as time has elapsed.

The Organization recognizes revenue from sales of tickets, drinks and merchandise at the point in time the items are provided or the ticketed event occurs satisfying the performance obligation. The transaction price varies based on the item or type of event ticket purchased. Payments are made in advance or at the time of purchase.

Approximately 40% and 36% of the Organization's revenues are derived under contracts for the years ended August 31, 2025 and 2024, respectively. Contract revenues are reported as Education Programs and Productions on the statements of activities. For the years ended August 31, 2025 and 2024, approximately 93% and 90% , respectively, of contract revenue resulted from performance obligations that were satisfied at a point in time and 7% and 10%, respectively, resulted from performance obligations that were satisfied over time. The beginning of year accounts receivable balances are \$6,679 and \$8,644 for the years ended August 31, 2025 and 2024, respectively.

The Organization has determined that the nature, amount, timing and uncertainty of contract revenues and cash flows are affected by the economy, availability of public/educational funds impacting a school's ability to pay for programs and demand for services, and general public support.

Contributions and grants:

Contributions and grants received are measured at their fair values and reported as an increase in net assets in the year in which the related contribution is made. Donor-restricted support is reported as an increase in net assets with donor restrictions. When a restriction expires, net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the statements of activities as net assets released from restrictions. Conditional promises to give are not included as contributions until the conditions are substantially met.

NOTES TO FINANCIAL STATEMENTS

In-kind contributions:

The Organization received the following in-kind contributions for the years ended August 31, 2025 and 2024:

	<u>2025</u>	<u>2024</u>
Services:		
Bartending services	\$ 8,000	\$ 8,000
Goods:		
Marketing - signage	<u>4,000</u>	<u>4,000</u>
	<u>\$12,000</u>	<u>\$12,000</u>

In-kind contributions are reported as contributions at their estimated fair value on the date of receipt and reported as expenses when utilized. Estimated fair value is determined based on information provided by the donor regarding the value of goods and services received or comparable rates in the local market. The Organization's policy is to utilize in-kind contributions. The Organization did not monetize any in-kind contributions for the years ended August 31, 2025 and 2024. In-kind marketing consists of signage and design utilized to promote the Organization and its services.

Contributed services must meet the specific expertise requirements and would normally have been purchased before they are recorded. For the years ended August 31, 2025 and 2024, in-kind bartending services of \$8,000 were recognized for concession services at productions.

Special events:

Special events revenue is recorded equal to the cost of the direct benefit to donors and the related contribution from the donor. Special events are presented net of the costs of direct benefit to donors on the statements of activities.

Functional expenses:

The financial statements report certain categories of expenses that are attributed to more than one program or supporting function. Therefore, expenses require allocation on a reasonable basis that is constantly applied. The expenses are allocated on the basis of estimates of time and effort.

Advertising:

The Organization's policy is to expense advertising costs as the costs are incurred. Advertising cost for the years ended August 31, 2025 and 2024 was \$47,495 and \$54,595, respectively.

NOTES TO FINANCIAL STATEMENTS

Use of estimates:

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Income taxes:

The Organization is exempt from federal, state and local income taxes as a not-for-profit organization as described under Section 501(c)(3) of the Internal Revenue Code. The Organization files an informational tax return in the U.S. federal jurisdiction. However, income from certain activities not directly related to the Organization's tax exempt purpose may be subject to taxation as unrelated business income.

As of August 31, 2025 and 2024, the Organization did not have any accrued interest or penalties related to income tax liabilities, and no interest or penalties have been charged to operations for the years then ended.

Leases:

The Organization evaluates contracts at inception and when terms of an existing contract are changed to determine if an arrangement is or contains a lease. Operating leases are included in operating lease right-of-use asset and operating lease liability on the statement of financial position. Short-term leases (leases with an initial term of twelve months or less that do not contain a purchase option that is likely to be exercised) are not recorded on the statement of financial position. The Organization has no finance leases. Lease cost for lease payments is recognized on a straight-line basis over the lease term.

Lease ROU assets represents the right to use an underlying asset for the lease term, and lease liabilities represent the obligation to make lease payments arising from the lease. The ROU asset also includes initial direct costs and prepaid lease payments made, if any, less lease incentives, if any. Lease ROU assets and liabilities are recognized at the commencement date based on the present value of the future lease payments over the lease term.

The Organization's leases do not provide an implicit rate, so the Organization utilizes the risk free rate based on the information available at the commencement date for each lease in determining the present value of lease payments. The risk free rate is reevaluated upon lease modification. The Organization's lease terms may include options to extend or terminate the lease when it is reasonably certain that the Organization will exercise the option. Lease and non-lease components are treated as a single lease component.

Leasehold improvements are amortized over the lesser of the economic useful life of the improvement or the term of the lease.

NOTES TO FINANCIAL STATEMENTS

Subsequent events:

Subsequent events have been evaluated through January 30, 2026, which is the date the financial statements were available to be issued.

Note 2. Liquidity and Availability

Financial assets available for general expenditure, that is, without donor or other restrictions limiting their use, within one year of the statements of financial position dates, comprise the following:

	<u>2025</u>	<u>2024</u>
Cash and cash equivalents	\$ 63,009	\$ 46,531
Grants receivable	214,233	210,257
Other receivables	9,635	6,679
Less funds with donor restrictions	<u>(113,323)</u>	<u>(62,701)</u>
	<u>\$173,554</u>	<u>\$200,766</u>

The Organization manages its liquidity and reserves following two guiding principles: operating within a prudent range of financial soundness and stability and maintaining adequate liquid assets to fund near-term operating needs. The Organization is monitoring cash flow weekly to meet current cash flow needs, as well as monitoring the budget to ensure expenses are in line with revenues. The Organization continues its work to obtain additional grant funding and increase education program revenue through expanded programming and outreach.

Note 3. Grants Receivable

Grants receivable are due within one year and consist of the following as of August 31, 2025 and 2024:

	<u>2025</u>	<u>2024</u>
Fund for the Arts	\$119,913	\$113,956
Louisville Metro Government	50,000	50,000
Arts Midwest / National Endowment for Arts	35,000	10,322
Arts for All Kentucky	4,820	
WHAS Crusade for Children	3,000	
Jeffersonville Public Arts Commission	1,500	
Kentucky Arts Council		11,379
The Honorable Order of Kentucky Colonels		12,600
Kentucky Tourism Arts Heritage Council		10,000
Miscellaneous	<u> </u>	<u>2,000</u>
Total grants receivable	<u>\$214,233</u>	<u>\$210,257</u>

NOTES TO FINANCIAL STATEMENTS

Note 4. Changes in Net Assets with Donor Restrictions

Changes in net assets with donor restrictions for the years ended August 31, 2025 and 2024 are as follows:

<u>Restriction</u>	<u>Balance 8-31-24</u>	<u>Contributions and Grants</u>	<u>Released from Restrictions</u>	<u>Balance 8-31-25</u>
Timing	\$113,956	\$119,913	\$(113,956)	\$119,913
Property and equipment	17,600	20,400	(38,000)	
Programs	<u>45,101</u>	<u>254,772</u>	<u>(186,550)</u>	<u>113,323</u>
	<u>\$176,657</u>	<u>\$395,085</u>	<u>\$(338,506)</u>	<u>\$233,236</u>
<u>Restriction</u>	<u>Balance 8-31-23</u>	<u>Contributions and Grants</u>	<u>Released from Restrictions</u>	<u>Balance 8-31-24</u>
Timing	\$123,785	\$113,956	\$(123,785)	\$113,956
Property and equipment	7,024	17,600	(7,024)	17,600
Programs	<u>48,000</u>	<u>166,367</u>	<u>(169,266)</u>	<u>45,101</u>
	<u>\$178,809</u>	<u>\$297,923</u>	<u>\$(300,075)</u>	<u>\$176,657</u>

The timing restrictions as of August 31, 2025 and 2024 relate to a contribution from Fund for the Arts, which is for use in the years ended August 31, 2026 and 2025, respectively.

As of August 31, 2025, the total net assets with donor restrictions of \$233,236 were in excess of the total available restricted grants receivable and cash of \$225,742 by \$7,494. The Organization plans to replenish the funds out of operations during the next fiscal year. The Organization anticipates that the donors will not require the contributions to be returned to the donors, and accordingly, no provision has been made for any liabilities that might arise from this noncompliance.

NOTES TO FINANCIAL STATEMENTS

Note 5. Note Payable

The note payable consists of the following as of August 31, 2025 and 2024:

	<u>2025</u>	<u>2024</u>
Note payable to the U.S. Small Business Administration, payable in monthly installments of \$641 beginning in November 2022, including interest of 2.75% through May 2050. Payment first applied to outstanding accrued interest. All tangible and intangible personal property is pledged as collateral on this note.	\$150,000	\$150,000
Less current maturities	<u>3,595</u>	<u> </u>
	<u>\$146,405</u>	<u>\$150,000</u>

Future maturities of the notes payable are as follows:

Year ending August 31, 2026	\$ 3,595
2027	3,695
2028	3,798
2029	3,904
2030	4,012
Thereafter	<u>130,996</u>
	<u>\$150,000</u>

Note 6. Employee Benefit Plan

The Organization maintains a 401(k) Profit Sharing Plan covering all eligible employees. Employees may contribute an amount of their gross pay subject to certain limitations and are eligible to receive employer discretionary matching contributions each year. The Organization made contributions of \$4,108 and \$2,504 to the plan for the years ended August 31, 2025 and 2024, respectively.

NOTES TO FINANCIAL STATEMENTS

Note 7. Leases

The Organization leases office and storage space under operating leases with 10-year and 5-year terms expiring in 2031 and 2026, respectively. The lease agreements do not include any variable payments, material residual value guarantees or restrictive covenants.

The following summarizes lease costs for the years ended August 31:

	<u>2025</u>	<u>2024</u>
Lease costs:		
Operating lease cost – office and storage space	\$49,317	\$49,317
Short-term lease costs	<u>2,831</u>	<u> </u>
Total	<u>\$52,148</u>	<u>\$49,317</u>
Other information:		
Weighted-average remaining lease term – operating lease	5.4 years	6 years
Weighted-average discount rate – operating lease	3.20%	3.21%
Supplemental cash flow information:		
Cash paid for amounts included in the measurement of lease liabilities:		
Operating cash flows from operating leases	\$47,800	\$46,800

Office and storage space lease cost is included in rent expense on the statements of functional expenses.

The maturities of operating lease liabilities as of August 31, 2025, are as follows:

	2026	\$ 43,700
	2027	36,000
	2028	37,000
	2029	38,400
	2030	38,400
	Thereafter	<u>22,400</u>
	Total lease payments	215,900
	Less: present value adjustment	<u>(17,550)</u>
		<u>\$198,350</u>



Louisville Metro Government
Office of Management and Budget

Neighborhood Development Fund Training Attestation

Grantee Organization Name: Kentucky Shakespeare

Grantee Representative Name: Matt Wallace

I agree that I am an authorized representative and/or signatory of the organization named above and attest to having viewed the Neighborhood Development Fund training presentation. I understand the reporting requirements of the Neighborhood Development Fund grant. Additionally, after viewing the presentation, I have correctly answered the below questions.

Please check:



I viewed the NDF training material on the website

Answer the following questions before signing (Circle or write in the correct answer).

1. The NDF funding your agency received is a gift from LMG? True or False
2. Name the three budget categories that require a detail list.
Client Assistance, Community Events and Festivals, and Other Expenses.
3. If your agency charged gross pay to NDF, you are required to provide additional documentation to satisfy reporting requirements. True or False
4. Which four questions should your financial support documentation answer at all times?
Who, What, When, and Where.
5. Your agency is considered noncompliant if you do not account for funds received and/or your financial report is missing support documentation? True or False
6. Canceled check, bank statement, invoice and receipt are considered proof of payment. True or False.

Grantee Representative Signature

3.6.26

Date

NOTE: Please return to Roxanne Steele

E-mail address: Roxanne.Steele@louisvilleky.gov

Fax: 502-574-3219

Mailing Address: Louisville Metro Government
ATTN: NDF Coordinator
611 West Jefferson St.
Louisville, KY 40202






Binder1

Final Audit Report

2026-03-07

Created:	2026-03-07
By:	Matt Wallace (matt@kyshakespeare.com)
Status:	Signed
Transaction ID:	CBJCHBCAABAkUhpnyICKHBLyWdKzds9PqlrVASmsXOa

"Binder1" History

-  Document created by Matt Wallace (matt@kyshakespeare.com)
2026-03-07 - 2:59:05 PM GMT
-  Document emailed to Matt Wallace (info@kyshakespeare.com) for signature
2026-03-07 - 3:01:10 PM GMT
-  Email viewed by Matt Wallace (info@kyshakespeare.com)
2026-03-07 - 3:03:20 PM GMT
-  Document e-signed by Matt Wallace (info@kyshakespeare.com)
Signature Date: 2026-03-07 - 3:04:26 PM GMT - Time Source: server
-  Agreement completed.
2026-03-07 - 3:04:26 PM GMT



Kentucky Secretary of State Michael G. Adams



KENTUCKY SHAKESPEARE INC.

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File Dissolution

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Manage Assumed Name

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General Information

Organization Number :	0010680
Name :	KENTUCKY SHAKESPEARE INC.
Profit or Non-Profit :	N - Non-profit
Company Type :	KCO - Kentucky Corporation
Industry :	Educational Services
Number of Employees :	Small (0-19)
Primary County :	Jefferson
Status :	A - Active
Standing :	G - Good
State :	KY
File Date :	5/8/1963
Organization Date :	5/8/1963
Last Annual Report :	2/19/2026
Principal Office :	616 MYRTLE STREET LOUISVILLE, KY, 40208

Registered Agent :

**MATT WALLACE
616 MYRTLE STREET
LOUISVILLE, KY, 40208**

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FREE SHAKESPEARE FESTIVAL IN CENTRAL PARK

Join us in Central Park in Historic Old Louisville for our 66th season May 27-August 9, 2026!



FREE admission



Food and drinks available



Pets on leashes are welcome

2026 Season of Free Kentucky Shakespeare Festival in Central Park

AS YOU LIKE IT

directed by Matt Wallace

As You Like It

Directed by Matt Wallace

ANTONY AND
CLEOPATRA

directed by Amy Attaway

Antony and Cleopatra

Directed by Amy Attaway

THE TWO
GENTLEMEN
OF VERONA

directed by Matt Wallace

**The Two Gentlemen of
Verona**

Directed by Matt Wallace

Plus our Globe Players and Louisville Ballet

with ROMEO AND JULIET and SHAKESPEARE IN DANCE

Nightly Schedule:

6:00 p.m. Food Trucks
7:00 p.m. Kids' Globe, Will's Gift Shop, Will's Tavern
7:15 p.m. Community Pre-Show Performance
8:00 p.m. Performance

Location:

C. Douglas Ramey Amphitheater
Central Park in Historic Old Louisville
1340 South Fourth Street
Louisville, KY 40208

Calendar coming soon



AS YOU LIKE IT

by William Shakespeare

May 27-31; June 3-7; June 10-14; July 15, 18, 21, 24

"I like this place and willingly could waste my time in it."

The 66th season kicks off with this irresistible and beloved pastoral romantic comedy. "All the world's a stage" in the hilarious tale of love, mistaken identity, and banishment in the transformative Forest of Arden.



ANTONY AND CLEOPATRA

by William Shakespeare

June 18-21; June 24-28; July 14, 17, 22, 25

"I have immortal longings in me."

Shakespeare's legendary romance comes to vivid life in this love story of two powerful leaders: Cleopatra, Queen of Egypt, and Mark Antony, General of the Roman Empire. Passion leads to tragedy in this epic tale of desire, scandal, and power.



THE TWO GENTLEMEN OF VERONA

by William Shakespeare

July 2-3, 5; 7-12; 16, 19, 23, 26

*"Love is like a child
That longs for every thing that he can come by."*

What happens in Milan, stays in Milan! Shakespeare's gleefully silly comedy is set in 1940's Last Vegas, where love and friendship are put to the test. A charming adventure navigating a love triangle, betrayal, disguises, an escape into the forest, and a dog.



**Kentucky Shakespeare's Globe Players
professional training program for high school students**

ROMEO AND JULIET

by William Shakespeare

July 29-August 2

Kentucky Shakespeare's Globe Players professional training program takes the stage, presenting Shakespeare's beloved tragedy, directed by Director of Education Kyle Ware. The cast is comprised of students from multiple area high schools and the production is the culmination of a five-week training program.



Louisville Ballet

Shakespeare in Dance HAMLET & OPHELIA

August 5-9

The final week of the summer season, Louisville Ballet returns for a tenth season to present an original dance piece from choreographer Roger Creel, inspired by Shakespeare's *Hamlet*.

