

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

RECEIVED  
DATE 9.4.14 TIME: 11:30

**Applicant/Program:** Stage One: The Louisville Children's Theater, Inc./ Production Support – *Petite Rouge (A Cajun Red Riding Hood)*

**Executive Summary of Request:**  
This funding will be used for the programming budget of Stage One's Production of *Petite Rouge (A Cajun Red Riding Hood)* to provide the play at zero ticket cost to nearly 22,000 kindergarten and first grade students.  
  
The funding will be used to six actors personnel costs for four weeks of rehearsal and three weeks of performance (9/16/14 – 11/1/14).

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.

12 District #      Red Blahwell Primary Sponsor Signature      \$3668.62 Amount      9-3-14 Date

**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.

**Approved by:**  
\_\_\_\_\_  
Appropriations Committee Chairman      Date

**Clerk's Office Only:**  
Request Amount: \_\_\_\_\_ Committee Amended Appropriation: \_\_\_\_\_  
Original Appropriation: \_\_\_\_\_ Council Amended Appropriation: \_\_\_\_\_



OFFICE OF METRO COUNCIL CLERK  
REVIEWED  
DATE 9.8.14 TIME 10:23am

**Applicant/Program:** Stage One: The Louisville Children's Theater, Inc./ Production Support – *Petite Rouge (A Cajun Red Riding Hood)*

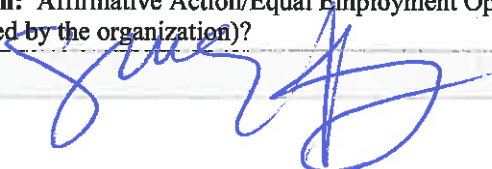
### Additional Disclosure and Signatures

#### 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.

<u>4</u> District #	 Council Member Signature	<u>\$3,668.62</u> Amount	<u>8-14-14</u> Date
<u>13</u> District #	 Council Member Signature	<u>\$3,668.62</u> Amount	<u>9-2-14</u> Date
_____ District #	_____ Council Member Signature	_____ Amount	_____ Date
_____ District #	_____ Council Member Signature	_____ Amount	_____ Date
_____ District #	_____ Council Member Signature	_____ Amount	_____ Date
_____ District #	_____ Council Member Signature	_____ Amount	_____ Date
_____ District #	_____ Council Member Signature	_____ Amount	_____ Date

## NDF NON-PROFIT APPLICATION CHECKLIST

<b>Legal Name of Applicant Organization:</b> Stage One: The Louisville Children's Theatre, Inc.	
<b>Program Name:</b> Production Support – <i>Petite Rouge (A Cajun Red Riding Hood)</i> <b>Request Amount:</b> \$29,349.00	<b>Yes/No/NA</b>
<b>Request form:</b> Is the NDF request form signed by all Council Member(s) appropriating funding?	Yes
<b>Request form:</b> Is the funding proposed less than or equal to the request amount?	Y
<b>Request form:</b> Have all known Council or Staff relationships to the Agency been adequately disclosed on the cover sheet?	Y
<b>Application Page 1:</b> Has prior Metro funds committed/granted been disclosed?	Y
<b>Application Page 1:</b> Is the application properly signed and dated by authorized signatory?	Y
<b>Application Page 3:</b> Reimbursement funding – One or two boxes checked if any expenses are incurred before the grant award period. Is all required documentation included?	N/A
<b>Application Pages 3 – 5:</b> Is the proposed public purpose of the program well-documented?	Y
<b>Application 4:</b> Is there adequate documentation of how the proceeds of the fundraiser will be spent?	Y
<b>Application Budget Page 6:</b> Does the application budget reflect only the revenue and expenses of the project/program (page 6) if the request is not an operating budget request? Is all detail schedules included for "Metro, Non Metro and Total" expense funds for client assistance, community events & festivals and other expenses? And does the Non-Metro Revenue equal the Non-Metro expenses?	Y
<b>Faith Based Organizations:</b> Is the signed Faith Based Form signed and included?	N/A
<b>Jefferson County Only:</b> Will all funding be spent in Louisville/Jefferson County?	Y
<b>Capital Project(s) request:</b> Is the cost estimate(s) from proposed vendor(s) included?	N/A
<b>Good Standing:</b> Is the entity in good standing with: <ul style="list-style-type: none"> <li>• Kentucky Secretary of State – include Secretary of State website information on organization</li> <li>• Louisville Metro Government – check OMB monthly report filed in Council Financial Reports</li> <li>• Internal Revenue Service – most recent Form 990 included</li> </ul>	Y Y Y
<b>Separate Taxing Districts:</b> If Metro funding is for a separate taxing district, is the funding appropriated for a program outside the legal responsibility of that taxing district?	N/A
<b>Small Cities:</b> Is the resolution included agreeing to partner with Louisville Metro on the capital project? (IRS Determination letter not required, Form 990 not required, but KY SOS acknowledgement is)	N/A
<b>Operating Requests:</b> Is recommended operating funding less than or equal to 33% of total operating budget?	Y
<b>IRS Exempt Proof:</b> Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?	Y
<b>Operating Budget:</b> Is the organization's current fiscal year operating budget included?	Y
<b>Ordinance Required:</b> Is the amount committed by Council members greater than \$5,000 to any one project/program within an organization in this fiscal year.	Y
<b>Board Members:</b> Is the entity's board member list (with term length/term limits) included?	Y
<b>Staff:</b> Is a list of the highest paid staff included with their expected annual personnel costs?	Y
<b>Annual Audit:</b> Is the most recent annual audit (if required by organization) included?	N/A
<b>Rent Requests:</b> Is a copy of signed lease included?	N/A
<b>Articles of Incorporation:</b> Are the Articles of Incorporation of the organization included?	Y
<b>IRS Form W-9:</b> Is the IRS Form W-9 included?	Y
<b>Evaluation Forms:</b> Are the evaluation forms (if program participants are given evaluation forms) included?	N/A
<b>Affirmative Action:</b> Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if required by the organization)?	N/A
<b>Prepared by:</b> 	<b>Date:</b> 8/3/14



**LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION**

SECTION 1 – APPLICANT INFORMATION			
<b>Legal Name of Applicant Organization:</b>		<b>Stage One: the Louisville Children's Theatre, Inc.</b>	
<small>(as listed on: <a href="http://www.sos.ky.gov/business/records">http://www.sos.ky.gov/business/records</a>)</small>			
<b>Main Office Street &amp; Mailing Address:</b> 323 W. Broadway, Suite 600, Louisville, KY 40202			
<b>Website:</b> www.stageone.org			
<b>Applicant Contact:</b>	Lucas Adams	<b>Title:</b>	Associate Director of Development
<b>Phone:</b>	502-498-2448	<b>Email:</b>	ladams@stageone.org
<b>Financial Contact:</b>	Mike Brooks	<b>Title:</b>	Business Manager
<b>Phone:</b>	502-498-2438	<b>Email:</b>	mbrooks@stageone.org
<b>Organization's Representative who attended NDF Training:</b> Lucas Adams			
GEOGRAPHICAL AREA(S) WHERE PROGRAM ACTIVITIES ARE (WILL BE) PROVIDED			
<b>Program Facility Location(s):</b>	Kentucky Center for the Arts		
<b>Council District(s):</b>	4	<b>Zip Code(s):</b>	40202
SECTION 2 – PROGRAM REQUEST & FINANCIAL INFORMATION			
<b>PROGRAM/PROJECT NAME:</b> Production Support- Petite Rouge (A Cajun Red Riding Hood)			
<b>Total Request: (\$)</b>	\$29,349.00	<b>Total Metro Award (this program) in previous year: (\$)</b>	26,304
<b>Purpose of Request (check all that apply):</b>			
<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)			
<b>The Following are Required Attachments:</b>			
<input checked="" type="checkbox"/> IRS Exempt Status Determination Letter <input checked="" type="checkbox"/> Current Year Projected Budget <input checked="" type="checkbox"/> List of Board of Directors (include term & term limits) <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 <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 required <input checked="" type="checkbox"/> Staff including the 3 highest paid staff	
<b>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.</b>			
<b>Source:</b>	External Agency Fund	<b>Amount: (\$)</b>	\$14,600
<b>Source:</b>		<b>Amount: (\$)</b>	
<b>Source:</b>		<b>Amount: (\$)</b>	
Has the applicant contacted the BBB Charity Review for participation? <input type="checkbox"/> Yes <input checked="" 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:**

StageOne Family Theatre's mission is to inspire children by opening the door to imagination, opportunity and empathy.

Founded in 1946, StageOne is the oldest professional theatre company in Louisville and a national pioneer in the field of theatre for young audiences. Serving more than 90,000 children and families each year across the region, StageOne is the leading arts educator in this community. Our shows at the Kentucky Center for the Arts, workshops in schools, and Spring Break and Summer Camp opportunities are tied to educational curriculums, giving teachers an additional tool for reaching kids, and parents a chance to engage with their children as they learn. Unique programs like Kindergarten Readiness, Sensory-Friendly Performances, and Play-It-Forward set StageOne apart as a crucial provider of arts experiences for the kids who need them most and will not otherwise have them.



## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

### SECTION 4 – 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.):**

StageOne is seeking \$29,349 in neighborhood Development Funds to support its fall 2014 production of "Petite Rouge (A Cajun Red Riding Hood)" which begins rehearsal on September 16th, 2014 and closes November 1st, 2014. Community support is crucial in subsidizing tickets for Louisville Metro schools.

This support would allow StageOne to pay six actors (all permanent residents of Louisville) a weekly salary and combined pension and health benefits as required by Actors Equity Association, and offer the production to students in grades kindergarten and first at zero ticket cost through StageOne's innovative Play it Forward ticket underwriting program. Through this program, public, private, and parochial school students from across Louisville Metro can attend "Petite Rouge" at zero ticket cost.

Children need the arts. Study after study has shown that exposure to the arts is critical to the development of creative thinkers and problem solvers. Arts experiences help students improve test scores, improve academic success and ultimately increase educational attainment across communities. In addition, the arts teach empathy and build connections between children and the world. StageOne is a cornerstone arts organization in Louisville, helping to build a brighter future for our children and our community.

StageOne believes in every child and continues to find ways to reach out to the children in our community who are most in need of arts experiences.

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

StageOne will use NDF funds to pay six actors a weekly salary and combined pension and health benefits, as required by Actors Equity Association, for four weeks of rehearsal (September 16th through October 9th) and three weeks of performance (October 10th-November 1st.)

The total request is \$29,349

No funding will be directed to subgrantees.



## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

n/a

**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:

Effective October 24, 2013, reimbursements should not be made 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.

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.



## 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:**

Outcome 1: To provide StageOne's production of "Petite Rouge (a Cajun Red Riding Hood) at zero ticket cost to nearly 22,000 kindergarten and first grade students in Jefferson and surrounding counties.

Data collection method: Expressions Reservation System/Teacher check-in reports. Expressions captures information for all reservations made, including number of students, teachers, and ticket prices. Expressions also aggregates attendance data for the entire run of the production and provides accurate measurement of a show's success.

As schools enter the Kentucky Center for the Arts, teachers check in with a StageOne representative and provide actual student and chaperone numbers for that day, this provides a means of counting total attendance both day-to-day and overall.

Indicators to be measured:

Number of students served at each performance and overall

Grade level breakdown

Ticket cost

Outcome 2: StageOne will provide six local actors (all six are residents of Louisville) with seven weeks of employment including salary, and health/pension benefits for their work in "Petite Rouge." StageOne provides employment for nearly 60 artists and administrators each year and is dedicated to hiring local artists for its productions whenever possible.

Data collection method: Payroll records through the Paycor System, this includes copies of payroll logs and direct deposit stubs for each actor.

Indicators of success to be measured: Through payroll records submitted to Metro Government, StageOne will verify that it has paid its artists for their work.

**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.**

StageOne has a stated goal of "building bridges to leverage its own core strengths and those of its partners and peers, providing greater service and clarity to its community." Examples of this work locally include:

A partnership with University of Louisville has continued on multiple levels. The School of Education and StageOne are working to integrate university students with StageOne education team members as they design and implement programming with area schools. The PNC Foundation has funded this initiative for the next two years with a grant of \$247,186, of which, StageOne will receive a percentage. StageOne has also partnered with the University's Autism Training Center. As this partnership continues to grow, expanded performance and learning opportunities for U of L students, increased student and public performances, and awareness of both brands are long-term goals.

In the fall of 2013, in partnership with the Kentucky Autism Training Center and the Kentucky Center for the Arts (KCA) producing the state's first ever "Sensory-Friendly Performance" of The House at Pooh Corner. (Further discussion in diversity section.)

Through our partnership with the Muhammad Ali Center and the Kentucky Center for the Arts, students will participate in a dual-venue field trip that allows them to see our world premiere production of "An in this Corner...Cassius Clay" and further their learning by touring the Center and learning more about Muhammad Ali and his work for civil rights in the commonwealth and throughout the world. This opportunity will be offered to every student in grades four through twelve in the metro area at a steeply discounted price of \$8.





## LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

### SECTION 5 – 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
<b>A: Personnel Costs Including Benefits</b>	29349	30117	59466
<b>B: Rent/Utilities</b>		20881	
<b>C: Office Supplies</b>			
<b>D: Telephone</b>			
<b>E: In-town Travel</b>		300	300
<b>F: Client Assistance (Attach Detailed List)</b>		13500	13500
<b>G: Professional Service Contracts</b>			
<b>H: Program Materials</b>		14886	14886
<b>I: Community Events &amp; Festivals (Attach Detail List)</b>			
<b>J: Small Equipment</b>			
<b>K: Capital Equipment</b>			
<b>L: Other Expenses (Attach Detail List)</b>		11400	11400
<b>*TOTAL PROGRAM/PROJECT FUNDS</b>	29349	21284	241933
<b>% of Program Budget</b>	12 %	88 %	100%

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

Other State, Federal or Local Government	13390
United Way	
Private Contributions (do not include individual donor names)	178000
Fees Collected from Program Participants	20850
Other (please specify)	
<b>Total Revenue for Columns 2 Expenses **</b>	<b>212780</b>

\*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
<b>Total Value of In-Kind</b> <i>(to match Program Budget Line Item.</i> Volunteer Contribution & Other In Kind)		

\* 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: June 1st, 2014

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 6 – 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 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.
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 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.

### 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 7 – 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:	<i>Peter N. Holloway</i>	Date:	8/7/14
Legal Signatory: (please print):	Peter N. Holloway	Title:	Prod. Artistic Director
Phone:	502 498-2440	Extension:	
		Email:	pholloway@stageone.org



**MEMORANDUM**

**TO:** Metro Council  
**FROM:** Mike Brooks, Business Manager  
**RE:** Staff Compensation

StageOne's three highest paid employees and their FY2015 salaries are as follows:

Peter Holloway, Producing Artistic Director	\$125,000
Corey Harrison, Production Manager	\$58,800
Mike Brooks, Business Manager	\$57,000

StageOne's board of directors serves on a voluntary basis.

Should you have any questions or if we can provide anything further, please do not hesitate to contact me.

Mike Brooks  
Business Manager  
502-498-2438  
[mbrooks@stageone.org](mailto:mbrooks@stageone.org)

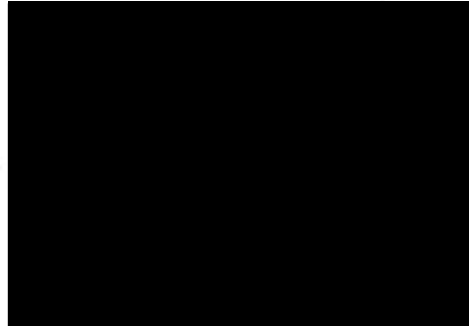
Internal Revenue Service

Department of the Treasury

District  
Director

P.O. Box 2508, Cincinnati, OH 45201

Louisville Childrens Theater, Inc.  
Stage One  
721 West Main St.  
Louisville, KY 40202



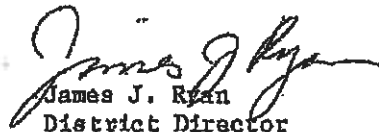
Dear Sir or Madam:

This is in response to your letter of September 4, 1986.

Our records show that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Also, you are not a private foundation because you are described in section 170(b)(1)(A)(vi) of the Code. Contributions to you are deductible by the donor as provided in section 170 of the Code.

Please call the person whose name and telephone number appear above if you have any questions on this matter.

Sincerely yours,

  
James J. Ryan  
District Director

tax id

61-0466715

**StageOne Family Theatre  
Operating Budget, FY13-15**

	<b>12-Months</b>			
	<b>FY13</b>	<b>FY14</b>	<b>FY14</b>	<b>FY15</b>
	<b>Audited</b>	<b>Budget</b>	<b>Forecast</b>	<b>Budget</b>
<b>Revenue:</b>				
<b>Earned Revenue:</b>				
Ticket sales	344,303	289,690	218,420	323,600
Education program fees	87,925	68,500	102,061	91,000
Other	16,381	7,260	9,375	3,900
<b>Total Earned Revenue</b>	<b>448,609</b>	<b>365,450</b>	<b>329,856</b>	<b>418,500</b>
<b>Contributed Income:</b>				
Individuals, Corporate & Foundations	529,467	650,000	1,023,104	645,000
Government & Other Grants	77,514	75,000	70,868	60,000
Fund for the Arts allocation - regular	450,000	600,000	400,000	400,000
Fund for the Arts allocation - special	11,382	15,000	19,500	15,000
Fund Raising events (net)	15,574	37,500	20,663	28,000
In-Kind Contributions	5,089	10,000	4,800	7,000
<b>Total Contributed Income</b>	<b>1,089,026</b>	<b>1,387,500</b>	<b>1,538,935</b>	<b>1,155,000</b>
<b>Total Revenue</b>	<b>1,537,635</b>	<b>1,752,950</b>	<b>1,868,791</b>	<b>1,573,500</b>
<b>Expenses:</b>				
Productions - direct costs	602,182	461,472	429,550	414,702
Production - overhead	149,306	294,403	295,547	312,469
Education	152,925	166,679	177,747	166,932
Marketing and Patron Services	146,375	143,867	135,445	153,378
Development	136,180	185,346	192,572	120,064
Finance & Administration	386,957	388,330	396,674	388,197
<b>Total Expenses</b>	<b>1,573,925</b>	<b>1,640,097</b>	<b>1,627,535</b>	<b>1,555,742</b>
<b>Income (loss) before Non-Recurring Items</b>	<b>(36,290)</b>	<b>112,853</b>	<b>241,256</b>	<b>17,758</b>
<b>Non-Recurring Items</b>	<b>40,737</b>	<b>0</b>	<b>0</b>	<b>105,000</b>
<b>Net Income (Loss)</b>	<b>4,447</b>	<b>112,853</b>	<b>241,256</b>	<b>122,758</b>
<b>EBITDA:</b>				
Net income (loss) above	4,447	112,853	241,256	122,758
Depreciation and amortization	19,340	15,600	19,608	19,400
Interest expense	14,800	14,543	14,543	12,400
<b>EBITDA</b>	<b>38,587</b>	<b>142,996</b>	<b>275,407</b>	<b>154,558</b>

# StageOne

FAMILY THEATRE

## 2014-2015 Board of Directors

All directors are allowed to serve two 3 year-terms before rolling off.

**Thomas, Carl - Board Chairman**  
President/Treasurer



First Term Ends: May 31<sup>st</sup>, 2016

**Byrd, Kristen**  
Vice President – Senior Banking Advisor



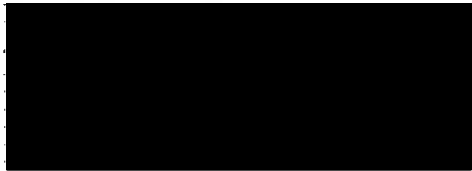
First Term ends: May 31<sup>st</sup>, 2016

**Benson, Eric**  
Senior Manager  
Deloitte & Touche LLP



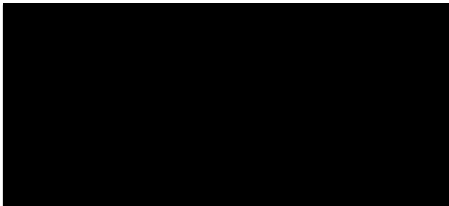
First Term ends: May 31<sup>st</sup>, 2016

**Calzi, David**  
Managing Partner



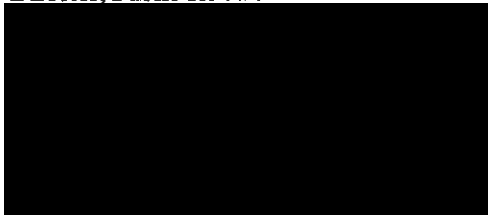
First Term ends: May 31<sup>st</sup>, 2016

**Broughton, Jessie**



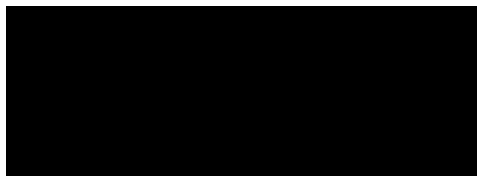
First Term ends; May 31<sup>st</sup>, 2017

**Ferguson, Virginia**  
Director, Public Relations



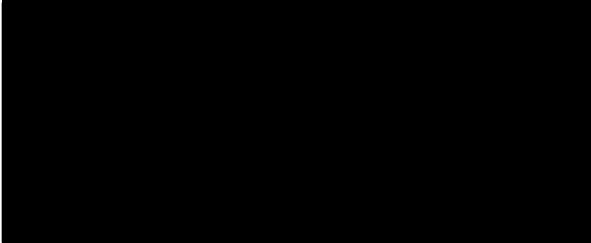
First Term ends; May 31<sup>st</sup>, 2016

**Butler, Ashley**  
Director



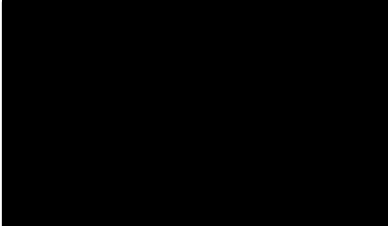
First Term ends: May 31<sup>st</sup>, 2016

**Goff, Lea Pauley**  
Partner



First Term ends: May 31<sup>st</sup>, 2016

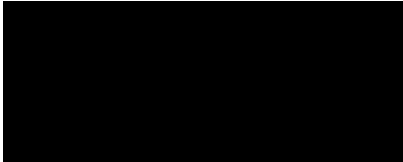
**Haehl, Brian D.**  
Vice President, Wealth Advisor



E-mail: [bhaehl@bbandt.com](mailto:bhaehl@bbandt.com)

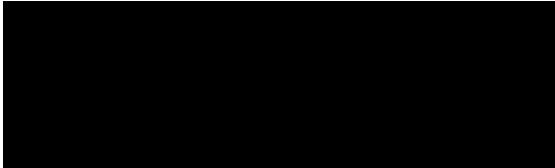
First Term ends: May 31<sup>st</sup>, 2016

**Heit, Michelle Hawk**



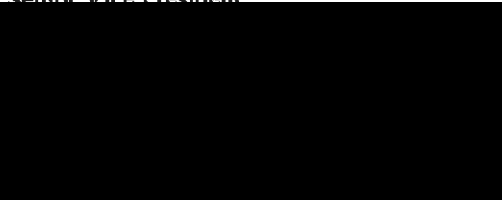
Second Term ends: May 31<sup>st</sup>, 2015

**Helson, Jan**  
Co-Founder and Chairman of the Board



First Term ends: May 31<sup>st</sup>, 2017

**Kaplan, Elizabeth**  
Senior Vice President



First Term ends: May 31<sup>st</sup>, 2016

**Krug, Peggy**  
Compliance and Corporate Services Manager



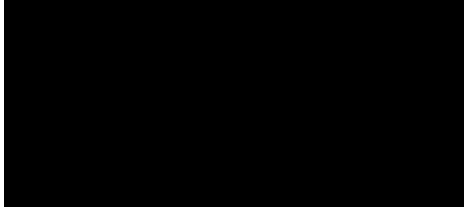
First Term ends: May 31<sup>st</sup>, 2016

**Lambert, Carol**



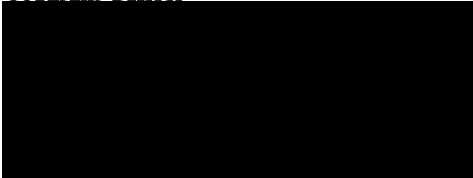
Second Term ends: May 31<sup>st</sup>, 2015

**Lowe, Melissa**  
Human Resources Director



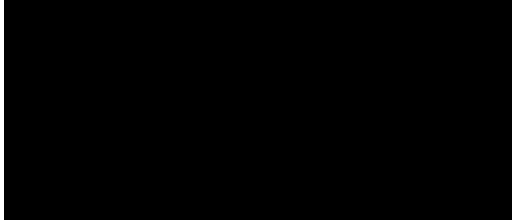
First Term ends; May 31<sup>st</sup>, 2016

**McNair, Tess**  
Program Officer



First Term ends: May 31<sup>st</sup>, 2016

**Merrick, Michael C.**  
Partner



First Term ends: May 31<sup>st</sup>, 2016



**Reno-Weber, Ben**  
Executive Director



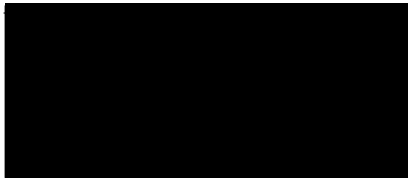
First Term ends: May 31<sup>st</sup>, 2016

**Schulz, Leisa**  
Superintendent of Schools,



Second Term ends: May 31<sup>st</sup>, 2015

**Smith, Dave**  
Assistant Chief Pilot



Email: [dhsmith@ups.com](mailto:dhsmith@ups.com)

First Term ends: May 31<sup>st</sup>, 2016

**Washington, LaKesha**  
Assistant Vice President



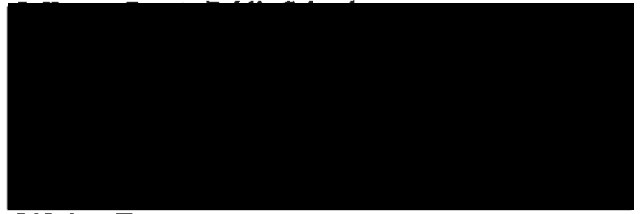
First Term ends: May 31<sup>st</sup>, 2017

**Wright, Suzanne**  
Director- Curriculum Management



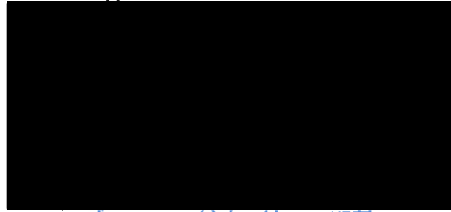
First Term ends: May 31<sup>st</sup>, 2017

**Hargens, Donna Ed.D (honorary)**  
Superintendent



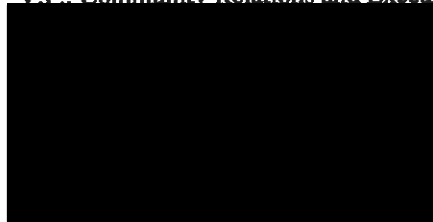
Lifetime Term

**Holloway, Peter (Ex Officio)**  
Producing Artistic Director



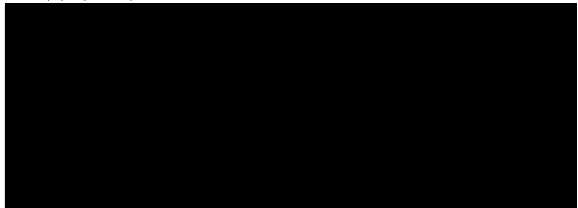
No term limits

**Barnum, Laura Melillo**  
V.P., Community Relations and Executive Director,



Lifetime Term

**Berry, Mike (honorary)**  
President & CEO



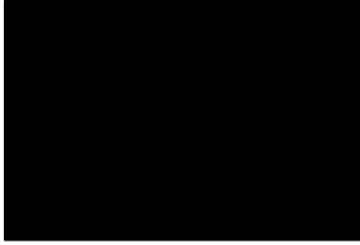
Lifetime Term

**Chand, Chuck (honorary)**  
Managing Partner



Lifetime term

**Ellis, Stephen B. (honorary)**



E-mail: [sbe4038@gmail.com](mailto:sbe4038@gmail.com)

Lifetime term

**Ording, Tom (honorary)**



Lifetime term

Form **990**

# Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No. 1545-0047

# 2011

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

The organization may have to use a copy of this return to satisfy state reporting requirements.

**A** For the 2011 calendar year, or tax year beginning **JUL 1, 2011** and ending **MAY 31, 2012**

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Terminated  
 Amended return  
 Application pending

**C** Name of organization  
**STAGE ONE: THE LOUISVILLE CHILDREN'S THEATRE, INC.**  
 Doing Business As **STAGE ONE**  
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite  
**323 WEST BROADWAY 600**  
 City or town, state or country, and ZIP + 4  
**LOUISVILLE, KY 40202**  
**F** Name and address of principal officer: **PETER HOLLOWAY**  
**SAME AS C ABOVE**

**D** Employer identification number  
 [REDACTED]

**E** Telephone number  
**502-589-4060**

**G** Gross receipts \$ **1,283,110.**

**H(a)** Is this a group return for affiliates?  Yes  No  
**H(b)** Are all affiliates included?  Yes  No  
 If "No," attach a list. (see instructions)  
**H(c)** Group exemption number ▶

**I** Tax-exempt status:  501(c)(3)  501(c) ( ) ◀ (insert no.)  4947(a)(1) or  527

**J** Website: ▶ **WWW.STAGEONE.ORG**

**K** Form of organization:  Corporation  Trust  Association  Other ▶

**L** Year of formation: **1948** **M** State of legal domicile: **KY**

## Part I Summary

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>TO SERVE THE LOUISVILLE, KENTUCKY REGIONS CHILDREN, TEACHERS AND FAMILIES BY PROVIDING HIGH</b>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>21</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>21</b>
	<b>5</b> Total number of individuals employed in calendar year 2011 (Part V, line 2a)	<b>5</b>	<b>45</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>21</b>
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0.</b>
<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	<b>0.</b>	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b>	<b>Current Year</b>
	<b>9</b> Program service revenue (Part VIII, line 2g)	823,540.	780,785.
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	424,376.	459,045.
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	642.	1,174.
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	26,378.	38,125.
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,274,936.	1,279,129.
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	863,652.
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>69,434.</b>		
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,087,471.	718,816.
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,087,471.	1,582,468.
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	187,465.	-303,339.	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>21</b> Total liabilities (Part X, line 26)	387,436.	306,233.
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	260,774.	595,026.
		126,662.	-288,793.

## Part II Signature Block

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

**Sign Here**

Signature of officer: **PETER HOLLOWAY, PRODUCING ARTISTIC DIRECTOR**  
 Date: \_\_\_\_\_

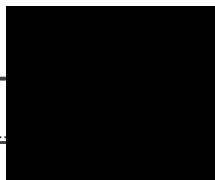
**Paid Preparer Use Only**

Print/Type preparer's name: **REBECCA L. PHILLIPS, CPA**  
 Preparer's signature: \_\_\_\_\_  
 Date: \_\_\_\_\_  
 Check if self-employed:  PTIN: **P00024055**

Firm's name: **MOUNTJOY CHILTON MEDLEY LLP**  
 Firm's EIN: **27-1235638**

Firm's address: **462 S. FOURTH ST., SUITE 2000**  
**LOUISVILLE, KY 40202-3445**  
 Phone no. (502) 749-1900

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



Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: TO SERVE THE LOUISVILLE, KENTUCKY REGIONS CHILDREN, TEACHERS AND FAMILIES BY PROVIDING HIGH QUALITY, ENTERTAINING, AND PROFESSIONAL THEATER FOR YOUNG AUDIENCES AND BY FOSTERING AN APPRECIATION OF THE ARTS THAT DEVELOPS THE WHOLE CHILD, SUPPORTS THE LEARNING ENVIRONMENT

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 and section 4947(a)(1) trusts 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 \$ 1,018,568. including grants of \$ ) (Revenue \$ 376,206.) SUPPORTING CHILDRENS AND FAMILY THEATRE IN LOUISVILLE, KENTUCKY. APPROXIMATELY 85,000 SCHOOL CHILDREN ATTENDED THEATRICAL PRODUCTIONS.

4b (Code: ) (Expenses \$ 148,043. including grants of \$ ) (Revenue \$ 86,837.) APPROXIMATELY 3,700 PEOPLE WERE SERVED THROUGH EDUCATIONAL WORKSHOPS AND CLASSES.

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

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

4e Total program service expenses 1,166,611.



**Part IV Checklist of Required Schedules**

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

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> .....	21	X
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> .....	22	X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .....	23	X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25</i> .....	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....	24d	
25a <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....	25a	X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> .....	25b	X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i> .....	26	X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> .....	27	X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....	28a	X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....	28b	X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> .....	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> .....	34	X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....	35a	X
b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....	35b	X
36 <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> .....	37	X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O .....	38	X

**Part V** Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

<b>1a</b> Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable .....	<b>1a</b>	39			
<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable .....	<b>1b</b>	0			
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? .....	<b>1c</b>		X		
<b>2a</b> Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return .....	<b>2a</b>	45			
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .....	<b>2b</b>		X		
<i>Note.</i> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)					
<b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year? .....	<b>3a</b>			X	
<b>b</b> If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O .....	<b>3b</b>				
<b>4a</b> At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? .....	<b>4a</b>			X	
<b>b</b> If "Yes," enter the name of the foreign country: ▶ .....					
See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.					
<b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? .....	<b>5a</b>			X	
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? .....	<b>5b</b>			X	
<b>c</b> If "Yes," to line 5a or 5b, did the organization file Form 8886-T? .....	<b>5c</b>				
<b>6a</b> Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? .....	<b>6a</b>			X	
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? .....	<b>6b</b>				
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>					
<b>a</b> Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? .....	<b>7a</b>			X	
<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided? .....	<b>7b</b>				
<b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? .....	<b>7c</b>			X	
<b>d</b> If "Yes," indicate the number of Forms 8282 filed during the year .....	<b>7d</b>				
<b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? .....	<b>7e</b>			X	
<b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .....	<b>7f</b>			X	
<b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? .....	<b>7g</b>				
<b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? .....	<b>7h</b>				
<b>8</b> Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? .....	<b>8</b>				
<b>9 Sponsoring organizations maintaining donor advised funds.</b>					
<b>a</b> Did the organization make any taxable distributions under section 4966? .....	<b>9a</b>				
<b>b</b> Did the organization make a distribution to a donor, donor advisor, or related person? .....	<b>9b</b>				
<b>10 Section 501(c)(7) organizations. Enter:</b>					
<b>a</b> Initiation fees and capital contributions included on Part VIII, line 12 .....	<b>10a</b>				
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities .....	<b>10b</b>				
<b>11 Section 501(c)(12) organizations. Enter:</b>					
<b>a</b> Gross income from members or shareholders .....	<b>11a</b>				
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) .....	<b>11b</b>				
<b>12a</b> Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? .....	<b>12a</b>				
<b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year .....	<b>12b</b>				
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>					
<b>a</b> Is the organization licensed to issue qualified health plans in more than one state? .....	<b>13a</b>				
<i>Note.</i> See the instructions for additional information the organization must report on Schedule O.					
<b>b</b> Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans .....	<b>13b</b>				
<b>c</b> Enter the amount of reserves on hand .....	<b>13c</b>				
<b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year? .....	<b>14a</b>			X	
<b>b</b> If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .....	<b>14b</b>				

**Part VI Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, describe the circumstances, processes, or changes in Schedule O. See instructions to line 8a, 8b, or 10b below.

Check if Schedule O contains a response to any question in this Part VI

**Section A. Governing Body and Management**

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

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

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

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed  KY
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website     Another's website     Upon request
- 19** Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization:  \_\_\_\_\_  
 THE ORGANIZATION - 502-589-4060  
 323 WEST BROADWAY, NO. 600, LOUISVILLE, KY 40202



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

Check if Schedule O contains a response to any question in this Part VII

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

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

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

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) <b>CRUCK CHAND</b> CHAIRMAN	4.00	X		X			0.	0.	0.	
(2) <b>SARAH CRONON</b> VICE CHAIRMAN	2.00	X		X			0.	0.	0.	
(3) <b>LINDSEY HERR</b> TREASURER	2.00	X		X			0.	0.	0.	
(4) <b>CINDY ADLEBERG</b> SECRETARY	2.00	X		X			0.	0.	0.	
(5) <b>ALICE BRIDGES</b> BOARD MEMBER	1.00	X					0.	0.	0.	
(6) <b>DAVID MCARTHUR</b> BOARD MEMBER	1.00	X					0.	0.	0.	
(7) <b>MARY DORSETT</b> BOARD MEMBER	1.00	X					0.	0.	0.	
(8) <b>ANNETTE CALHOUN</b> BOARD MEMBER	1.00	X					0.	0.	0.	
(9) <b>JOHN COX</b> BOARD MEMBER	1.00	X					0.	0.	0.	
(10) <b>STEVE ELLIS</b> BOARD MEMBER	1.00	X					0.	0.	0.	
(11) <b>HULYN FARR</b> BOARD MEMBER	1.00	X					0.	0.	0.	
(12) <b>BENJAMIN GRAVES</b> BOARD MEMBER	1.00	X					0.	0.	0.	
(13) <b>MICHELLE HEIT</b> BOARD MEMBER	1.00	X					0.	0.	0.	
(14) <b>CAROL LAMBERT</b> BOARD MEMBER	1.00	X					0.	0.	0.	
(15) <b>LAWRENCE BRANDON</b> BOARD MEMBER	1.00	X					0.	0.	0.	
(16) <b>NORMA OBERST</b> BOARD MEMBER	1.00	X					0.	0.	0.	
(17) <b>TOM ORDING</b> BOARD MEMBER	1.00	X					0.	0.	0.	



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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) DAVID ROTH BOARD MEMBER	1.00	X						0.	0.	0.
(19) JEFF TULL BOARD MEMBER	1.00	X						0.	0.	0.
(20) MIKE STRATTON BOARD MEMBER	1.00	X						0.	0.	0.
(21) GERALDINE WOODS BOARD MEMBER	1.00	X						0.	0.	0.
(22) PETER HOLLOWAY PROD ARTISTIC DIRECTOR	50.00			X				53,543.	73,649.	10,200.
<b>1b Sub-total</b>								53,543.	73,649.	10,200.
<b>c Total from continuation sheets to Part VII, Section A</b>								0.	0.	0.
<b>d Total (add lines 1b and 1c)</b>								53,543.	73,649.	10,200.

**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 **0**

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

**Section B. Independent Contractors**

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

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

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

**Part VIII Statement of Revenue**

		(A) Total revenue	(B) Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns	425,358.				
	<b>b</b> Membership dues					
	<b>c</b> Fundraising events					
	<b>d</b> Related organizations					
	<b>e</b> Government grants (contributions)	90,250.				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	265,177.				
	<b>g</b> Noncash contributions included in lines 1a-1f: \$					
	<b>h</b> Total. Add lines 1a-1f		780,785.			
<b>Program Service Revenue</b>	<b>2 a</b> PRODUCTIONS	900099	369,284.	369,284.		
	<b>b</b> EDUCATIONAL PROGRAMS	900099	86,837.	86,837.		
	<b>c</b> PROP RENTALS	900099	2,924.	2,924.		
	<b>d</b>					
	<b>e</b>					
	<b>f</b> All other program service revenue	900099				
	<b>g</b> Total. Add lines 2a-2f		459,045.			
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts)		1,174.		1,174.	
	<b>4</b> Income from investment of tax-exempt bond proceeds					
	<b>5</b> Royalties					
	<b>6 a</b> Gross rents	(i) Real				
		(ii) Personal				
	<b>b</b> Less: rental expenses					
	<b>c</b> Rental income or (loss)					
	<b>d</b> Net rental income or (loss)					
	<b>7 a</b> Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
	<b>b</b> Less: cost or other basis and sales expenses					
	<b>c</b> Gain or (loss)					
<b>d</b> Net gain or (loss)						
<b>8 a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a	100.				
	<b>b</b> Less: direct expenses	b	0.			
	<b>c</b> Net income or (loss) from fundraising events		100.		100.	
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19	a					
	<b>b</b> Less: direct expenses	b				
	<b>c</b> Net income or (loss) from gaming activities					
<b>10 a</b> Gross sales of inventory, less returns and allowances	a	7,979.				
	<b>b</b> Less: cost of goods sold	b	3,981.			
	<b>c</b> Net income or (loss) from sales of inventory		3,998.	3,998.		
<b>Miscellaneous Revenue</b>		<b>Business Code</b>				
<b>11 a</b> MISCELLANEOUS	a	900099	34,027.		34,027.	
	<b>b</b>					
	<b>c</b>					
	<b>d</b> All other revenue					
<b>e</b> Total. Add lines 11a-11d			34,027.			
<b>12</b> Total revenue. See instructions.			1,279,129.	463,043.	0.	
					35,301.	

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete columns (B), (C), and (D).

Check if Schedule O contains a response to any question in this Part IX

	(A) Total expenses	(B) Program service expenses	Management and general expenses	Fundraising expenses
<b>1</b> Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
<b>2</b> Grants and other assistance to individuals in the United States. See Part IV, line 22				
<b>3</b> Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	135,260.	101,445.		33,815.
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	577,672.	460,297.	115,712.	1,663.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and section 408(b) employer contributions)				
<b>9</b> Other employee benefits	76,979.	65,281.	10,141.	1,557.
<b>10</b> Payroll taxes	73,741.	61,766.	8,516.	3,459.
<b>11</b> Fees for services (non-employees):				
<b>a</b> Management				
<b>b</b> Legal	1,880.		1,880.	
<b>c</b> Accounting	106,916.		106,916.	
<b>d</b> Lobbying				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees				
<b>g</b> Other	125,172.	99,525.	6,868.	18,779.
<b>12</b> Advertising and promotion	37,537.	37,537.		
<b>13</b> Office expenses	11,733.	7,740.	3,993.	
<b>14</b> Information technology	20,232.	14,708.	3,182.	2,342.
<b>15</b> Royalties	58,426.	58,426.		
<b>16</b> Occupancy	6,734.	4,142.	2,167.	425.
<b>17</b> Travel	13,549.	13,439.		110.
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings				
<b>20</b> Interest	13,318.		13,318.	
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization	18,163.	13,786.	4,377.	
<b>23</b> Insurance	38,756.		38,756.	
<b>24</b> Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
<b>a</b> PRODUCTION COSTS	151,508.	129,400.	15,200.	6,908.
<b>b</b> THEATRE RENT	90,420.	90,420.		
<b>c</b> MISCELLANEOUS ADMINISTR	8,675.	155.	8,284.	236.
<b>d</b> BAD DEBT	7,113.		7,113.	
<b>e</b> All other expenses	8,684.	8,544.		140.
<b>25</b> Total functional expenses. Add lines 1 through 24e	1,582,468.	1,166,611.	346,423.	69,434.
<b>26</b> Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here  if following SOP 98-2 (ASC 958-720)

STAGE ONE: THE LOUISVILLE CHILDREN'S  
THEATRE, INC.

Form 990 (2011)

**Part X Balance Sheet**

		(A) Beginning of year	
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	16,9	
	<b>2</b> Savings and temporary cash investments .....	25,277.	<b>2</b> 10,531.
	<b>3</b> Pledges and grants receivable, net .....		<b>3</b>
	<b>4</b> Accounts receivable, net .....	163,329.	<b>4</b> 125,568.
	<b>5</b> Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....		<b>5</b>
	<b>6</b> Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) .....		<b>6</b>
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>
	<b>8</b> Inventories for sale or use .....		<b>8</b>
	<b>9</b> Prepaid expenses and deferred charges .....	127,879.	<b>9</b> 52,507.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 129,512.	
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 86,765.	51,584.
	<b>11</b> Investments - publicly traded securities .....		<b>10c</b> 42,747.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	2,435.	<b>11</b>
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>12</b> 576.
	<b>14</b> Intangible assets .....		<b>13</b>
	<b>15</b> Other assets. See Part IV, line 11 .....		<b>14</b> 10,022.
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	387,436.	<b>15</b>	
	125,788.	<b>16</b> 306,233.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....		<b>17</b> 176,381.
	<b>18</b> Grants payable .....		<b>18</b>
	<b>19</b> Deferred revenue .....	65,892.	<b>19</b> 36,698.
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>
	<b>22</b> Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		<b>22</b> 50,000.
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b> 82,860.
	<b>25</b> 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 .....	69,094.	<b>25</b> 249,087.
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 .....	260,774.	<b>26</b> 595,026.
<b>Net Assets or Fund Balances</b>	<b>27</b> Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets .....	-145,099.	<b>27</b> -603,284.
	<b>28</b> Temporarily restricted net assets .....	250,921.	<b>28</b> 293,651.
	<b>29</b> Permanently restricted net assets .....	20,840.	<b>29</b> 20,840.
	<b>30</b> Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34. Capital stock or trust principal, or current funds .....		<b>30</b>
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>31</b>
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>32</b>
	<b>33</b> Total net assets or fund balances .....	126,662.	<b>33</b> -288,793.
	<b>34</b> Total liabilities and net assets/fund balances .....	387,436.	<b>34</b> 306,233.

Form 990 (2011)

**Part XI Reconciliation of Net Assets**

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,279,129.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,582,468.
3	Revenue less expenses. Subtract line 2 from line 1	3	-303,339.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	126,662.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-112,116.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	-288,793.

**Part XII Financial Statements and Reporting**

Check if Schedule O contains a response to any question 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 in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
2b	Were the organization's financial statements audited by an independent accountant?	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?	X	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued 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		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		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 in Schedule O and describe any steps taken to undergo such audits.		

Form 990 (2011)

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

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

**2011**

Open to Public Inspection

Name of the organization **STAGE ONE: THE LOUISVILLE CHILDREN'S THEATRE, INC.** Employer identification number [REDACTED]

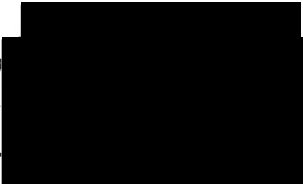
**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, 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.)
- 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 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.)
- 10  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.
  - a  Type I
  - b  Type II
  - c  Type III - Functionally integrated
  - d  Type III - Other
- e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? <span style="float: right;">11g(i)</span>		
(ii) A family member of a person described in (i) above? <span style="float: right;">11g(ii)</span>		
(iii) A 35% controlled entity of a person described in (i) or (ii) above? <span style="float: right;">11g(iii)</span>		
- h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
<b>Total</b>									



**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(C)**  
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

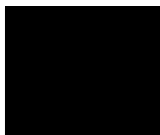
Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	730,452.	1,050,209.	609,721.	823,540.	780,785.	3,994,707.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....	730,452.	1,050,209.	609,721.	823,540.	780,785.	3,994,707.
<b>5</b> 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) .....						197,393.
<b>6 Public support.</b> Subtract line 5 from line 4.						3,797,314.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>7</b> Amounts from line 4 .....	730,452.	1,050,209.	609,721.	823,540.	780,785.	3,994,707.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....	3,928.	1,444.	259.	642.	1,174.	7,447.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) .....	2,781.	3,335.	2,030.	7,968.	34,027.	50,141.
<b>11 Total support.</b> Add lines 7 through 10						4,052,295.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					<b>12</b>	2,498,645.
<b>13</b> First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) .....	<b>14</b>	93.71	%
<b>15</b> Public support percentage from 2010 Schedule A, Part II, line 14 .....	<b>15</b>	93.63	%
<b>16a 33 1/3% support test - 2011.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization .....			<input checked="" type="checkbox"/>
<b>b 33 1/3% support test - 2010.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization .....			<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2011.</b> 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....			<input type="checkbox"/>
<b>b 10% -facts-and-circumstances test - 2010.</b> 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....			<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....			<input type="checkbox"/>





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

(Complete only if you checked the box on line 9 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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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 in line 10b, whether or not the business is regularly carried on .....						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) .....						
13 Total support (Add lines 9, 10c, 11, and 12.)						

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

**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f)) .....	15	%
16 Public support percentage from 2010 Schedule A, Part III, line 15 .....	16	%

**Section D. Computation of Investment Income Percentage**

17 Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f)) .....	17	%
18 Investment income percentage from 2010 Schedule A, Part III, line 17 .....	18	%

19a 33 1/3% support tests - 2011. 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 - 2010. 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

FY 15 1 Month Ended 8/30/2014 ACTUAL	FY 15 1 Month Ended 6/30/2014 BUDGET	Variance to Budget	FY 15 ANNUAL BUDGET
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**REVENUE**

**EARNED REVENUE**

Ticket Sales	0	0	0	323,600
Education Programs	0	0	0	91,000
Other Earned Income	25	0	25	3,900
<b>TOTAL EARNED REVENUE</b>	<b>25</b>	<b>0</b>	<b>25</b>	<b>418,500</b>

**CONTRIBUTED REVENUE**

Board of Directors	16,333	2,500	13,833	75,000
Individual, Corporate & Foundations	71,653	58,333	13,320	675,000
Government & Other Grants	0	0	0	60,000
Fund for the Arts (allocations)	0	0	0	400,000
Fund for the Arts (matching gifts)	0	0	0	15,000
Fund Raising Events (net) and Other	4	0	4	28,000
In-Kind Revenue	350	350	0	7,000
<b>TOTAL CONTRIBUTIONS</b>	<b>88,340</b>	<b>61,183</b>	<b>27,157</b>	<b>1,260,000</b>

**TOTAL REVENUE**

	<b>88,365</b>	<b>61,183</b>	<b>27,182</b>	<b>1,878,500</b>
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**EXPENDITURES**

Production - overhead	25,487	23,380	2,107	312,469
Productions - direct costs	0	0	0	414,702
Education - overhead	8,374	8,482	(108)	144,032
Education Programs - direct costs	0	0	0	25,900
Marketing & Patron Services	8,171	8,847	(676)	153,378
Development	6,223	6,495	(272)	120,064
Finance & Administrative	29,675	30,174	(499)	388,197
<b>TOTAL EXPENDITURES</b>	<b>77,930</b>	<b>77,378</b>	<b>552</b>	<b>1,558,742</b>

**TOTAL REVENUE OVER (UNDER) EXPENDITURES**

	<b>10,435</b>	<b>(16,195)</b>	<b>26,630</b>	<b>119,758</b>
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Prepared for: StageOne's Board of Directors  
 Prepared by: Tonya McSorley on 7/24/2014



**Part IV** **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

SCHEDULE A, PART II, 2011 COLUMN - THE ORGANIZATION CHANGED ITS TAX YEAR

END. AS A RESULT, THE 2011 COLUMN IS FOR THE PERIOD JULY 1, 2011 THROUGH

MAY 31, 2012.

COPY

**Schedule B**  
(Form 990, 990-EZ,  
or 990-PF)

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No. 1545-0047

**2011**

Name of the organization

STAGE ONE: THE LOUISVILLE CHILDREN'S  
THEATRE, INC.

Employer identification number

6

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

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

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

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

**Special Rules**

For a section 501(c)(3) organization 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) and received from any one contributor, during the year, a contribution 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 a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to 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. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ..... ▶ \$ \_\_\_\_\_

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Name of organization

STAGE ONE: THE LOUISVILLE CHILDREN'S THEATRE, INC.

Employer identification number



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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 410,358.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2		\$ 75,125.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3		\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4		\$ 30,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5		\$ 40,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6		\$ 55,169.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization

STAGE ONE: THE LOUISVILLE CHILDREN'S  
THEATRE, INC.

Employer identification number



**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
7		\$ 21,306.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

STAGE ONE: THE LOUISVILLE CHILDREN'S  
THEATRE, INC.



**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 **STAGE ONE: THE LOUISVILLE CHILDREN'S THEATRE, INC.** Employer identification number [REDACTED]

**Part III** Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organization for the year. 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 information 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



**SCHEDULE D**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

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

OMB No. 1545-0047

**2011**

Open to Public Inspection

Name of the organization **STAGE ONE: THE LOUISVILLE CHILDREN'S THEATRE, INC.** Employee identification number [REDACTED]

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....		
2 Aggregate contributions to (during year) .....		
3 Aggregate 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" to 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 (e.g., recreation or education)  Preservation of an 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 in (a) .....   | 2c                              |
| d Number of conservation easements included in (c) acquired after 8/17/06, 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, and enforcing conservation easements during the year ▶ \_\_\_\_\_
- 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_
- 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....
- Yes  No
- 9 In Part XIV, 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" to Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116 (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 XIV, the text of the footnote to its financial statements that describes these items.
- b If the organization elected, as permitted under SFAS 116 (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) Revenues included in 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 SFAS 116 (ASC 958) relating to these items:
- a Revenues included in Form 990, Part VIII, line 1 .....
- b Assets included in Form 990, Part X .....

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Significant Collections** (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a  Public exhibition
  - b  Scholarly research
  - c  Preservation for future generations
  - d  Loan or exchange programs
  - e  Other \_\_\_\_\_
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.
- 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" to 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 XIV 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?  Yes  No
- b If "Yes," explain the arrangement in Part XIV.

**Part V Endowment Funds.** Complete if the organization answered "Yes" to 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	27,721.	27,712.	57,864.	67,004.	
b Contributions					
c Net investment earnings, gains, and losses	-190.	84.	222.	823.	
d Grants or scholarships					
e Other expenditures for facilities and programs	6,691.	75.	30,374.	9,963.	
f Administrative expenses					
g End of year balance	20,840.	27,721.	27,712.	57,864.	

- 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  100.00 %
  - c Temporarily restricted endowment  \_\_\_\_\_ %
- The percentages in 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 |     | X  |
| (ii) related organizations  |     | X  |
- b If "Yes" to 3a(i), are the related organizations listed as required on Schedule R?  Yes  No
- 4 Describe in Part XIV the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.** See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		94,298.	52,745.	41,553.
e Other		35,214.	34,020.	1,194.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				42,747.

**Part VII Investments - Other Securities.** 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) .....		
(I) .....		
<b>Total.</b> (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶		

**Part VIII Investments - Program Related.** See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) .....		
(2) .....		
(3) .....		
(4) .....		
(5) .....		
(6) .....		
(7) .....		
(8) .....		
(9) .....		
(10) .....		
<b>Total.</b> (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶		

**Part IX Other Assets.** See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) .....	
(2) .....	
(3) .....	
(4) .....	
(5) .....	
(6) .....	
(7) .....	
(8) .....	
(9) .....	
(10) .....	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 15.) ▶	

**Part X Other Liabilities.** See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
1. (1) Federal income taxes	
(2) LINE OF CREDIT	248,225.
(3) CAPITAL LEASE OBLIGATION	862.
(4) .....	
(5) .....	
(6) .....	
(7) .....	
(8) .....	
(9) .....	
(10) .....	
(11) .....	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶	

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Schedule D (Form 990) 2011

<b>Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements</b>			
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	79,129.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,582,468.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-303,339.
4	Net unrealized gains (losses) on investments	4	-467.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	-111,649.
9	Total adjustments (net). Add lines 4 through 8	9	-112,116.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	-415,455.

<b>Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return</b>			
1	Total revenue, gains, and other support per audited financial statements	1	1,296,949.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	-467.
b	Donated services and use of facilities	2b	14,306.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	3,981.
e	Add lines 2a through 2d	2e	17,820.
3	Subtract line 2e from line 1	3	1,279,129.
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 XIV.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	1,279,129.

<b>Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return</b>			
1	Total expenses and losses per audited financial statements	1	1,600,755.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	14,306.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	3,981.
e	Add lines 2a through 2d	2e	18,287.
3	Subtract line 2e from line 1	3	1,582,468.
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 XIV.)	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	1,582,468.

**Part XIV Supplemental Information**

Complete this part to 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, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

PART V, LINE 4: THE INTENDED USE OF THE ORGANIZATION'S ENDOWMENT FUND

IS TO FUND THE ORGANIZATION'S PROGRAMS.

PART X, LINE 2: THE ORGANIZATION IS ORGANIZED AS A NOT-FOR-PROFIT

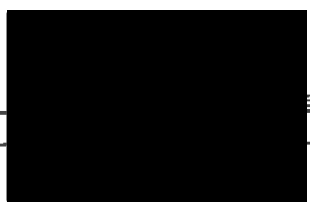
ORGANIZATION AND IS EXEMPT FROM FEDERAL TAXATION UNDER THE PROVISIONS OF

SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE.

THE ORGANIZATION RECOGNIZES UNCERTAIN INCOME TAX POSITIONS USING THE

MORE-LIKELY-THAN-NOT APPROACH AS DEFINED IN THE ACCOUNTING STANDARDS

Part XIV Supplemental Information (continued)



CODIFICATION. NO LIABILITY FOR UNCERTAIN TAX POSITIONS HAS BEEN RECORDED

IN THE ACCOMPANYING FINANCIAL STATEMENTS. THE ORGANIZATIONS 2008-2011 TAX

YEARS REMAIN OPEN AND SUBJECT TO EVALUATION.

PART XI, LINE 8 - OTHER ADJUSTMENTS:

NET ASSETS ACCEPTED FROM MUSIC THEATRE OF LOUISVILLE -111,649.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

COST OF GOODS SOLD 3,981.

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

COST OF GOODS SOLD 3,981.

COPY

**SCHEDULE L**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Transactions With Interested Persons**

▶ Complete if the organization answered  
"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,  
or Form 990-EZ, Part V, line 38a or 40b.  
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

**2011**

Open To Public  
Inspection

Name of the organization **STAGE ONE: THE LOUISVILLE CHILDREN'S  
THEATRE, INC.**

Employer identification number



**Part I Excess Benefit Transactions** (section 501(c)(3) and section 501(c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ..... ▶ \$ \_\_\_\_\_

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ..... ▶ \$ \_\_\_\_\_

**Part II Loans to and/or From Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a.

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
STEVE ELLIS - OPE	X		50,000.	50,000.		X		X		X
<b>Total</b>				50,000.						

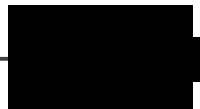
Total ..... ▶ \$ 50,000.

**Part III Grants or Assistance Benefiting Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount and type of assistance

SEE PART V FOR CONTINUATIONS



**Part IV Business Transactions Involving Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No

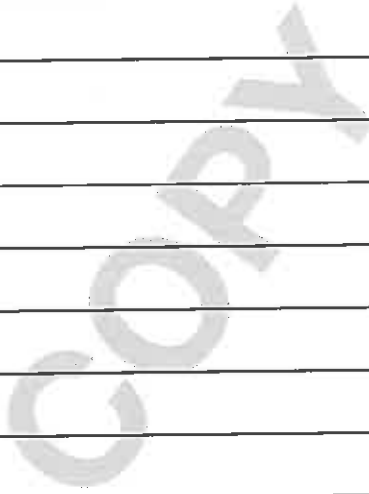
**Part V Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).

SCHEDULE L, PART II, LOANS TO AND FROM INTERESTED PERSONS:

(A) NAME OF PERSON: STEVE ELLIS

(A) PURPOSE OF LOAN: OPERATING PURPOSES



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

Department of the Treasury  
Internal Revenue Service

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

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

OMB No. 1545-0047

**2011**

Open to Public  
Inspection

Name of the organization

STAGE ONE: THE LOUISVILLE CHILDREN'S  
THEATRE, INC.

Identification number

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

QUALITY, ENTERTAINING, AND PROFESSIONAL THEATER FOR YOUNG AUDIENCES AND  
BY FOSTERING AN APPRECIATION OF THE ARTS THAT DEVELOPS THE WHOLE CHILD,  
SUPPORTS THE LEARNING ENVIRONMENT AND BUILDS STRONG FAMILY BONDS.

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

AND BUILDS STRONG FAMILY BONDS. TO PROVIDE EDUCATIONAL EXPERIENCES IN  
THE THEATRICAL ARTS THROUGH PROGRAMS DELIVERED IN THE CLASSROOM IN THE  
JEFFERSON COUNTY PUBLIC SCHOOL SYSTEM, GRADES K-12.

FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 IS REVIEWED BY THE

FINANCE DIRECTOR, A CPA KNOWLEDGABLE OF NOT-FOR-PROFIT ORGANIZATIONS AND  
FAMILIAR WITH THE FORM 990 REQUIREMENTS BEFORE THE RETURN WAS FILED. THE  
RETURN WAS ALSO REVIEWED BY THE CEO PRIOR TO ITS FILING. THE FORM 990 WAS  
PROVIDED TO THE ENTIRE GOVERNING BODY PRIOR TO ITS FILING.

FORM 990, PART VI, SECTION B, LINE 12C: ANNUALLY, MEMBERS OF THE BOARD OF

DIRECTORS ARE REQUIRED TO SIGN OFF THAT THEY HAVE READ AND ARE FAMILIAR  
WITH THE ORGANIZATIONS CONFLICT OF INTEREST POLICIES AND ARE REQUIRED TO  
DISCLOSE ANY KNOWN CONFLICTS OF INTEREST. THIS PROCEDURE WAS FIRST  
IMPLEMENTED AT THE ANNUAL MEETING IN JUNE 2009.

THE ORGANIZATION HAS IMPLEMENTED A PROCESS OF SOLICITING BIDS FROM

UNAFFILIATED VENDORS (SUCH AS INSURANCE) FOR EVALUATION BY THE EXECUTIVE  
COMMITTEE AND COMPARISON TO THAT SUBMITTED BY BOARD MEMBERS IN CASES WHERE

A MEMBER OF THE BOARD PROPOSES TO PROVIDE GOODS OR SERVICES TO THE

Schedule O (Form 990 or 990-EZ) (2011)

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.  
132211  
01-23-12



Name of the organization STAGE ONE: THE LOUISVILLE CHILDREN'S THEATRE, INC.



number

ORGANIZATION.

DUE TO THE SMALL NUMBER OF KEY EMPLOYEES IN THE ORGANIZATION, MONITORING IS PERFORMED ON AN INFORMAL BASIS THROUGH THE CLOSE CONTACT WITH AND ACTIVE PARTICIPATION BY THE OFFICERS OF THE BOARD OF DIRECTORS WITH THE CEO.

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

THE CEO'S COMPENSATION WAS DETERMINED BY THE EXECUTIVE COMMITTEE OF THE BOARD IN JUNE, 2007 AFTER REVIEWING INDUSTRY COMPARABILITY DATA FOR THEATRE GROUPS OF SIMILAR SIZE AROUND THE COUNTRY. THE PROCESS WAS NOT DOCUMENTED, HOWEVER, THE EXECUTIVE COMMITTEE OF THE BOARD REVIEWS THE EXECUTIVE DIRECTORS PERFORMANCE AND COMPENSATION IN APRIL OR MAY OF EACH YEAR AT THE TIME THE BUDGET FOR THE ENSUING FISCAL YEAR IS BEING REVIEWED. THE EXECUTIVE COMMITTEE ESTABLISHES PERFORMANCE GOALS FOR THE EXECUTIVE DIRECTOR WHICH ARE COMMITTED TO IN WRITING.

THE CEO USES INDUSTRY COMPARABILITY DATA, AMONG OTHER THINGS, TO DETERMINE COMPENSATION FOR DEPARTMENT HEADS. THE PROCESS IS INFORMAL.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

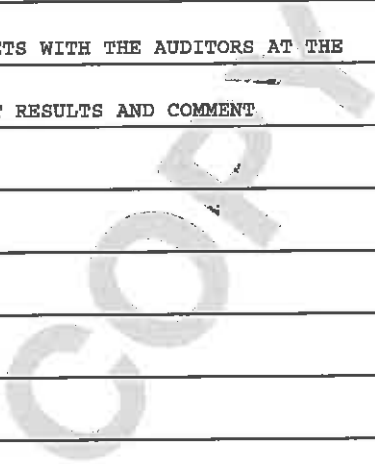
NET UNREALIZED LOSSES ON INVESTMENTS:	-467.
NET ASSETS ACCEPTED FROM MUSIC THEATRE OF LOUISVILLE	-111,649.
TOTAL TO FORM 990, PART XI, LINE 5	-112,116.

Name of the organization STAGE ONE: THE LOUISVILLE CHILDREN'S THEATRE, INC.



FORM 990, PAGE 12, PART XII, LINE 2C

THE PROCESS HAS NOT CHANGED FROM PRIOR YEAR. THE BOARD OF DIRECTORS APPOINTS AN AUDIT COMMITTEE ANNUALLY. PRIOR TO THE ENGAGEMENT OF THE AUDITORS, THE FINANCE DIRECTOR MAKES A RECOMMENDATION TO THE COMMITTEE BASED ON HIS KNOWLEDGE OF THE REPUTATION OF THE FIRM, THEIR EXPERTISE IN THE NOT-FOR-PROFIT INDUSTRY, THE QUALITY OF THEIR WORK, AND REASONABLENESS OF FEES. THE AUDIT COMMITTEE DISCUSSES THE RECOMMENDATION OF THE FINANCE DIRECTOR AND EITHER APPROVES OR REJECTS THE RECOMMENDATION. THE AUDIT COMMITTEE MEETS WITH THE AUDITORS AT THE CONCLUSION OF THE AUDIT TO DISCUSS THE AUDIT RESULTS AND COMMENT LETTER.



**SCHEDULE R**  
 (Form 990)  
 Department of the Treasury  
 Internal Revenue Service

**Related Organizations and Unrelated Partnerships**  
 Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.  
 Attach to Form 990. See separate instructions.

Name of the organization: STAGE ONE: THE LOUISVILLE CHILDREN'S THEATRE, INC. Employer identification number: [REDACTED]

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
MUSIC THEATRE OF LOUISVILLE, INC - 61-1138603, 323 W BROADWAY, NO. 600, LOUISVILLE, KY 40202	THEATRICAL PRODUCTION	KENTUCKY	501(C)3	LINE 7 N/A			X
CULTURAL PARTNERS SUPPORTING ORGANIZATION - 26-0320992, 323 W BROADWAY, NO. 600, LOUISVILLE, KY 40202	PROVIDE SUPPORT TO RELATED ORGANIZATIONS	KENTUCKY	501(C)3	LINE 11A, I N/A			X

Schedule R (Form 990) 2011 **Part III** Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

**Part V Transactions With Related Organizations** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)

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

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

- a Receipt of (i) interest (iii) royalties or (iv) rent from a controlled entity
- b Gift, grant, or capital contribution to related organization(s)
- c Gift, grant, or capital contribution from related organization(s)
- d Loans or loan guarantees to or for related organization(s)
- e Loans or loan guarantees by related organization(s)
- f Sale of assets to related organization(s)
- g Purchase of assets from related organization(s)
- h Exchange of assets with related organization(s)
- i Lease of facilities, equipment, or other assets to related organization(s)
- j Lease of facilities, equipment, or other assets from related organization(s)
- k Performance of services or membership or fundraising solicitations for related organization(s)
- l Performance of services or membership or fundraising solicitations by related organization(s)
- m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- n Sharing of paid employees with related organization(s)
- o Reimbursement paid to related organization(s) for expenses
- p Reimbursement paid by related organization(s) for expenses
- q Other transfer of cash or property to related organization(s)
- r Other transfer of cash or property from related organization(s)

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

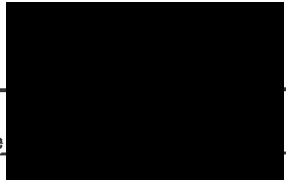
	(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)						X
(2)						X
(3)						X
(4)						X
(5)						X
(6)						X

Schedule R (Form 990) 2011

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

Table with columns: (a) Name, address, and EIN of entity; (b) Primary activity; (c) Legal domicile (state or foreign country); (d) Predominant income (related, unrelated, excluded from tax under section 512-514); (e) Are all partners sec. 501(c)(3) orgs.; (f) Share of total income; (g) Share of end-of-year assets; (h) Disproportionate allocations? Yes/No; (i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065); (j) General or managing partner? Yes/No; (k) Percentage ownership.



**Part VII** Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see

Lined area for supplemental information with a large diagonal 'COPY' watermark.

ARTICLES OF INCORPORATION  
OF  
LOUISVILLE CHILDREN'S THEATER, INC.

ORIGINAL  
1948

We, the undersigned, in order to form a corporation for the purposes hereinafter stated under provisions of Chapter 273, Kentucky Revised Statutes, relating to religious, charitable and educational societies, do hereby certify as follows:

A. The name of the corporation is Louisville Children's Theater, Inc.

B. The purpose for which this corporation is organized is to educate children in the public and private schools of the City of Louisville and environs by presenting educational plays and theatrical performances. Emphasis will be placed on the presentation of such plays and theatrical performances tending not only to educate children, but to inspire their patriotism. The corporation and its purposes and operations shall not involve or produce any private pecuniary gain or profit.

In order to more conveniently carry out the above, it shall have the power to buy, sell, mortgage, lease and convey real and personal property necessary or incidental to the purposes set out above; to promote, manage, advertise, direct and operate theaters for the production of theatrical performances for children; to have a corporate seal and alter it at pleasure; to sue and be sued in its corporate name; to contract and be contracted with; to make by-laws not inconsistent with law; to promote the purposes for which it is formed in this State and elsewhere as may be permitted by law; to accept gifts and to carry out any terms, requests or conditions prescribed or made by the donor thereof; to become a member of any other religious, charitable or educational corporation organized under the laws of this State, or to become affiliated with other organizations of like character existing under the laws of this or another State. and any other powers necessary or incident to the



accomplishment of the purposes set out hereinabove.

C. The corporation shall have the right to incur such amount of indebtedness as its Board of Trustees may from time to time deem proper.

D. Any conveyance of real estate by the corporation shall be by deed under its corporate seal and shall be signed by the President and the Secretary of the Board of Trustees at the time of such transfer.

E. The duration of the corporation shall be perpetual, unless sooner dissolved according to law.

F. The principal office of the corporation is to be located in the City of Louisville, Jefferson County, Kentucky, and the name and address of the person to whom service of process is:

G. The government of the corporation shall be a Board of Trustees consisting of not less than 3 nor more than 25 members who shall have the power, among other things, to adopt rules for the government and operation of the corporation; to employ and fix the compensation of agents for the conduct of the business of the corporation, and to select from among their number an executive committee consisting of not less than 3, nor more than 7 members for the normal administration of the business of the corporation.

H. The names and addresses of the trustees who are to serve until the election of the next trustees shall be:

I. The members and the trustees of this corporation shall not be personally liable for any debt or obligation of the corporation solely by a reason of being members or trustees.

IN TESTIMONY WHEREOF, Witness our signatures this 7<sup>th</sup> day <sup>Ave.</sup> of ~~July~~, 1948.

N. S. Wilder  
Mrs J. H. Simpson Jr - Al T. Simpson  
Mrs. Harold H. Brigham - Aime Gordon Brigham

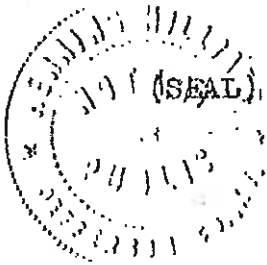
STATE OF KENTUCKY

COUNTY OF JEFFERSON

I, Henning Hilliard, a Notary Public, in and for the County and State aforesaid, do hereby certify that the foregoing Articles of Incorporation were this day produced to me by N. S. Wilder, Mrs. Harold Brigham and Mrs. J. H. Simpson, Jr., each of whom acknowledged same to be his or her act and deed for the purposes specified therein and consented that the same might be recorded.

IN TESTIMONY WHEREOF, I have hereunder set my hand and seal this 7<sup>th</sup> day of ~~July~~, 1948. <sup>Ave.</sup>

My commission expires Oct. 17, 1949.



Henning Hilliard  
Notary Public, Jefferson County, Ky.

ORIGINAL COPY  
FILED AND RECORDED

AUG 10 1948

DATE

George Blain Hatcher  
SECRETARY OF STATE OF KENTUCKY  
FRANKFORT, KENTUCKY

BY

S. L. Ryan  
DEPUTY

STATE OF KENTUCKY )  
:  
COUNTY OF JEFFERSON )

I, a Notary Public, in and for the county and state aforesaid, hereby certify that H. Sheppard Musson, President of STAGE ONE: The Louisville Children's Theatre (formerly The Louisville Children's Theatre, Inc.) appeared before me, was sworn under oath and executed the above document in my presence, this 12 day of January, 1980.

My commission expires: 8/12/81.

  
Notary Public

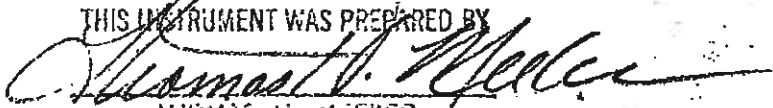
STATE OF KENTUCKY )  
:  
COUNTY OF JEFFERSON )

I, a Notary Public, in and for the county and state aforesaid, hereby certify that Mimi Middleton, Secretary of STAGE ONE: The Louisville Children's Theatre (formerly The Louisville Children's Theatre, Inc.) appeared before me, was sworn under oath and executed the above document in my presence, this 12 day of January, 1980.

My commission expires: 8/12/81

  
Notary Public

THIS INSTRUMENT WAS PREPARED BY



THOMAS H. MEEKER  
WYATT, GRAFTON, & BLOSS  
THIRTY-SEVEN FLOOR CITICORP PLAZA  
LOUISVILLE, KY. 40202

SECRETARY OF STATE  
RECEIVED

FEB 11 1980

*en 400*

ARTICLES OF AMENDMENT TO  
THE ARTICLES OF INCORPORATION OF  
THE LOUISVILLE CHILDREN'S THEATRE, INC.  
COMMONWEALTH OF KENTUCKY

H. Sheppard Musson, President, and Mimi Middleton,  
Secretary of the Louisville Children's Theatre, Inc., a  
Kentucky non-profit corporation, with its principal office  
located in Louisville, Kentucky, do hereby certify that the  
following amendments to the Articles of Incorporation were  
adopted by a consent in writing as signed by all members of **161.525**  
the Board of Directors entitled to vote with respect thereto.

Section A of the Articles of Incorporation was amended  
to read as follows:

The name of the corporation is STAGE ONE: The Louisville  
Children's Theatre, Inc.

~~Section F of the Articles of Incorporation was amended  
to read as follows:~~

~~The principal office of the corporation is to be located  
in the City of Louisville, Jefferson County, Kentucky, and  
the name and address of its resident agent for service of  
process is:~~

~~H. Sheppard Musson  
187 Westwind Road  
Louisville, Kentucky 40207~~

IN WITNESS WHEREOF, said H. Sheppard Musson, President, and  
Mimi Middleton, Secretary of STAGE ONE: The Louisville Children's  
Theatre (formerly The Louisville Children's Theatre, Inc.),  
acting for and on behalf of said corporation, have hereunto  
subscribed their names this 7th day of January, 1980.

ORIGINAL COPY  
FILED  
SECRETARY OF STATE OF KENTUCKY  
FRANKFORT, KENTUCKY

FEB 11 1980

*Francis James Gills*  
SECRETARY OF STATE

*H. Sheppard Musson*  
H. Sheppard Musson  
President

*Mimi Middleton*  
Mimi Middleton  
Secretary

**Request for Taxpayer  
 Identification Number and Certification**

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

Print or type  
 See Specific Instructions on page 2

Name (as shown on your income tax return)  
**STAGE ONE: THE LOUISVILLE CHILDREN'S THEATRE INC.**

Business name, if different from above  
**STAGEONE FAMILY THEATRE**

Check appropriate box:  Individual/Sole proprietor  Corporation  Partnership  Other **Non-Profit Org.**  Exempt from backup withholding

Address (number, street, and apt. or suite no.)  
**323 West Broadway, Ste 600**

City, state, and ZIP code  
**LOUISVILLE KY 40202**

List account number(s) here (optional)

Requester's name and address (optional)

**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 your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I Instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3. Note: If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number

--	--	--	--	--	--	--	--	--	--

**Part II Certification**

Under penalties of perjury, I certify that:

- 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
- 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
- I am a U.S. person (including a U.S. resident alien).

**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 on page 4.)

Sign Here Signature of U.S. person **Michael J. Brooks** Date **9/24/2012**

**Purpose of Form**

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

**U.S. person.** Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding,
- or
- Claim exemption from backup withholding if you are a U.S. exempt payee.

**Note.** If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

For federal tax purposes you are considered a person if you are:

- An individual who is a citizen or resident of the United States,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, or

• Any estate (other than a foreign estate) or trust. See Regulations sections 301.7701-8(a) and 7(a) for additional information.

**Foreign person.** If you are a foreign person, do not use Form W-9. Instead, use the appropriate Form W-8 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

**Nonresident alien who becomes a resident alien.** Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the recipient has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

- The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
- The treaty article addressing the income.
- The article number (or location) in the tax treaty that contains the saving clause and its exceptions.

**StageOne Family Theatre, Inc.**

**Financial Statements**

**Year Ended May 31, 2013**

**StageOne Family Theatre, Inc.**

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**May 31, 2013**

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## **Independent Auditor's Report**

To the Board of Directors  
**StageOne Family Theatre, Inc.**

We have audited the accompanying financial statements of StageOne Family Theatre, Inc ("the Organization"), which comprise the statement of financial position as of May 31, 2013 and the related statements of activities and changes in net assets (deficit), and cash flows for the year then ended, and the related notes to the financial statements.

### **Management's Responsibility for the Financial Statements**

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

### **Auditor's Responsibility**

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements 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 the entity's internal control. Accordingly, we express no such opinion. An audit includes evaluating the appropriateness of accounting policies used and the reasonableness of significant estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence obtained is sufficient and appropriate to provide a basis for our audit opinion.



Mountjoy Chilton Medley LLP  
2600 Meidinger Tower | 462 South Fourth Street | Louisville, KY 40202  
P 502.749.1900 | F 502.749.1900  
888.587.1719 | [www.mcmcpa.com](http://www.mcmcpa.com)

**Kentucky**  
**Indiana**  
**Ohio**



**Independent Auditor's Report (Continued)**

**Opinion**

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of StageOne Family Theatre, Inc as of May 31, 2013 the results of its activities, and its cash flows for the year then ended in conformity with accounting principles generally accepted in the United States of America.

**Restatement**

As described in Note M to the financial statements, the Organization identified a misstatement in prior years financial statements. Our opinion is not modified with respect to this matter.



Louisville, Kentucky  
January 7, 2014

**StageOne Family Theatre, Inc.**  
**Statement of Financial Position**  
**May 31, 2013**

**Assets**

Cash and cash equivalents	\$ 44,392
Accounts receivable	23,379
Prepaid and other	34,684
Pledges receivable	83,640
Investments	25,937
Property and equipment	<u>42,354</u>
Total Assets	<u>\$ 254,386</u>

**Liabilities and Net Assets**

**Liabilities**

Line of credit	\$ 248,225
Accounts payable and accrued expenses	159,661
Deferred revenue	36,009
Term loan	72,442
Capital lease obligation	<u>7,750</u>
Total Liabilities	524,087

**Commitments and Contingencies**

**Net Assets (Deficit)**

Unrestricted	(578,207)
Temporarily restricted	<u>308,506</u>

Total Net Assets (Deficit) (269,701)

Total Liabilities and Net Assets \$ 254,386

See accompanying notes.

**StageOne Family Theatre, Inc.**  
**Statement of Activities and Changes in Net Assets (Deficit)**  
**Year Ended May 31, 2013**

	<u>Unrestricted</u>	<u>Temporarily Restricted</u>	<u>Total</u>
<b>Revenues and Support</b>			
Ticket sales and fees	\$ 344,295	\$ -	\$ 344,295
Contributions and grants	829,402	258,506	1,087,908
Educational programs	87,924	-	87,924
In-kind gifts	5,089	-	5,089
Fundraising events	13,820	-	13,820
Novelty and concession sales	6,618	-	6,618
Rental income	1,321	-	1,321
Gain on discharge of debt	32,167	-	32,167
Miscellaneous	22,056	-	22,056
Interest	35	-	35
Net unrealized loss on investments	(205)	-	(205)
Net assets released from restrictions	<u>243,651</u>	<u>(243,651)</u>	<u>-</u>
<b>Total Revenues and Support</b>	<b>1,586,173</b>	<b>14,855</b>	<b>1,601,028</b>
<b>Expenses</b>			
<b>Program Services</b>			
Productions	902,938	-	902,938
Educational programs	<u>152,926</u>	<u>-</u>	<u>152,926</u>
<b>Total Program Services</b>	<b>1,055,864</b>	<b>-</b>	<b>1,055,864</b>
<b>Supporting Services</b>			
General and administrative	386,957	-	386,957
Fundraising	<u>139,115</u>	<u>-</u>	<u>139,115</u>
<b>Total Supporting Services</b>	<b><u>526,072</u></b>	<b><u>-</u></b>	<b><u>526,072</u></b>
<b>Total Expenses</b>	<b><u>1,581,936</u></b>	<b><u>-</u></b>	<b><u>1,581,936</u></b>
<b>Changes in Net Assets</b>	<b>4,237</b>	<b>14,855</b>	<b>19,092</b>
<b>Net Assets (Deficit) at Beginning of Year, as Restated</b>	<b><u>(582,444)</u></b>	<b><u>293,651</u></b>	<b><u>(288,793)</u></b>
<b>Net Assets (Deficit) at End of Year</b>	<b><u>\$ (578,207)</u></b>	<b><u>\$ 308,506</u></b>	<b><u>\$ (269,701)</u></b>

See accompanying notes.

**StageOne Family Theatre, Inc.**  
**Statement of Cash Flows**  
**Year Ended May 31, 2013**

Operating Activities	
Changes in Net Assets	\$ 19,092
Adjustments to reconcile changes in net assets to net cash provided by operating activities:	
Depreciation	19,340
Gain on discharge of debt	(32,167)
Changes in:	
Accounts receivable	(4,300)
Prepaid expenses	17,823
Pledges receivable	22,849
Accounts payable and accrued expenses	15,447
Deferred revenue	<u>(689)</u>
Net Cash Provided by Operating Activities	57,395
Investing Activities	
Purchases of investments	(16,991)
Proceeds from sales of investments	<u>2,161</u>
Net Cash Used by Investing Activities	(14,830)
Financing Activities	
Payments on capital lease	(2,037)
Payments on related party advance	(50,000)
Payments on term loan	<u>(10,418)</u>
Net Cash Used by Financing Activities	<u>(62,455)</u>
Net Decrease in Cash and Cash Equivalents	(19,890)
Cash and Cash Equivalents at Beginning of Year	<u>64,282</u>
Cash and Cash Equivalents the End of Year	<u>\$ 44,392</u>
Supplemental Disclosure	
Cash paid for interest	\$ 13,546
Noncash Investing and Financing	
Equipment purchased under capital lease	8,925

See accompanying notes.

**StageOne Family Theatre, Inc.**  
**Notes to Financial Statements**  
**May 31, 2013**

**Note A - Nature of Operations**

StageOne Family Theatre, Inc. ("SO" or "the Organization") is located in Louisville, KY and provides quality theatre experiences that engage, educate and entertain children and families.

**Note B - Summary of Significant Accounting Policies**

The significant accounting policies are described below to enhance the usefulness of the financial statements to the reader.

1. **Basis of Accounting:** The financial statements of the Organization have been prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America ("GAAP"). The Accounting Standards Codification ("ASC") as produced by the Financial Accounting Standards Board ("FASB") is the sole source of authoritative accounting technical literature for nongovernmental entities.
2. **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 amounts reported in the financial statements and accompanying notes. Actual results could differ from those estimates.
3. **Subsequent Events:** Subsequent events for the Organization have been considered through the date of the Independent Auditor's Report which represents the date that the financial statements were available to be issued.
4. **Donor-Imposed Restrictions:** The Organization records and reports its assets, liabilities, net assets, revenues, expenses, gains and losses, and other support based on the existence or absence of donor-imposed restrictions.

The Organization reports gifts of cash and other assets as restricted support if they are received with donor stipulations that limit the use of the donated assets. When a donor restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statements of activities as net assets released from restriction. Restricted contributions whose restrictions are met in the same reporting period are recorded as unrestricted contributions.

The Organization reports gifts as unrestricted support unless explicit donor stipulations specify how the donated assets must be used. Gifts of long-lived assets with explicit restrictions that specify how the assets are to be used and gifts of cash or other assets that must be used to acquire long-lived assets are reported as restricted support. Absent explicit donor stipulations about how long those long-lived assets must be maintained, the Organization reports expirations of donor restrictions when the donated or acquired long-lived assets are placed in service.

Permanently restricted net assets include those contributions and other inflows of assets whose use by the Organization is limited by donor-imposed stipulations that neither expire by the passage of time nor can be fulfilled or otherwise removed by the actions of the Organization. The Organization has no permanently restricted net assets at May 31, 2013.

**StageOne Family Theatre, Inc.**  
**Notes to Financial Statements (Continued)**  
**May 31, 2013**

**Note B - Summary of Significant Accounting Policies (Continued)**

5. Contributed Services, Supplies, Property and Rent: Certain contributed services, supplies, property and rent are recorded as support and expenses or a related asset at fair value when determinable, otherwise at values indicated by the donor. The Organization received contributed services and supplies of \$5,089 during the year ended May 31, 2013.
6. Cash and Cash Equivalents: The Organization considers all highly liquid investments with a maturity when purchased of three months or less, that are not designated for a specific purpose, to be cash equivalents.
7. Accounts Receivable: Accounts receivable consist of amounts due for musical camps and ticket sales. The Organization provides an allowance for doubtful accounts which is based upon a review of outstanding receivables, historical collection information, and existing economic conditions. Accounts receivable are due 30 days after the date of sale. Accounts receivable past due more than 120 days are considered delinquent. Delinquent receivables are written off based on individual credit evaluation and specific circumstances of the customer. No allowance has been provided May 31, 2013 as management considers all amounts to be fully collectible.
8. Investments: Investments in marketable securities are recorded at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. Net realized and unrealized gains and losses are reflected in the statements of activities and changes in net assets. Receipt of donated investments is recorded at the quoted market value of the investment at the time of donation.

Investment securities are exposed to various risks, such as interest rate, market and credit. Due to the level of risk associated with certain investment securities and the level of uncertainty related to changes in the value of investment securities, it is at least reasonably possible that changes in risks in the near term would result in material changes in the fair value of investments and net assets of the Organization.

9. Property and Equipment: Property and equipment are recorded at cost. Donated assets are recorded at estimated fair value on the date of gift. Depreciation of property and equipment is provided over the estimated useful lives of the respective assets on a straight-line basis ranging from four to ten years. Depreciation expense was \$19,340 for the year ended May 31, 2013.
10. Deferred Revenue: Deferred revenue consists primarily of advance ticket sales and registration fees for performances and events in the following fiscal year.
11. Income Tax Status: The Organization is organized as a not-for-profit organization and is exempt from federal taxation under the provisions of Section 501(c)(3) of the Internal Revenue Code.

The Organization recognizes uncertain income tax positions using the "more-likely-than-not" approach as defined in the ASC. No liability for uncertain tax positions has been recorded in the accompanying financial statements. The Organization's 2009 - 2012 tax years remain open and subject to evaluation.

12. Advertising Costs: Advertising costs are expensed as incurred. Advertising costs totaled \$14,457 for the year ended May 31, 2013.

**StageOne Family Theatre, Inc.**  
**Notes to Financial Statements (Continued)**  
**May 31, 2013**

**Note C - Future Business Plans**

Prior to the year ended May 31, 2013, the Organization recognized decreases in net assets and negative cash flow from operations. The Organization currently has a negative current ratio. During 2013, management took several steps to reverse the negative trends. Management has continued to cut costs, including staff reductions, review of all productions, and improved budgeting and planning. Steps have been taken to increase revenue by reviewing productions to ensure they are hitting the target audience and reorganizing the development department to provide more focus on contributions and competitive grant solicitations. In addition, the Organization's board of directors has been restructured and the Organization is currently working with a fundraising consultant on a campaign to raise \$1,000,000 for operations. Management currently projects the Organization to have an increase in net assets for fiscal year end 2014.

**Note D - Pledges Receivable**

Pledges receivable at May 31, 2013 are due in less than one year. No provision for doubtful accounts has been made at May 31, 2013, as management considers all amounts to be fully collectible.

**Note E - Fair Value Measurements**

The ASC establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to the unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under FASB ASC are described below:

- Level 1 - Quoted prices (unadjusted) in active markets that are accessible at the measurement date for identical assets or liabilities.
- Level 2 - Observable inputs other than Level 1 prices, such as quoted prices for similar assets or liabilities; quoted prices in markets that are not active; or other inputs that are observable or can be corroborated by observable market data.
- Level 3 - Unobservable inputs that are supported by little or no market activity and are significant to the fair value of the asset or liabilities. Level 3 includes values determined using pricing models, discounted cash flow methodologies, or similar techniques reflecting the Organization's own assumptions.

The fair value of the Organization's investments is derived using quoted prices in active markets for identical assets. These inputs are classified within Level 1 of the valuation hierarchy.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Organization believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

There have been no changes in the fair value methodologies used at May 31, 2013.

**StageOne Family Theatre, Inc.**  
**Notes to Financial Statements (Continued)**  
**May 31, 2013**

**Note E - Fair Value Measurements (Continued)**

The following table sets forth by level, within the fair value hierarchy, the Organization's investments at fair value as of May 31, 2013:

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Money market fund	\$ 25,566	\$ -	\$ -	\$ 25,566
Common stock	<u>371</u>	<u>-</u>	<u>-</u>	<u>371</u>
Total Investments	<u>\$ 25,937</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 25,937</u>

**Note F - Property and Equipment**

Property and equipment at May 31, 2013 consists of the following:

Furniture, fixtures and equipment	\$ 80,363
Costumes and supplies	25,759
Computer hardware and software	23,235
Vehicles	9,455
Equipment acquired under capital lease	<u>8,925</u>
	147,737
Less accumulated depreciation	<u>(105,383)</u>
	<u>\$ 42,354</u>

**Note G - Line of Credit and Long Term Debt**

The Organization has a \$250,000 line of credit from Fund for the Arts. The line bears interest at 3.75% and is due May 31, 2014. The line is guaranteed by a member of the Board of Directors. At May 31, 2013, \$248,225 is outstanding on the line of credit.

The Organization has an unsecured term loan, bearing interest at 6.15%. The loan agreement provides that the Organization must make monthly payments of interest plus a monthly amount of principal, ranging from \$500 to \$1,500, in accordance with the loan repayment schedule, over the term of the loan. The loan matures May 9, 2016. The loan is guaranteed by a member of the Board of Directors. At May 31, 2013, \$72,442 was outstanding on the term loan.



**StageOne Family Theatre, Inc.**  
**Notes to Financial Statements (Continued)**  
**May 31, 2013**

**Note G - Line of Credit and Long Term Debt (Continued)**

Future minimum principal payments under the term loan are as follows:

<u>Year Ended</u>	<u>Amount</u>
2014	\$ 18,000
2015	18,000
2016	<u>36,442</u>
	<u>\$ 72,442</u>

**Note H - Capital Lease Obligation**

The Organization has a capital lease obligation for a copier. Terms of the lease require monthly payments of \$210, including interest at 6% through October 2016.

Future minimum lease payments under this arrangement are as follows:

<u>Year Ending May 31,</u>	<u>Amount</u>
2014	\$ 2,520
2015	2,520
2016	2,520
2017	<u>1,029</u>
	8,589
Less amount representing interest	<u>(839)</u>
	<u>\$ 7,750</u>

Amortization of property recorded under the capital lease obligation is included in depreciation expense.

**Note I - Temporarily Restricted Net Assets**

At May 31, 2013, the Organization had \$308,506 in temporarily restricted net assets available for 2014 programs.

**StageOne Family Theatre, Inc.**  
**Notes to Financial Statements (Continued)**  
**May 31, 2013**

**Note J - Leases**

Effective January 1, 2010, the Organization entered into a month to month operating lease at \$1,800 per month for storage and set construction space. Rent expense totaled \$21,600 for the year ended May 31, 2013.

The Organization leases office space under a month to month operating lease at \$1,350 per month. Rent expense totaled \$16,200 for the year ended May 31, 2013.

The Organization paid rentals for the use of the Bomhard Theater in Kentucky Center for the Arts under short term rental agreements with the venue.

**Note K - Pension and Employee Benefit Plans**

The Organization is a participating employer in three separate trustee-managed multiemployer defined benefit pension plans for employees who participate in collective bargaining agreements ("the Plans"). The Plans generally provide retirement benefits to employees based on years of service while a member of the collective bargaining group and/or covered wages from participating employers. The Plans are each managed by a board of trustees. Although the Organization is not represented on any of the boards of trustees, other contributing employers may be members of the boards. Contributions of \$3,862 in 2013 were charged to pension expense for ongoing participation in these Plans.

The risks of participating in these Plans are different from single-employer plans because:

- Assets contributed to a multiemployer plan by one employer may be used to provide benefits to employees of other participating employers.
- If a participating employer stops contributing to a plan, the unfunded obligations of that plan may be required to be borne by the remaining participating employers.
- If the Organization chooses to stop participating in one of its multiemployer plans, it may be required to pay a withdrawal liability to that plan.

In connection with ongoing renegotiation of collective bargaining agreements, the Organization could discuss and negotiate for the complete or partial withdrawal from one or more of the Plans. Depending on the number of employees withdrawn in any future period and the financial condition of the multiemployer plan at the time of withdrawal, the associated withdrawal liabilities could be material to the Organization's change in net assets in the period of the withdrawal. As of May 31, 2013, the Organization has no plans to withdraw from the Plans.

The Organization's participation in the Plans as of May 31, 2013, and for the year ended May 31, 2013 is outlined in the table below. The "EIN/Pension Plan Number" column provides the Employee Identification Number (EIN) and the three-digit plan number, if applicable. The "FIP/RP Status Pending/Implemented" column indicates plans for which a financial improvement plan (FIP) or a rehabilitation plan (RP) is either pending or has been implemented. Plans in the Red zone are generally less than 65% funded, plans in the Yellow zone are generally greater than 65% but less than 80% funded, and plans in the Green are at least 80% funded.

**StageOne Family Theatre, Inc.**  
**Notes to Financial Statements (Continued)**  
**May 31, 2013**

**Note K - Pension and Employee Benefit Plans (Continued)**

Pension Fund	Equity-League Pension Trust Fund		United Scenic Artists Local 829 Pension Fund	
EIN/ Pension Plan Number	13-6696817-001		13-1982707-001	
Pension Protection Act Zone Status	May 31, 2012	Green	December 31, 2012	Green
FIP/ RP Status Pending/ Implemented	No		No	
Company Contributions - 2013	\$2,852		\$140	
Surcharge Imposed	No		No	
Greater than 5% Contributor to the Plan	No		No	
Expiration Date of Collective Bargaining Agreement	June 29, 2014		January 29, 2012	
Pension Fund	AFM & Employers' Pension Plan			
EIN/ Pension Plan Number	51-6120204-001			
Pension Protection Act Zone Status	March 31, 2012	Red		
FIP/ RP Status Pending/ Implemented	Yes / Implemented			
Company Contributions - 2013	\$870			
Surcharge Imposed	Yes			
Greater than 5% Contributor to the Plan	No			
Expiration Date of Collective Bargaining Agreement	May 31, 2014			

**StageOne Family Theatre, Inc.**  
**Notes to Financial Statements (Continued)**  
**May 31, 2013**

**Note K - Pension and Employee Benefit Plans (Continued)**

Under the terms of an agreement with various union organizations, the Organization is required to pay specific amounts to a welfare trust fund (under a defined contribution welfare plan) on behalf of actors, directors and designers as they are employed by the Organization. Welfare expense related to the union agreements was approximately \$28,090 for May 31, 2013.

**Note L - Concentrations**

At May 31, 2013, pledges from two donors represent 90% of gross pledges receivable and receivables from two customers represent 25% of accounts receivable. During the year ended May 31, 2013, the Organization received 41% of total contributions and grants from one donor.

**Note M - Prior Period Adjustment**

During the year ended May 31, 2013, the Organization identified a misstatement in prior years financial statements. Certain donations that had been classified as permanently restricted were determined to be unrestricted. The effect of the restatement on May 31, 2012 was a decrease in permanently restricted net assets and an increase in unrestricted net assets of \$20,840.

## StageOne Family Theatre

## Statement of Financial Position

	(Unaudited)				
	as of 6/30/13	as of 5/31/14	as of 6/30/14	Monthly Variance	Prior Year Variance
<b>Assets</b>					
Cash-Operating	\$11,336	\$29,637	\$8,532	(\$21,105)	(\$2,804)
Petty Cash-Variou	684	2,072	2,232	160	1,548
Accounts Receivable	16,713	33,901	28,935	(4,966)	12,222
Pledges Receivable	80,620	490,422	669,770	179,348	589,150
Prepaid Expenses and Other	46,621	34,485	34,004	(481)	(12,617)
Investments	25,936	10,797	10,797	-	(15,139)
Property & Equipment, Net	41,007	40,842	42,633	1,791	1,626
<b>Total Assets</b>	<b>\$222,917</b>	<b>\$642,156</b>	<b>\$796,903</b>	<b>\$154,747</b>	<b>\$573,986</b>
<b>Liabilities</b>					
Accounts Payable	\$154,136	\$151,302	\$117,692	(\$33,610)	(\$36,444)
Notes Payable	326,917	308,304	306,623	(1,681)	(20,294)
Deferred Ticket Sales & Camps	40,070	41,707	51,562	9,855	11,492
Deferred Fund for the Arts	20,776	-	-	-	(20,776)
Deferred Other Contributions	334,506	438,308	608,056	169,748	273,550
	\$876,405	\$939,621	\$1,083,933	\$144,312	\$207,528
<b>Net Assets</b>	<b>(653,488)</b>	<b>(297,465)</b>	<b>(287,030)</b>	<b>10,435</b>	<b>366,458</b>
<b>Total Liabilities and Net Assets</b>	<b>\$222,917</b>	<b>\$642,156</b>	<b>\$796,903</b>	<b>\$154,747</b>	<b>\$573,986</b>

Prepared for: StageOne's Finance Committee and Board of Directors

Prepared by: Tonya McSorley on 7/24/2014

**STAGE ONE: THE LOUISVILLE CHILDREN'S THEATRE, INC.****General Information**

<b>Organization Number</b>	0144489
<b>Name</b>	STAGE ONE: THE LOUISVILLE CHILDREN'S THEATRE, INC.
<b>Profit or Non-Profit</b>	N - Non-profit
<b>Company Type</b>	KCO - Kentucky Corporation
<b>Status</b>	A - Active
<b>Standing</b>	G - Good
<b>State</b>	KY
<b>File Date</b>	8/10/1948
<b>Organization Date</b>	8/10/1948
<b>Last Annual Report</b>	8/11/2014
<b>Principal Office</b>	323 W. BROADWAY, SUITE 600 LOUISVILLE, KY 40202
<b>Registered Agent</b>	S & H LOUISVILLE, LLC C/O STITES & HARBISON - MS SARA CRONAN 400 W. MARKET STREET LOUISVILLE, KY 40202-3352

**Current Officers**

<b>Chairman</b>	<u>Carl Thomas</u>
<b>President</b>	<u>Peter Holloway</u>
<b>Director</b>	<u>Michelle Heit</u>
<b>Director</b>	<u>Laura Barnum</u>
<b>Director</b>	<u>Ashley Butler</u>
<b>Director</b>	<u>David Calzi</u>
<b>Director</b>	<u>Eric Benson</u>
<b>Director</b>	<u>Kristen Byrd</u>
<b>Director</b>	<u>Brian Haehl</u>
<b>Director</b>	<u>Virginia Ferguson</u>
<b>Director</b>	<u>Lea Pauley Goff</u>
<b>Director</b>	<u>Elizabeth Kaplan</u>
<b>Director</b>	<u>Tess McNair</u>
<b>Director</b>	<u>Peggy Krug</u>
<b>Director</b>	<u>Leisa Schulz</u>
<b>Director</b>	<u>Melissa Lowe</u>
<b>Director</b>	<u>Michael Merrick</u>
<b>Director</b>	<u>Ben Reno-Weber</u>
<b>Director</b>	<u>David Smith</u>
<b>Director</b>	<u>Suzanne Wright</u>

**Individuals / Entities listed at time of formation**

<b>Director</b>	<u>N. S. WILDER</u>
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<b>Director</b>	<u>MRS. HAROLD BRIGHAM</u>
<b>Director</b>	<u>MRS. J. J. SIMPSON, JR.</u>
<b>Incorporator</b>	<u>N. S. WILDER</u>
<b>Incorporator</b>	<u>MRS. HAROLD L. BRIGHAM</u>
<b>Incorporator</b>	<u>MRS. J. J. SIMPSON, JR.</u>

## Images available online

Documents filed with the Office of the Secretary of State on September 15, 2004 or thereafter are available as scanned images or PDF documents. Documents filed prior to September 15, 2004 will become available as the images are created.

<u>Annual Report</u>	8/11/2014	1 page	<u>PDF</u>	
<u>Annual Report</u>	6/28/2013	1 page	<u>PDF</u>	
<u>Name Renewal</u>	4/5/2013 11:18:42 AM	1 page	<u>PDF</u>	
<u>Registered Agent name/address change</u>	6/27/2012 2:22:50 PM	1 page	<u>PDF</u>	
<u>Annual Report</u>	6/27/2012	1 page	<u>PDF</u>	
<u>Annual Report</u>	6/22/2011	1 page	<u>PDF</u>	
<u>Annual Report</u>	4/6/2010	1 page	<u>PDF</u>	
<u>Principal Office Address Change</u>	6/30/2009	1 page	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	6/25/2009	1 page	<u>PDF</u>	
<u>Annual Report</u>	6/11/2008	1 page	<u>PDF</u>	
<u>Name Renewal</u>	4/3/2008	1 page	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	6/15/2007	1 page	<u>PDF</u>	
<u>Statement of Change</u>	6/27/2006	1 page	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	5/25/2006	1 page	<u>PDF</u>	
<u>Annual Report</u>	6/28/2005	2 pages	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	9/8/2003	1 page	<u>tiff</u>	<u>PDF</u>
<u>Name Renewal</u>	6/27/2003	1 page	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	9/9/2002	1 page	<u>tiff</u>	<u>PDF</u>
<u>Statement of Change</u>	6/19/2002	1 page	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	9/11/2001	6 pages	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	8/2/1999	6 pages	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	7/29/1998	4 pages	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	7/1/1997	2 pages	<u>tiff</u>	<u>PDF</u>
<u>Certificate of Assumed Name</u>	6/9/1997	1 page	<u>tiff</u>	<u>PDF</u>
<u>Statement of Change</u>	5/2/1997	1 page	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	7/1/1996	4 pages	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	7/1/1995	1 page	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	7/1/1995	1 page	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	7/1/1994	2 pages	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	7/1/1993	1 page	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	7/1/1992	6 pages	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	7/1/1991	9 pages	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	7/1/1990	6 pages	<u>tiff</u>	<u>PDF</u>
<u>Annual Report</u>	7/1/1989	7 pages	<u>tiff</u>	<u>PDF</u>
<u>Six Month Notice Return</u>	9/1/1986	1 page	<u>tiff</u>	<u>PDF</u>
<u>Amendment</u>	2/11/1980	5 pages	<u>tiff</u>	<u>PDF</u>

Articles of Incorporation

8/10/1948

5 pages

tiff

PDF

**Assumed Names**

STAGE ONE

Active

**Activity History**

Filing	File Date	Effective Date	Org. Referenced
Annual report	8/11/2014 5:12:16 PM	8/11/2014 5:12:16 PM	
Annual report	6/28/2013 11:49:11 AM	6/28/2013 11:49:11 AM	
Annual report	6/27/2012 2:33:58 PM	6/27/2012 2:33:58 PM	
Registered agent address change	6/27/2012 2:22:50 PM	6/27/2012 2:22:50 PM	
Annual report	6/22/2011 12:52:56 PM	6/22/2011 12:52:56 PM	
Annual report	4/6/2010 10:45:27 AM	4/6/2010 10:45:27 AM	
Principal office change	6/30/2009 10:36:08 AM	6/30/2009	
Annual report	6/25/2009 7:12:11 PM	6/25/2009 7:12:11 PM	
Annual report	6/11/2008 3:56:45 PM	6/11/2008 3:56:45 PM	
Annual report	6/15/2007 11:50:58 AM	6/15/2007 11:50:58 AM	
Registered agent address change	6/27/2006 1:53:20 PM	6/27/2006	
Annual report	5/25/2006 8:28:12 AM	5/25/2006 8:28:12 AM	
Annual report	6/27/2003 1:37:54 PM	6/27/2003	
Registered agent address change	6/19/2002 8:54:21 AM	6/19/2002	
Annual report	6/19/2002 8:53:57 AM	6/19/2002	
Principal office change	6/23/1997	6/23/1997	
Registered agent address change	5/2/1997	5/2/1997	
Amendment previous name	2/11/1980	2/11/1980	<u>LOUISVILLE CHILDREN'S THEATER, INC.</u>

**Microfilmed Images**

Microfilm images are not available online. They can be ordered by faxing a Request For Corporate Documents to the Corporate Records Branch at 502-564-5687.

Annual Report	8/18/2004	1 page
Annual Report	9/8/2003	1 page
Annual Report	9/9/2002	1 page
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Annual Report	7/1/1991	9 pages
Annual Report	7/1/1990	6 pages
Annual Report	7/1/1989	7 pages
Six Month Notice Return	9/1/1986	1 page
Statement of Change	3/19/1982	2 pages
Statement of Change	8/12/1980	2 pages
Amendment	2/11/1980	3 pages
Statement of Change	7/28/1971	2 pages
Annual Report	7/1/1949	29 pages
Articles of Incorporation	8/10/1948	4 pages