

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

Applicant/Program: StageOne Family Theatre for John Lennon & Me Play
Applicant Requested Amount: \$12,565
Appropriation Request Amount: \$1,085-

Executive Summary of Request
Funding to pay for ticket cost for several area schools who are unable to pay themselves for the production of John Lennon & Me. *D9 school - Field Elementary School*

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.

9 District # *Bill Hollode* Primary Sponsor Signature \$1,085 Amount 1/24/17 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.
n/a

Approved by:

Appropriations Committee Chairman Date
Final Appropriations Amount: _____

Applicant/Program:
StageOne Family Theatre for John Lennon & Me

Additional Disclosure and Signatures

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

Council Member Signature and Amount

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

Applicant/Program:

StageOne Family Theatre for John Lennon & Me

Additional Disclosure and Signatures

Additional Council Office Disclosure

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

District 16 _____ \$ _____

District 17 _____ \$ _____

District 18 _____ \$ _____

District 19 _____ \$ _____

District 20 _____ \$ _____

District 21 _____ \$ _____

District 22 _____ \$ _____

District 23 _____ \$ _____

District 24 _____ \$ _____

District 25 _____ \$ _____

District 26 _____ \$ _____

**LOUISVILLE METRO COUNCIL
NEIGHBORHOOD DEVELOPMENT FUND APPLICATION**

Legal Name of Applicant Organization StageOne Family Theatre

Program Name and Request Amount Production John Lennon & Me

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

Prepared by:

Wyle G. Gaudy

Date:

01/23/17

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 1 – APPLICANT INFORMATION			
Legal Name of Applicant Organization: StageOne Family Theatre <i>(as listed on: http://www.sos.ky.gov/business/records)</i>			
Main Office Street & Mailing Address: 315 W Market Street, Suite 2S, Louisville KY 40202			
Website: www.stageone.org			
Applicant Contact:	Jessica Roth	Title:	Director of Development
Phone:	502.498.2444	Email:	jroth@stageone.org
Financial Contact:	Mike Brooks	Title:	Director of Finance
Phone:	502.498.2438	Email:	mbrooks@stageone.org
Organization's Representative who attended NDF Training: Amy Attaway, Development Associate			
GEOGRAPHICAL AREA(S) WHERE PROGRAM ACTIVITIES ARE (WILL BE) PROVIDED			
Program Facility Location(s):	The Kentucky Center for the Arts		
Council District(s):	4	Zip Code(s):	40202
SECTION 2 – PROGRAM REQUEST & FINANCIAL INFORMATION			
PROGRAM/PROJECT NAME: John Lennon & Me			
Total Request: (\$)	12,565	Total Metro Award (this program) in previous year: (\$)	24750
Purpose of Request (check all that apply):			
<input type="checkbox"/> Operating Funds (generally cannot exceed 33% of agency's total operating budget) <input checked="" type="checkbox"/> Programming/services/events for direct benefit to community or qualified individuals <input type="checkbox"/> Capital Project of the organization (equipment, furnishing, building, etc)			
The Following are Required Attachments:			
<input checked="" type="checkbox"/> IRS Exempt Status Determination Letter <input checked="" type="checkbox"/> Current year projected budget <input checked="" type="checkbox"/> Current financial statement <input checked="" type="checkbox"/> Most recent IRS Form 990 or 1120-H <input checked="" type="checkbox"/> Articles of Incorporation (current & signed) Cost estimates from proposed vendor if request is for capital expense		Signed lease if rent costs are being requested <input checked="" type="checkbox"/> IRS Form W9 Evaluation forms if used in the proposed program Annual audit (if required by organization) Faith Based Organization Certification Form, if applicable	
For the current fiscal year ending June 30, list all funds appropriated and/or received from Louisville Metro Government for this or any other program or expense, including funds received through Metro Federal Grants, from any department or Metro Council Appropriation (Neighborhood Development Funds). Attach additional sheet if necessary.			
Source:	NDF - Click Clack Moo	Amount: (\$)	3,571
Source:		Amount: (\$)	
Source:		Amount: (\$)	
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 almost 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 Summer Camp opportunities are tied to educational curriculum, 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 - BOARD OF DIRECTORS AND PAID STAFF

Board Member	Term End Date
Michael Merrick, President	2nd term ends 2019
Jessie Broughton	1st term ends 2017
Faith Bushnaq	1st term ends 2019
Ashley Butler	2nd term ends 2018
Kristen Byrd	2nd term ends 2019
Sam Corbett	2nd term ends 2019
Lea Goff	1st term ends 2018
Michelle Heit	2nd term ends 2019
Tyler Hampton	1st term ends 2018
Jan Helson	1st term ends 2017
Elizabeth Kaplan	2nd term ends 2019
Peggy Krug	1st term ends 2017
Carol Lambert	2nd term ends 2019
Jennifer Luhrs	1st term ends 2019
Dot O'Brien	1st term ends 2019
Jamie Paradis	1st term ends 2018
(full list of board members and term limited included in application)	

Describe the Board term limit policy:

Each board member is elected to serve a 3-year term. Members can be re-elected to a second consecutive term

Three Highest Paid Staff Names	Annual Salary
Peter Holloway * See executive compensation envelope	
Mike Brooks * See executive compensation envelope	
Jessica Roth	65,000

** salary information has been redacted
by request of applicant.*

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 5 – PROGRAM/PROJECT NARRATIVE

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

StageOne is seeking \$12,565 in Neighborhood Development Funds to support our spring 2017 production of "John Lennon & Me" which runs January 23 to Feb 11, 2017. Community support is crucial in subsidizing tickets for Louisville Metro Schools.

Children need the arts. Student after study has shown that exposure to the arts is critical to the development of creative thinks and problem solvers. Arts experiences help students 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 the 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):

This support would allow StageOne the funding needed to cover the ticket costs for several area schools who are unable to pay themselves, and were unable to secure 5x5 funding through Fund for the Arts.

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

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

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

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

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

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

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

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

To provide StageOne's production of "John Lennon & Me" at zero ticket cost to nearly 10,000 elementary and middle school students in Jefferson County Public Schools.

Data collection method: Xpressions Reservation System/Teacher check-in reports. Xpressions captures information for all reservations made, including number of students, teachers, and ticket prices. Xpressions also aggregates attendance data for the entire 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 chaperon 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

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 continued its partnership with the University of Louisville's Center for Autism Training and the Kentucky Center in offering sensory-friendly performances for families with children on the autism spectrum. These performances create an inviting space for families who often feel unwelcome participating in the arts.

(I brought my son to see the sensory friendly performance on Saturday of Click Clack Moo. Let me tell you what a joy that was! The show was fantastic! It was funny and sweet and the acting was great. The best part though was the fact that it was sensory friendly! We don't often get to go to things like this because they can be overwhelming and especially, because my son can never be quiet. No one minded that he made loud noises or exclamations or that he couldn't sit still. The staff was extremely kind and everyone made sure that we had a good time. Sometimes Autism limits what we can do, but for a day we were just like everyone else. I think his smile in this picture says it all. Thank you for bringing this to our community! -- Megan Taylor Watts)

- With support from the Norton Foundation, StageOne provides hands-on technical theatre training for students at Lincoln Elementary and Western Middle, the Performing Arts magnet schools. This year-long residency provides robust training for students in costuming, lighting, set design/construction and stage management, offering an introduction to careers in theatre and imparting skills that translate across disciplines.

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 6 – PROGRAM/PROJECT BUDGET SUMMARY

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

Program/Project Expenses	Column 1	Column 2	Column (1+2)=3
	Proposed Metro Funds	Non- Metro Funds	Total Funds
A: Personnel Costs Including Benefits			
B: Rent/Utilities			
C: Office Supplies			
D: Telephone			
E: In-town Travel			
F: Client Assistance (See Detailed List on Page 8)	12,565	36,792	49,357
G: Professional Service Contracts			
H: Program Materials			
I: Community Events & Festivals (See Detailed List on Page 8)			
J: Machinery & Equipment			
K: Capital Project			
L: Other Expenses (See Detailed List on Page 8)			
*TOTAL PROGRAM/PROJECT FUNDS	12,565	36,792	49,357
% of Program Budget	25 %	75 %	100%

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

Other State, Federal or Local Government	
United Way	
Private Contributions (do not include individual donor names)	36,792
Fees Collected from Program Participants	
Other (please specify)	
Total Revenue for Columns 2 Expenses **	36,792

*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 for Client Assistance, Community Events & Festivals or Other Expenses shown on Page 7 (circle one and use multiple sheets if necessary)	Column 1	Column 2	Column (1 + 2)=3
	Proposed Metro Funds	Non-Metro Funds	Total Funds
Field Elementary - 155 students	1,085		1,085
Meyzeek Middle School - 489 students	3,423		3,423
Byck - 150 students	1,050		1,050
Lincoln Elementary School - 199 students	1,393		1,393
Brown Elementary School - 99 students	693		693
Wheeler Elementary - 113 students	791		791
Walden - 27 students	189		189
Westport Middle School - 100 students	700		700
Wilder - 88 students	616		616
Bowen - 115 students	805		805
Newburg Middle School - 150 students	1,050		1,050
Indian Trail - 75 students	525		525
Mary Ryan Academy - 35 students	245		245
Other JCPS schools - 5,256 students		36,792	36,792
Total	12,565	36,792	49,357

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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

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

*** 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:

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

If YES, please explain:

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 7 – CERTIFICATIONS & ASSURANCES

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

Standard Assurances

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

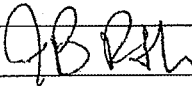
Standard Certifications

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

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

SECTION 8 – CERTIFICATIONS & ASSURANCES

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

Signature of Legal Signatory:		Date:	January 20, 2017
Legal Signatory: (please print):	Jessica B Roth	Title:	Director of Development
Phone:	502.498.2444	Extension:	
Email:	jroth@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

Person to Contact:
Dale Pepper
Telephone Number:
(513) 684-3578
Refer Reply to:
EP/EO
Date:
SEP 18 1986

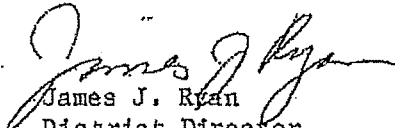
Dear Sir or Madam:

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



StageOne Family Theatre
Final Budget
Fiscal Year Ended May 31, 2017

	FY17	
	Budget	
Revenues:		
Earned revenues:		
Ticket sales	321,672	18%
Education program fees	112,680	6%
Other	<u>6,000</u>	0%
Total earned revenues	<u>440,352</u>	24%
Contributed income:		
Individuals, corporate & foundations	852,200	47%
Government & other grants	67,000	4%
Fund for the Arts allocation - regular	400,000	22%
Fund for the Arts allocation - special	5,000	0%
Fund raising events - net	40,000	2%
In-kind	7,000	0%
Releases from restrictions	<u>-</u>	
Total contributed income	<u>1,371,200</u>	76%
Total revenue	<u>1,811,552</u>	100%
Expenses:		
Productions - direct costs	458,895	28%
Production overhead	438,509	26%
Education	200,146	12%
Marketing & Patron services	159,294	10%
Development	172,528	10%
Finance & administration	<u>233,766</u>	14%
Total expenses	<u>1,663,137</u>	100%
Income (loss) before non-recurring items	148,414	
Non-recurring items	<u>-</u>	
Net income (loss)	<u><u>148,414</u></u>	

**Stage One: The Louisville Children's Theatre, Inc.
d/b/a StageOne Family Theatre**

Financial Statements

Years Ended May 31, 2016 and 2015

**Stage One: The Louisville Children's Theatre, Inc.
d/b/a StageOne Family Theatre**

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May 31, 2016 and 2015

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Independent Auditor's Report

To the Board of Directors
Stage One: The Louisville Children's Theatre, Inc.
d/b/a StageOne Family Theatre

We have audited the accompanying financial statements of Stage One: The Louisville Children's Theatre, Inc. d/b/a StageOne Family Theatre ("the Organization"), which comprise the statements of financial position as of May 31, 2016 and 2015 and the related statements of activities and changes in net assets (deficit), and cash flows for the years 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 audits. We conducted our audits 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.

Kentucky
Indiana
Ohio

Mountjoy Chilton Medley LLP

P 502.749.1900 | F 502.749.1930
2600 Meidinger Tower | 462 South Fourth Street | Louisville, KY 40202
www.mcmcpa.com | 888.587.1719

A Member of PrimeGlobal – An Association of Independent Accounting Firms

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 Stage One: The Louisville Children's Theatre, Inc. d/b/a StageOne Family Theatre as of May 31, 2016 and 2015, and changes in its net assets and its cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

A handwritten signature in black ink, reading "M. Chilton Mudd, LLP". The signature is written in a cursive style.

Louisville, Kentucky
August 29, 2016

Stage One: The Louisville Children's Theatre, Inc.
d/b/a StageOne Family Theatre
Statements of Financial Position
May 31, 2016 and 2015

	<u>2016</u>	<u>2015</u>
Assets		
Cash	\$ 83,952	\$ 70,193
Certificates of deposit, restricted	10,305	10,279
Accounts receivable, net	43,185	53,453
Prepaid and other	61,510	55,350
Pledges receivable, net	167,236	408,442
Property and equipment, net of accumulated depreciation	<u>74,585</u>	<u>76,905</u>
Total Assets	<u>\$ 440,773</u>	<u>\$ 674,622</u>
Liabilities and Net Assets (Deficit)		
Liabilities		
Line of credit	\$ 98,225	\$ 148,225
Accounts payable and accrued expenses	107,814	117,146
Deferred revenue	47,532	37,361
Term loan	18,442	36,442
Capital lease obligation	<u>1,014</u>	<u>3,383</u>
Total Liabilities	273,027	342,557
Commitments and Contingencies		
Net Assets (Deficit)		
Unrestricted	(99,121)	(139,373)
Temporarily restricted	<u>266,867</u>	<u>471,438</u>
Total Net Assets (Deficit)	<u>167,746</u>	<u>332,065</u>
Total Liabilities and Net Assets (Deficit)	<u>\$ 440,773</u>	<u>\$ 674,622</u>

See accompanying notes.

Stage One: The Louisville Children's Theatre, Inc.
d/b/a StageOne Family Theatre
Statements of Activities and Changes in Net Assets (Deficit)
Years Ended May 31, 2016 and 2015

	2016			2015		
	Unrestricted	Temporarily Restricted	Total	Unrestricted	Temporarily Restricted	Total
Revenues and Support						
Ticket sales and fees	\$ 233,986	\$ -	\$ 233,986	\$ 304,217	\$ -	\$ 304,217
Contributions and grants	842,370	173,018	1,015,388	979,826	340,244	1,320,070
Educational programs	122,462	-	122,462	121,949	-	121,949
In-kind gifts	6,500	-	6,500	33,170	-	33,170
Fundraising events	38,446	-	38,446	19,122	-	19,122
Rental income	119	-	119	1,512	-	1,512
Miscellaneous	11,217	-	11,217	4,618	-	4,618
Total Revenues and Support	1,255,100	173,018	1,428,118	1,464,414	340,244	1,804,658
Net Assets Released from Restrictions:						
Released for Operations	377,589	(377,589)	-	307,161	(307,161)	-
Total Revenues and Support	1,632,689	(204,571)	1,428,118	1,771,575	33,083	1,804,658
Expenses						
Program Services						
Productions	1,023,102	-	1,023,102	1,028,060	-	1,028,060
Educational programs	196,152	-	196,152	183,417	-	183,417
Total Program Services	1,219,254	-	1,219,254	1,211,477	-	1,211,477
Supporting Services						
General and administrative	223,483	-	223,483	239,884	-	239,884
Fundraising	149,700	-	149,700	162,078	-	162,078
Total Supporting Services	373,183	-	373,183	401,962	-	401,962
Total Expenses	1,592,437	-	1,592,437	1,613,439	-	1,613,439
Changes in Net Assets	40,252	(204,571)	(164,319)	158,136	33,083	191,219
Net Assets (Deficit) at Beginning of Year	(139,373)	471,438	332,065	(297,509)	438,355	140,846
Net Assets (Deficit) at End of Year	\$ (99,121)	\$ 266,867	\$ 167,746	\$ (139,373)	\$ 471,438	\$ 332,065

See accompanying notes.

Stage One: The Louisville Children's Theatre, Inc.
d/b/a StageOne Family Theatre
Statements of Cash Flows
Years Ended May 31, 2016 and 2015

	<u>2016</u>	<u>2015</u>
Operating Activities		
Changes in Net Assets	\$ (164,319)	\$ 191,219
Adjustments to reconcile changes in net assets to net cash provided by operating activities:		
Depreciation	25,572	20,313
Contributions of property and equipment	-	(20,975)
Changes in:		
Accounts receivable	10,268	(19,552)
Prepaid and other	(6,160)	(20,332)
Pledges receivable	241,206	81,980
Accounts payable and accrued expenses	(9,332)	(37,648)
Deferred revenue	10,171	(4,345)
Net Cash Provided by Operating Activities	<u>107,406</u>	<u>190,660</u>
Investing Activities		
Purchases of investments and certificates of deposit	(26)	(14)
Purchases of property and equipment	<u>(23,252)</u>	<u>(35,402)</u>
Net Cash Used by Investing Activities	<u>(23,278)</u>	<u>(35,416)</u>
Financing Activities		
Payments on capital lease	(2,369)	(2,254)
Payments on term loan	(18,000)	(18,000)
Payments on line of credit	<u>(50,000)</u>	<u>(100,000)</u>
Net Cash Used by Financing Activities	<u>(70,369)</u>	<u>(120,254)</u>
Net Increase in Cash	13,759	34,990
Cash at Beginning of Year	<u>70,193</u>	<u>35,203</u>
Cash at End of Year	<u>\$ 83,952</u>	<u>\$ 70,193</u>
Supplemental Disclosure		
Cash paid for interest	\$ 6,279	\$ 10,731
Noncash Investing and Financing		
Donated property and equipment	-	20,975

See accompanying notes.

Stage One: The Louisville Children's Theatre, Inc.
d/b/a StageOne Family Theatre
Notes to Financial Statements
Years Ended May 31, 2016 and 2015

Note A - Nature of Operations

Stage One: The Louisville Children's Theatre, Inc. d/b/a StageOne Family Theatre ("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

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.
2. Use of Estimates: The preparation of financial statements in conformity with GAAP 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.

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, 2016 and 2015.

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, supplies and property of \$6,500 and \$33,170 during the years ended May 31, 2016 and 2015, respectively.

Stage One: The Louisville Children's Theatre, Inc.
d/b/a StageOne Family Theatre
Notes to Financial Statements (Continued)
Years Ended May 31, 2016 and 2015

Note B - Summary of Significant Accounting Policies (Continued)

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. There are no cash equivalents at May 31, 2016 and 2015.

7. Certificates of Deposit, Restricted: Certificates of deposit are pledged as collateral securing a standing letter of credit in the amount of \$10,305 and \$10,279, at May 31, 2016 and 2015, respectively, in favor of Actors' Equity Association.

8. 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.

Accounts receivable are shown net of an allowance for doubtful accounts of \$840 and \$1,660 at May 31, 2016 and 2015, respectively.

9. Pledges Receivable: Unconditional promises to give that are expected to be collected within one year are recorded at net realizable value. Unconditional promises to give that are expected to be collected after one year are recorded at the present value of their expected cash flows.

Pledges receivable are shown net of an allowance for doubtful accounts of \$0 and \$1,500 at May 31, 2016 and 2015, respectively.

10. 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 \$25,572 and \$20,313 for the years ended May 31, 2016 and 2015, respectively.

11. Deferred Revenue: Deferred revenue consists primarily of advance ticket sales and registration fees for performances and events in the following fiscal year.

12. 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.

13. Advertising Costs: Advertising costs are expensed as incurred. Advertising costs totaled \$35,514 and \$26,891 for the years ended May 31, 2016 and 2015, respectively.

14. Reclassification: Certain reclassifications have been made to the 2015 financial statements to conform to the 2016 presentation. The reclassifications had no effect on the previously reported change in net assets.

Stage One: The Louisville Children's Theatre, Inc.
d/b/a StageOne Family Theatre
Notes to Financial Statements (Continued)
Years Ended May 31, 2016 and 2015

Note C - Pledges Receivable

Pledges receivable at May 31, 2016 and 2015 consist of the following:

	<u>2016</u>	<u>2015</u>
Pledges receivable	\$ 168,029	\$ 418,164
Less allowance for uncollectible pledges	-	(1,500)
Less discounts to net present value	<u>(793)</u>	<u>(8,222)</u>
	<u>\$ 167,236</u>	<u>\$ 408,442</u>
Gross pledges receivable are due according to the following schedule:		
Less than one year	\$ 148,029	\$ 233,114
One to five years	<u>20,000</u>	<u>185,050</u>
Total Unconditional Promises to Give	<u>\$ 168,029</u>	<u>\$ 418,164</u>

Contributions receivable in future periods are discounted using a rate of 3.25%.

Note D - Property and Equipment

Property and equipment at May 31, 2016 and 2015 consists of the following:

	<u>2016</u>	<u>2015</u>
Furniture, fixtures and equipment	\$ 72,141	\$ 68,243
Costumes and supplies	25,759	25,759
Computer hardware and software	46,316	35,305
Leasehold improvements	62,686	54,343
Vehicles	9,455	9,455
Equipment acquired under capital lease	<u>8,925</u>	<u>8,925</u>
	225,282	202,030
Less accumulated depreciation	<u>(150,697)</u>	<u>(125,125)</u>
	<u>\$ 74,585</u>	<u>\$ 76,905</u>

Note E - 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, 2016. The line is guaranteed by a member of the Board of Directors. At May 31, 2016 and 2015, \$98,225 and \$148,225 is outstanding on the line of credit, respectively.

Subsequent to year end, the Organization made a \$25,000 payment and the line of credit was extended through June 30, 2018. Terms of the renewal require monthly payments of \$3,000. The line bears interest at prime plus .50%. The renewal removed the guarantee by a member of the Board of Directors.

Stage One: The Louisville Children's Theatre, Inc.
d/b/a StageOne Family Theatre
Notes to Financial Statements (Continued)
Years Ended May 31, 2016 and 2015

Note E - Line of Credit and Long-term Debt (Continued)

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 matured May 9, 2016. The loan is guaranteed by a member of the Board of Directors. At May 31, 2016 and 2015, \$18,442 and \$36,442, respectively, was outstanding on the term loan.

Subsequent to year end, the term loan was renewed through June 2017. Terms of the renewal require monthly payments of principal and interest of \$1,581. The term loan bears interest at 6.55% and the balance is due June 9, 2017. The loan is secured by substantially all of the Organization's assets.

The annual maturities of principal on the line of credit and the term loan (based on the renewal terms) are as follows:

<u>Year Ended</u>	<u>Amount</u>
2017	\$ 77,780
2018	37,662
2019	<u>1,225</u>
	<u>\$ 116,667</u>

Note F - 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</u> <u>May 31,</u>	<u>Amount</u>
2017	\$ 1,029
Less amount representing interest	<u>(15)</u>
	<u>\$ 1,014</u>

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

Note G - Temporarily Restricted Net Assets

At May 31, 2016 and 2015, the Organization had \$266,867 and \$471,438, respectively, in temporarily restricted net assets available for future programs.

Stage One: The Louisville Children's Theatre, Inc.
d/b/a StageOne Family Theatre
Notes to Financial Statements (Continued)
Years Ended May 31, 2016 and 2015

Note H - Operating Leases

Effective May 1, 2014, the Organization entered into a non-cancelable operating lease for storage and set construction space through May 31, 2019. Monthly base rent under the lease ranges from \$3,350 to \$3,950 per month over the term of the lease. Rent expense is recognized on a straight-line basis in the accompanying financial statements and totaled \$43,200 for each of the years ended May 31, 2016 and 2015.

Effective September 2014, the Organization entered into a new operating lease for office space. Monthly rent under the lease ranges from \$1,600 and \$1,900. Formerly, the Organization leased office space under a month to month operating lease at \$1,350 per month. Rent expense is recognized on a straight-line basis in the accompanying financial statements and totaled \$19,200 and \$14,400 for the years ended May 31, 2016 and 2015, respectively.

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.

The total non-cancelable operating lease payments are as follows:

<u>May 31,</u>	<u>Amount</u>
2017	64,500
2018	66,750
2019	69,750
2020	22,800
2021	<u>5,700</u>
Total	<u>\$ 229,500</u>

Note I - Pension and Employee Benefit Plans

The Organization is a participating employer in a separate trustee-managed multiemployer defined benefit pension plan for employees who participate in collective bargaining agreements ("the Plan"). The Plan generally provides 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 Plan is managed by a board of trustees. Although the Organization is not represented on the board of trustees, other contributing employers may be members of the board. Contributions of \$2,642 and \$3,531 were charged to pension expense for ongoing participation in this plan during the years ended May 31, 2016 and 2015, respectively.

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.

Stage One: The Louisville Children's Theatre, Inc.
d/b/a StageOne Family Theatre
Notes to Financial Statements (Continued)
Years Ended May 31, 2016 and 2015

Note I - Pension and Employee Benefit Plans (Continued)

In connection with ongoing renegotiation of the collective bargaining agreement, the Organization could discuss and negotiate for the complete or partial withdrawal from the Plan. 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 liability could be material to the Organization's change in net assets in the period of the withdrawal. As of May 31, 2016, the Organization has no plans to withdraw from the Plan.

The Organization's participation in the Plan as of May 31, 2016 and 2015, and for the years ended May 31, 2016 and 2015 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.

Pension Fund	Equity-League Pension Trust Fund		I.A.T.S.E. National Pension Fund		AFM & Employers' Pension Plan	
EIN/ Pension Plan Number	13-6696817-001		13-1849172-001		51-5120204-001	
Pension Protection Act Zone Status	May 31, 2015 May 31, 2014	Green Green	December 31, 2015 December 31, 2014	Green Green	March 31, 2016 March 31, 2015	Red Red
FIP/ RP Status Pending/ Implemented	No		No		Yes/Implemented	
Company Contributions - 2016	\$2,642		-		-	
Company Contributions - 2015	\$3,531		-		-	
Surcharge Imposed	No		No		No	
Greater than 5% Contributor to the Plan	No		No		No	
Expiration Date of Collective Bargaining Agreement	June 30, 2019		N/A		May 31, 2017	

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 \$22,575 and \$28,350 for the years ended May 31, 2016 and 2015, respectively.

Note J - Concentrations

At May 31, 2016 and 2015, pledges from two donors represent 45% and 51% of gross pledges receivable and receivables from two customers represent 73% and 42% of accounts receivable, respectively. During the years ended May 31, 2016 and 2015, the Organization received 59% and 34% of total contributions and grants from three donors and one donor, respectively.

Form **990**

Return of Organization Exempt From Income Tax

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

2014
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Information about Form 990 and its instructions is at www.irs.gov/form990.

A For the 2014 calendar year, or tax year beginning **JUN 1, 2014** and ending **MAY 31, 2015**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization STAGE ONE: THE LOUISVILLE CHILDREN'S THEATRE, INC. Doing business as STAGE ONE		D Employer identification number [REDACTED]
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 315 W. MARKET STREET 2S		E Telephone number 502-589-4060
	City or town, state or province, country, and ZIP or foreign postal code LOUISVILLE, KY 40202		G Gross receipts \$ 1,825,702.
	F Name and address of principal officer: PETER HOLLOWAY SAME AS C ABOVE		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
	I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number
J Website: WWW.STAGEONE.ORG			K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other
L Year of formation: 1948			M State of legal domicile: KY

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: STAGEONE EDUCATES AND INSPIRES CHILDREN AND FAMILIES BY OPENING THE DOORS TO IMAGINATION,
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.
	3 Number of voting members of the governing body (Part VI, line 1a) 3 23
	4 Number of independent voting members of the governing body (Part VI, line 1b) 4 23
	5 Total number of individuals employed in calendar year 2014 (Part V, line 2a) 5 60
	6 Total number of volunteers (estimate if necessary) 6 27
	7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 512. 7b Net unrelated business taxable income from Form 990-T, line 34 7b 0.

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	1,667,220.	1,349,440.
9 Program service revenue (Part VIII, line 2g)	331,855.	426,678.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-4,491.	15.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	27,689.	26,245.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,022,273.	1,802,378.
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	969,129.	1,043,905.
16a Professional fundraising fees (Part IX, column (A), line 11e)	69,533.	0.
b Total fundraising expenses (Part IX, column (D), line 25) 162,378.		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	573,225.	567,254.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,611,887.	1,611,159.
19 Revenue less expenses. Subtract line 18 from line 12	410,386.	191,219.
Net Assets or Fund Balances	20 Total assets (Part X, line 16) Beginning of Current Year 645,650. End of Year 674,622.	
	21 Total liabilities (Part X, line 26) 504,804. 342,557.	
	22 Net assets or fund balances. Subtract line 21 from line 20 140,846. 332,065.	

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			
	Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name REBECCA L. PHILLIPS, CPA	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN [REDACTED]
	Firm's name MOUNTJOY CHILTON MEDLEY LLP	Firm's address 462 S. FOURTH ST., SUITE 2600 LOUISVILLE, KY 40202-3445	Firm's EIN [REDACTED]	Phone no. (502) 749-1900	

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

Part IV Checklist of Required Schedules

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O		
4a	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)?		X
4b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	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?		X
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the sponsoring organization make any taxable distributions under section 4966?		
9b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
11a	Gross income from members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
13b	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		
13c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See 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 (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(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) CARL THOMAS CHAIRMAN	4.00	X		X				0.	0.	0.
(2) DAVID CALZI EXECUTIVE COMMITTEE	1.00	X		X				0.	0.	0.
(3) LEA GOFF EXECUTIVE COMMITTEE	1.00	X		X				0.	0.	0.
(4) PEGGY KRUG EXECUTIVE COMMITTEE	1.00	X		X				0.	0.	0.
(5) LAURA MELILLO BARNUM BOARD MEMBER	1.00	X						0.	0.	0.
(6) ERIC BENSON BOARD MEMBER	1.00	X						0.	0.	0.
(7) JESSIE BROUGHTON BOARD MEMBER	1.00	X						0.	0.	0.
(8) ASHLEY BUTLER BOARD MEMBER	1.00	X						0.	0.	0.
(9) KRISTEN BYRD BOARD MEMBER	1.00	X						0.	0.	0.
(10) VIRGINIA FERGUSON BOARD MEMBER	1.00	X						0.	0.	0.
(11) BRIAN HAEHL BOARD MEMBER	1.00	X						0.	0.	0.
(12) MICHELLE HEIT BOARD MEMBER	1.00	X						0.	0.	0.
(13) JAN HELSON BOARD MEMBER	1.00	X						0.	0.	0.
(14) ELIZABETH KAPLAN BOARD MEMBER	1.00	X						0.	0.	0.
(15) CAROL LAMBERT BOARD MEMBER	1.00	X						0.	0.	0.
(16) MELISSA LOWE BOARD MEMBER	1.00	X						0.	0.	0.
(17) TESS MCNAIR BOARD MEMBER	1.00	X						0.	0.	0.

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a 424,731.					
	b Membership dues	1b					
	c Fundraising events	1c 5,245.					
	d Related organizations	1d					
	e Government grants (contributions)	1e 78,801.					
	f All other contributions, gifts, grants, and similar amounts not included above	1f 840,663.					
	g Noncash contributions included in lines 1a-1f: \$	29,370.					
	h Total. Add lines 1a-1f		1,349,440.				
Program Service Revenue	2 a PRODUCTIONS	Business Code 900099	304,217.	304,217.			
	b EDUCATIONAL PROGRAMS	900099	121,949.	121,949.			
	c PROP RENTALS	900099	512.		512.		
	d						
	e						
	f All other program service revenue	900099					
	g Total. Add lines 2a-2f		426,678.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		15.			15.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real	1,000.				
		(ii) Personal	0.				
		c Rental income or (loss)	1,000.				
		d Net rental income or (loss)		1,000.			1,000.
	7 a Gross amount from sales of assets other than inventory	(i) Securities					
		(ii) Other					
		b Less: cost or other basis and sales expenses					
		c Gain or (loss)					
	d Net gain or (loss)						
	8 a Gross income from fundraising events (not including \$ 5,245. of contributions reported on line 1c). See Part IV, line 18	a	43,045.				
		b Less: direct expenses	b	22,403.			
		c Net income or (loss) from fundraising events		20,642.			20,642.
9 a Gross income from gaming activities. See Part IV, line 19	a						
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	a	1,253.					
	b Less: cost of goods sold	b	921.				
	c Net income or (loss) from sales of inventory		332.	332.			
Miscellaneous Revenue		Business Code					
11 a MISCELLANEOUS		900099	4,271.			4,271.	
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d			4,271.			
12 Total revenue. See instructions.			1,802,378.	426,498.	512.	25,928.	

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	35,203.	1	70,193.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	490,422.	3	408,442.
	4 Accounts receivable, net	33,901.	4	53,453.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other 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 instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	34,486.	9	55,350.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 183,805.		
	b Less: accumulated depreciation	10b 113,781.	29,869.	10c 70,024.
	11 Investments - publicly traded securities	10,797.	11	10,279.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets	10,972.	14	6,881.
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	645,650.	16	674,622.	
Liabilities	17 Accounts payable and accrued expenses	154,794.	17	117,146.
	18 Grants payable		18	
	19 Deferred revenue	41,706.	19	37,361.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties	54,442.	24	36,442.
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	253,862.	25	151,608.
	26 Total liabilities. Add lines 17 through 25	504,804.	26	342,557.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	-297,509.	27	-139,373.
	28 Temporarily restricted net assets	438,355.	28	471,438.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	140,846.	33	332,065.	
34 Total liabilities and net assets/fund balances	645,650.	34	674,622.	

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.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014

Open to Public Inspection

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

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 in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see Instructions)	(vi) Amount of other support (see Instructions)
			Yes	No		
Total						

Part 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) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(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) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(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 VI.)						
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 2014 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2013 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2013 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2014. 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 - 2013. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. Type III Supporting Organizations

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

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI .		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2014 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2014:			
a			
b			
c			
d			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount			
i Carryover from 2009 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2014 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6 Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7 Excess distributions carryover to 2015. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b			
c			
d Excess from 2013			
e Excess from 2014			

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.
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and
its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014

Name of the organization

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

Employer identification number



Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

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

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

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

Caution. An organization that 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 its Form 990-PF, Part I, line 2, 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) (2014)

Name of organization

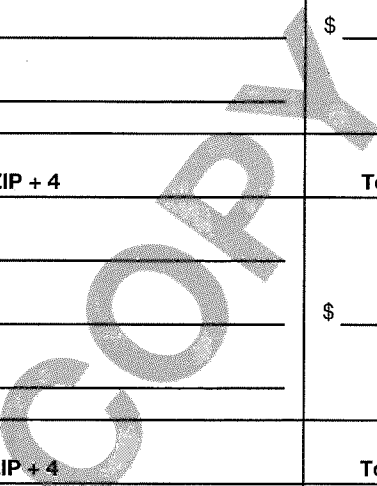
STAGE ONE: THE LOUISVILLE CHILDREN'S
THEATRE, INC.

Employer identification number



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

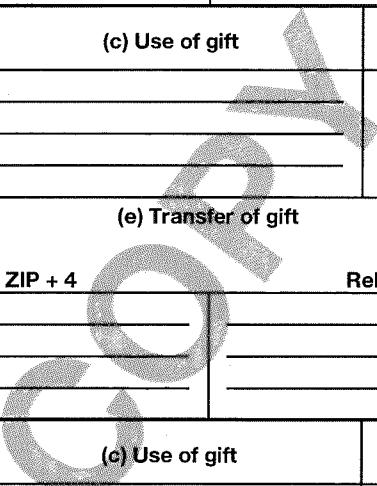
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ 90,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8		\$ 83,903.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9		\$ 107,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization STAGE ONE: 'THE LOUISVILLE CHILDREN'S THEATRE, INC.	Employer identification number <div style="background-color: black; width: 100px; height: 20px; margin-top: 5px;"></div>
---	--

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

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



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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that 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 XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" 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 XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" 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					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____ %
 - b Permanent endowment _____ %
 - c 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 | 3a(i) | |
| (ii) related organizations | 3a(ii) | |
| b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		54,343.	7,772.	46,571.
d Equipment		94,248.	70,829.	23,419.
e Other		35,214.	35,180.	34.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				70,024.

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

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

1	Total revenue, gains, and other support per audited financial statements		1	1,806,178.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
	a Net unrealized gains (losses) on investments	2a		
	b Donated services and use of facilities	2b	3,800.	
	c Recoveries of prior year grants	2c		
	d Other (Describe in Part XIII.)	2d		
	e Add lines 2a through 2d	2e	3,800.	
3	Subtract line 2e from line 1		3	1,802,378.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	b Other (Describe in Part XIII.)	4b		
	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	1,802,378.

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

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

1	Total expenses and losses per audited financial statements		1	1,614,959.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	a Donated services and use of facilities	2a	3,800.	
	b Prior year adjustments	2b		
	c Other losses	2c		
	d Other (Describe in Part XIII.)	2d		
	e Add lines 2a through 2d	2e	3,800.	
3	Subtract line 2e from line 1		3	1,611,159.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	b Other (Describe in Part XIII.)	4b		
	c Add lines 4a and 4b	4c	0.	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	1,611,159.

Part XIII Supplemental Information.

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

PART X, LINE 2:

THE ORGANIZATION IS 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

CODIFICATION. NO LIABILITY FOR UNCERTAIN TAX POSITIONS HAS BEEN RECORDED

IN THE ACCOMPANYING FINANCIAL STATEMENTS. THE ORGANIZATION'S 2011-2014

TAX YEARS REMAIN OPEN AND SUBJECT TO EXAMINATION.

SCHEDULE G (Form 990 or 990-EZ)

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

OMB No. 1545-0047

2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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

Employer identification number

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations
b Internet and email solicitations
c Phone solicitations
d In-person solicitations
e Solicitation of non-government grants
f Solicitation of government grants
g Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

Yes No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

Table with 6 columns: (i) Name and address of individual or entity (fundraiser), (ii) Activity, (iii) Did fundraiser have custody or control of contributions?, (iv) Gross receipts from activity, (v) Amount paid to (or retained by) fundraiser listed in col. (i), (vi) Amount paid to (or retained by) organization.

Total

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.



- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____

c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2014

**Open To Public
Inspection**

Department of the Treasury
Internal Revenue Service

- ▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
- ▶ **Attach to Form 990.**
- ▶ **Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.**

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

Employer identification number

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded				
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory	X	5	1,238.	FMV
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (CARPET)	X	1	14,872.	VALUED BY DONOR
26 Other ▶ (OFFICE FURNIT)	X	42	7,775.	FMV
27 Other ▶ (PRINTING SERV)	X	6	5,485.	VALUED BY DONOR
28 Other ▶ ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** 0

- 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? **30a** X
- b If "Yes," describe the arrangement in Part II.
- 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? **31** X
- 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? **32a** X
- b If "Yes," describe in Part II.
- 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

	Yes	No
30a		X
31		X
32a		X

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

Schedule M (Form 990) (2014)

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.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

OMB No. 1545-0047

2014

Open to Public
Inspection

Name of the organization

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

Employer identification number

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

OPPORTUNITY AND EMPATHY.

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

STRONG FAMILY BONDS. BOTH ON STAGE AND IN THE CLASSROOM, STAGEONE HAS,
FOR DECADES, BEEN A KEY PARTNER WITH AREA SCHOOL SYSTEMS IN PROVIDING
TENS OF THOUSANDS OF YOUNG PEOPLE THEIR FIRST PERFORMING ARTS
EXPERIENCE, MANY AT NO COST.

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

THE FORM 990 IS REVIEWED BY THE BUSINESS MANAGER AND THE PRODUCING ARTISTIC
DIRECTOR PRIOR TO ITS FILING. THE FORM 990 IS 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 ORGANIZATION'S 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
ORGANIZATION. NO SUCH BID WAS SUBMITTED BY A MEMBER OF THE BOARD IN 2014.

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

Schedule O (Form 990 or 990-EZ) (2014)

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

Employer identification number

APPOINTS AN AD HOC AUDIT COMMITTEE ANNUALLY. PRIOR TO THE ENGAGEMENT

OF THE AUDITORS, THE BUSINESS MANAGER 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 BUSINESS MANAGER 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.

COPY

Schedule R (Form 990) 2014 [REDACTED] Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

Part III

Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on 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			

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust 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) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on 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.

(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 sections 512-514)	(e) Are all partners sec. 501(c)(3) orgs.?		(f) Share of total income	(g) Share of end-of-year assets	(h) Dispropor- tionate 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		Yes	No		

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

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 its resident agent for service of process is:

Hemming Hilliard
419 W. Jefferson Street
Louisville 2, Ky.

G. The governing authority of this 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 their successors are as follows:

H. S. Wilder
Route 1, Brownsboro Road
Louisville, Ky.

Mrs. Harold Brigham
428 So. First St.
Louisville, Ky.

Mrs. J. H. Simpson, Jr.
Route 1, Brownsboro Road
Louisville, Ky.

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 7th day of ^{Aug.} July, 1948.

N. S. Wilder
Mrs J. H. Simpson Jr. - Al T. Simpson
Mrs. Harold K. Brigham - Anne 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 7th day of ^{Aug.} July, 1948.

My commission expires Oct. 17, 1949.



Henning Hilliard
Notary Public, Jefferson County, Ky.

ORIGINAL COPY
FILED AND RECORDED

DATE AUG 10 1948

DATE

George Blain Wilder
SECRETARY OF STATE OF KENTUCKY
FRANKFORT, KENTUCKY

BY S. L. Lyman
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 27 day of January, 1980.

My commission expires: 8/12/81.


Notary Public

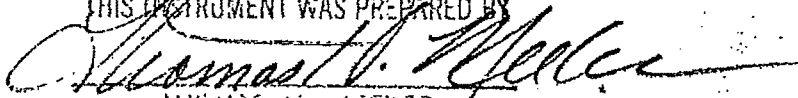
STATE OF KENTUCKY)
:
COUNTY OF JEFFERSON)

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 27 day of January, 1980.

My commission expires: 8/12/81


Notary Public

THIS INSTRUMENT WAS PREPARED BY


THOMAS H. MEEKER
WYATT, CRAFTON, & BLOSS
TWENTY-SEVENTH FLOOR CITIZENS PLAZA
LOUISVILLE, KY. 40202

SECRETARY OF STATE

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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 **161525**
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:~~

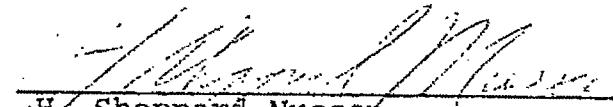
~~H. Sheppard Musson
187 Westwind Road
Louisville, Kentucky 40207~~

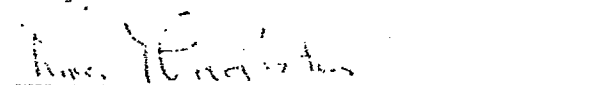
IN WITNESS WHEREOF, said H. Sheppard Musson, President, and
Mimi Middleton, Secretary of STAGE ONE: The Louisville Children's
Theatre (formerly The Louisville Children's Theatre, Inc.),
acting for and on behalf of said corporation, have hereunto
subscribed their names this 24 day of January, 1980.

ORIGINAL COPY
FILED
SECRETARY OF STATE OF KENTUCKY
FRANKFORT, KENTUCKY

FEB 11 1980


SECRETARY OF STATE


H. Sheppard Musson
President


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.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. Stage One: The Louisville Children's Theater, Inc.	
2 Business name/disregarded entity name, if different from above StageOne Family Theatre	
3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ <small>Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.</small> <input type="checkbox"/> Other (see Instructions) ▶ _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) <u>1</u> Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>
5 Address (number, street, and apt. or suite no.) 315 W. Market St., Ste. 2S	Requester's name and address (optional)
6 City, state, and ZIP code Louisville, KY 40202	
7 List account number(s) here (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 generally 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.

Social security number				
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; border: 1px solid black;"> </td> <td style="width: 25%; border: 1px solid black;"> </td> <td style="width: 25%; border: 1px solid black;"> </td> <td style="width: 25%; border: 1px solid black;"> </td> </tr> </table>				

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

or

Employer identification 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. citizen or other U.S. person (defined below); and
 - The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification Instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here	Signature of U.S. person ▶	Date ▶ <u>6/12/2015</u>
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.
Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
 - Form 1099-C (canceled debt)
 - Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.
- If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.*
- By signing the filled-out form, you:
- 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. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
 - Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

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

General Information

Organization Number	0144489
Name	STAGE ONE: THE LOUISVILLE CHILDREN'S THEATRE, INC.
Profit or Non-Profit	N - Non-profit
Company Type	KCO - Kentucky Corporation
Status	A - Active
Standing	G - Good
State	KY
File Date	8/10/1948
Organization Date	8/10/1948
Last Annual Report	6/7/2016
Principal Office	315 WEST MARKET STREET, SUITE 2S LOUISVILLE, KY 40202
Registered Agent	S & H LOUISVILLE, LLC C/O STITES & HARBISON - MS SARA CRONAN 400 W. MARKET STREET LOUISVILLE, KY 40202-3352

Current Officers

Chairman	<u>Michael Merrick</u>
CEO	<u>Peter Holloway</u>
Director	<u>Michelle Hawk Heit</u>
Director	<u>Ashley Butler</u>
Director	<u>Kristen Byrd</u>
Director	<u>Lea Pauley Goff</u>
Director	<u>Elizabeth Kaplan</u>
Director	<u>Peggy Krug</u>
Director	<u>Leisa Schulz</u>
Director	<u>Carl Thomas</u>
Director	<u>Suzanne Wright</u>
Director	<u>Tyler Hampton</u>
Director	<u>Sam Corbett</u>
Director	<u>Jerry Preyss</u>
Director	<u>Jonathan Riehm</u>
Director	<u>Mark Rorer</u>
Director	<u>Ian Helson</u>
Director	<u>Dot O'Brien</u>
Director	<u>Glenda Thome</u>
Director	<u>Carol Lambert</u>
Director	<u>Breck Thomas-Ross</u>
Director	<u>Jessie Broughton</u>

Director [Jamie Paradis](#)
 Director [Stephanie Ubelhart](#)
 Director [Jennifer Luhrs](#)

Individuals / Entities listed at time of formation

Director [N S WILDER](#)
 Director [MRS HAROLD BRIGHAM](#)
 Director [MRS J J SIMPSON JR](#)
 Incorporator [N S WILDER](#)
 Incorporator [MRS HAROLD L BRIGHAM](#)
 Incorporator [MRS J J SIMPSON JR](#)

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.

Annual Report	6/7/2016	1 page	PDF	
Annual Report	7/7/2015	1 page	PDF	
Principal Office Address Change	10/13/2014 11:23:12 AM	1 page	PDF	
Annual Report Amendment	10/13/2014	1 page	PDF	
Annual Report	8/11/2014	1 page	PDF	
Annual Report	6/28/2013	1 page	PDF	
Name Renewal	4/5/2013 11:18:42 AM	1 page	PDF	
Registered Agent name/address change	6/27/2012 2:22:50 PM	1 page	PDF	
Annual Report	6/27/2012	1 page	PDF	
Annual Report	6/22/2011	1 page	PDF	
Annual Report	4/6/2010	1 page	PDF	
Principal Office Address Change	6/30/2009	1 page	tiff	PDF
Annual Report	6/25/2009	1 page	PDF	
Annual Report	6/11/2008	1 page	PDF	
Name Renewal	4/3/2008	1 page	tiff	PDF
Annual Report	6/15/2007	1 page	PDF	
Statement of Change	6/27/2006	1 page	tiff	PDF
Annual Report	5/25/2006	1 page	PDF	
Annual Report	6/28/2005	2 pages	tiff	PDF
Annual Report	9/8/2003	1 page	tiff	PDF
Name Renewal	6/27/2003	1 page	tiff	PDF
Annual Report	9/9/2002	1 page	tiff	PDF
Statement of Change	6/19/2002	1 page	tiff	PDF
Annual Report	9/11/2001	6 pages	tiff	PDF
Annual Report	8/2/1999	6 pages	tiff	PDF
Annual Report	7/29/1998	4 pages	tiff	PDF
Annual Report	7/1/1997	2 pages	tiff	PDF
Certificate of Assumed Name	6/9/1997	1 page	tiff	PDF
Statement of Change	5/2/1997	1 page	tiff	PDF

Annual Report	7/1/1996	4 pages	tiff	PDF
Annual Report	7/1/1995	1 page	tiff	PDF
Annual Report	7/1/1995	1 page	tiff	PDF
Annual Report	7/1/1994	2 pages	tiff	PDF
Annual Report	7/1/1993	1 page	tiff	PDF
Annual Report	7/1/1992	6 pages	tiff	PDF
Annual Report	7/1/1991	9 pages	tiff	PDF
Annual Report	7/1/1990	6 pages	tiff	PDF
Annual Report	7/1/1989	7 pages	tiff	PDF
Six Month Notice Return	9/1/1986	1 page	tiff	PDF
Amendment	2/11/1980	5 pages	tiff	PDF
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	6/7/2016 10:17:07 AM	6/7/2016 10:17:07 AM	
Annual report	7/7/2015 10:36:43 AM	7/7/2015 10:36:43 AM	
Amendment to annual report	10/13/2014 11:25:10 AM	10/13/2014 11:25:10 AM	
Principal office change	10/13/2014 11:23:12 AM	10/13/2014 11:23:12 AM	
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	
	6/27/2003		

Annual report	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

LOUISVILLE CHILDREN'S
THEATER, INC.

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
Statement of Change	6/19/2002	1 page
Annual Report	9/11/2001	6 pages
Annual Report	8/7/2000	8 pages
Annual Report	8/2/1999	6 pages
Annual Report	7/29/1998	4 pages
Annual Report	7/1/1997	2 pages
Certificate of Assumed Name	6/9/1997	1 page
Statement of Change	5/2/1997	1 page
Annual Report	7/1/1996	4 pages
Annual Report	7/1/1995	1 page
Annual Report	7/1/1994	2 pages
Annual Report	7/1/1993	1 page
Annual Report	7/1/1992	6 pages
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