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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047 2008 Open to Public Inspection

	For the 2008	calendar ye	ear, or tax year beginning $7/01/08$, and ending $6/30/6$	09							
В	Check if applicable		C Name of organization		D Emple	oyer identification number					
	Address change	use IRS	The Peoria Players								
Ħ	Name change	label or print or	Doing Business As		37	-0460200					
닉	wanne change	type	Number and street (or P O box if mail is not delivered to street address)	Room/suite	1	hone number					
╝	Initial return	See	4300 N. University St.		1	9-688-4473					
	Termination	Specific Instruc-	City or town, state or country, and ZIP + 4		G Gross rec						
\Box	Amended return	tions.	Peoria IL 61614		0 0,000,100	7,000					
H		E Nom	e and address of principal officer		H(a) Is this a group return for						
Ш	Application pendi	ng · ····	5 310 333 335 31 p.m.s.p.a. 3 1133		affilial						
		ŀ			H(b) Are all	ll affiliates					
					1	attach a list (see ınstructions)					
_	Tax-exempt s	tatus X	(501(c) (3) ◀ (insert no) 4947(a)(1) or 527		1	,,					
J			peoriaplayers.org		H(c) Group	exemption number					
ĸ	Type of organiza	T1	progration Trust Association Other L	Year of formation	1	M State of legal domicile IL					
	Part I	Summa	· · · · · · · · · · · · · · · · · · ·								
			the organization's mission or most significant activities.								
•	Pr	ovide	training for local talent	•							
ĕ			-								
Activities & Governance			·			•					
8	2 Chec	k this box	▶ ☐ If the organization discontinued its operations or disposed of more than	25% of its assets.							
Ŏ	3 Numb	er of voting	g members of the governing body (Part VI, line 1a)		3	18					
Se Se	1		pendent voting members of the governing body (Part VI, line 1b)		4	18					
ŧ	5 Total	number of	employees (Part V, line 2a)		5	2					
둉	6 Total	number of	volunteers (estimate if necessary)		6	12					
_	7a Total	gross unre	lated business revenue from Part VIII, line 12, column (C)		7a	2,135					
	b Net u	nrelated bu	isiness taxable income from Form 990-T, line 34		7b	1,052					
				Prior Yo		Current Year					
Θ	8 Contr	ibutions an	d grants (Part VIII, line 1h)		4,587	23,967					
Revenue	9 Progr	am service	revenue (Part VIII, line 2g)	22	8,852	187,488					
ě	10 Inves	tment incor	me (Part VIII, column (A), lines 3, 4, and 7d)		656	253					
-	11 Other	revenue (F	Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		6,630	28,081					
			add lines 8 through 11 (must equal Part VIII, column (A), line 12)	27	0,725	239,789					
	1		ar amounts paid (Part IX, column (A), lines 1-3)		500	500					
	1	-	or for members (Part IX, column (A), line 4)	ļ <u>-</u>							
es	15 Salar	•	compensation, employee benefits (Part IX, column (A), lines 5–10)	5	3,473	60,563					
enses	16a Profe		draising fees (Part IX, column (A), line 11e)	5 ×1. (0 ×) = 1	ray of the second						
Expe	b total	_	g expenses (Part IX, column (D), line 25)	- 3 / 1/2 m 20		The state of the s					
ш	11 0010		TPart X column(TA), lines 11a-11d, 11f-24f)		1,979	186,811					
ഗ	18 Total		Att Lines 43-17 (must equal Part IX, column (A), line 25)		5,952	247,874					
SO DE TOTAL	19 Reve	nuelless ex	kpenses Subtract line 18 from line 12	Beginning	4,773	-8,085 End of Year					
3	E 20 Total	assets (Pa	INDEC 1.5 2009 (2)		3,328	136,539					
Ž	21 Total	1 1111	Part X, line 26).		1,617	32,913					
3	22 Net a		nd balances Subtract line 21 from line 20		1,711	103,626					
_	Part II		ire Block								
			sities of perjury declare that I have examined this return, including accompanying schedules	and statements, and	d to the best	of my knowledge					
	- 1		it is true, correct, and complete. Declaration of preparer (other than officer) is based on all inf								
Si.	gn	×	Attens (Portalutte)		/	2/8/110					
He	ere	Signati	ure of officer		Date	10/04					
	re	\	BOALD PRESIDAN								
	•	Type o	or print name and title		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·					
_		<u> </u>	Date	Check	ς if	Preparer's identifying number					
Pa	aid	Preparer's signature		03/09 self- emplo	. [(see instructions) P00547107					
Pr	eparer's		Retzer, Gerber & Assoc., Ltd.	OD/OD emplo	1	► 37-1107747					
Us	se Only		e (or yours		EIN	<u> </u>					
		if self-emple address, ar			Phone	309-688-6607					
Ma	v the IRS die		eturn with the preparer shown above? (see instructions)		no 🕨	Yes No					
	-, 11 to ula		stati. That are property energy above (does insudesions)			[1.52 140					

4d	4d Other program services. (Describe in Schedule O.)								
	(Expenses \$		including grants of \$) (Revenue \$					
4e	Total program service expenses	> \$	164,718	(Must equal Part IX, Line 25, column (B).)					
					Form 990 (2008)				

	A	
	Chacklist at Dag	unirod Cabadulaa
Part IV	CHECKHSI DI KEU	wired Schedules

	·		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
_	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
-	Schedule C, Part II	4		Х
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete			
	Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		_X_
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,			
	Parts VI, VII, VIII, IX, or X as applicable	11	X	
12	Did the organization receive an audited financial statement for the year for which it is completing this return			
	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the US?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report more than \$15,000 on Part iX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
18 40	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20 24	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
21 22	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		$\overline{}$
22 23	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
£.J	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	-23		
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions			
	24b–24d and complete Schedule K. If "No," go to guestion 25.	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified			
	person from a prior year? If "Yes," complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or			
	substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		Χ_
		Form	990	(2008)

Form 990 (2008) The Peoria Players Part IV Checklist of Required Schedules (continued)

	`		Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or			
	employee), or an indirect business relationship through ownership of more than 35% in another entity			
	(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			
	Part IV	28a		<u>X</u>
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes,"			
	complete Schedule L, Part IV	28b		X
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a			
	professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29_		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I .	31		<u>X</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete		Ì	
	Schedule N, Part II	32		<u>X</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u>X</u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		<u>X</u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI	_37		X

Form **990** (2008)

Pa	irt V Statements Regarding Other IRS Filings and Tax Compliance					
	•				Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	ı				
	U.S. Information Returns. Enter -0- if not applicable	1a				
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b		j ,-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and report	able		1.		
	gaming (gambling) winnings to prize winners?			1c		Х
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	2a	2			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see					
	instructions)			: :-		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by	/		F-1,	, ,	- , t
	this return?			3a	Х	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b	Х	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other auth	ority				
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	ıal				i
	account)?			4a		Χ
b	If "Yes," enter the name of the foreign country:			1-27	, T	10 312
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Ban	k		1 3 7	100	, 35
	and Financial Accounts.					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	?		5b		X
C	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity					
	Regarding Prohibited Tax Shelter Transaction?			5c		
6a	Did the organization solicit any contributions that were not tax deductible?			6a		Х
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions	or				
	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).			Carrier,		و فرو الم
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more that	n		,,,,,	1,4,4	
	\$75? _.			7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was					
	required to file Form 8282?			7c		X
ď	If "Yes," indicate the number of Forms 8282 filed during the year	7d		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	·. , ·; ,	
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a person	onal		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	- 1	~ .,
	benefit contract?			7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	1		7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7g		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as					
_	required?			7h		X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and secti			¥" =		
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponso	rıng			· · · ·	
	organization, have excess business holdings at any time during the year?			8		<u>X</u>
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.				4,15-	
a	Did the organization make any taxable distributions under section 4966?			9a		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		Χ
10	Section 501(c)(7) organizations. Enter.			1	· [
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	 		,	
b 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		∤		
11	Section 501(c)(12) organizations. Enter	إيمه			-	
a	Gross income from members or shareholders	11a		-		
b	Gross income from other sources (Do not net amounts due or paid to other sources against	44.				
12a	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in liqu of Form 10	11b		1 42-	ð -	
b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10			12a	,	
0	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		<u> </u>	لنخ	

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

000	tion A. Governing body and management					V	N ₂
	For each "Yes" response to lines 2–7b below, and for a "No" response to lines 8 or 9b below, describe the	_			·	Yes	No
	circumstances, processes, or changes in Schedule O. See instructions	; ,			'	- 1	
10	Enter the number of voting members of the governing body	4.	18		'		
1a		1a 1b	18		<u></u>	'	
b	Enter the number of voting members that are independent		10		`		l
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship will	.n					v
_	any other officer, director, trustee, or key employee?				2		<u>X</u>
3	Did the organization delegate control over management duties customarily performed by or under the dire						v
	supervision of officers, directors or trustees, or key employees to a management company or other perso		- 51- 40		3		<u>X</u>
4	Did the organization make any significant changes to its organizational documents since the prior Form 9	90 was	s nied?		4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?				5		X
6	Does the organization have members or stockholders?				6		
7a	Does the organization have members, stockholders, or other persons who may elect one or more members, stockholders, or other persons who may elect one or more members.	ers			_		v
	of the governing body?	_			7a		<u>X</u>
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons				7b	, , 1	<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	g				1 1 1 T	
	the year by the following:				\$3.4/2 L	37	, 4
a	The governing body?		-		8a	X	
b	Each committee with authority to act on behalf of the governing body?				8b	Х	
9a	Does the organization have local chapters, branches, or affiliates?				9a		<u>X</u>
Ь	If "Yes," does the organization have written policies and procedures governing the activities of such chapter of the control o	ters,			١		
40	affiliates, and branches to ensure their operations are consistent with those of the organization?		-		9ь		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organization and the second of	ations	}				37
	must describe in Schedule O the process, if any, the organization uses to review the Form 990				10		<u>X</u>
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reach	ed at					37
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		·	·	11		<u>X</u>
Sec	tion B. Policies						
120	Door the granutation have a written conflict of interest policy? If "No." as to line 12				425	Yes	No X
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13				12a		
þ	Are officers, directors or trustees, and key employees required to disclose annually interests that could gi	ve			405		
_	rise to conflicts?	,,			12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes, describe in Schedule O how this is done				40.		
12	Does the organization have a written whistleblower policy?				12c		
13	Does the organization have a written document retention and destruction policy?				13		X
14	Did the process for determining compensation of the following persons include a review and approval by				14		
15	independent persons, comparability data, and contemporaneous substantiation of the deliberation and de	.cic.on					,
_	The organization's CEO, Executive Director, or top management official?	asion.	•				v.
a	Other officers or key employees of the organization?				15a		<u>X</u>
b	Describe the process in Schedule O (see instructions)				15b		<u>.</u>
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement					`	f_{i}
iva	with a taxable entity during the year?				46-	1	X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate		•		16a		
D	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safegue	ard					
		310			465	` '	- ^
500	the organization's exempt status with respect to such arrangements? tion C. Disclosure				16b		
	List the states with which a copy of this Form 990 is required to be filed IL						
17	1,7	/-\/ ? \-	!\				
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501	(C)(3)	s only)				
	available for public inspection. Indicate how you make these available. Check all that apply.						
40	Own website Another's website X Upon request						
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflictions and force and statements and the south to make the south of the	ct of in	iterest				
20	policy, and financial statements available to the public.		- f 1 -				
20	State the name, physical address, and telephone number of the person who possesses the books and re			_			
т.	organization: ► Sherry Haschke 4300 N. Univ		•		00 60	0 4	477
P	eoria I	<u>ட</u> 6	<u> 1614</u>	3	<u>09-68</u>	<u>ਲ - 4</u>	<u>4/3</u>

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

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- 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.

X Check this box if the or	ganization did not compens	sate :	алу с	office	er, di	recto	r, tru	stee, or key employee.		
(A)	(B) Average			(0	C)	nat ap		(D) Reportable	(E) Reportable	(F) Estimated
Name and Title		Individual trustee or director		Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Steve Bortol	otti								. , ,	
President		Х		Х				0	0	0
Jim Babrowsk	i									-
Vice Pres.		Х		X	l			o o	0	0
Bill Murphy										
Secretary		Х		Х				o	0	0
Katie McLuck	ie									
Treasurer		Х		Х				0	0	0
Ryan Campen										
Director		Х						0	0	0
Nate Downs										
Director		Х						0	0	0
Helen Engelb	recht	Ì								
<u>Director</u>		Х						0	0	0
Paula Graves		İ								
<u>Director</u>		X			<u></u>	Ш		0	0	0
Ken Hupp		ŀ			ł					
Director		Х	<u></u>			Ш		0	0	0
Charles Kill	en	İ								
<u>Director</u>		X				Щ		0	0	0
Jerry Klein					ŀ					
Director		X						0.	0	0
_David Miller	1				ŀ					
Director		X	<u> </u>					0	0	0
Steve Montez	1									
Director	 	X			<u> </u>			0	0	0
Donna Palkov	ic	l								
Director		X			ļ			0	0	0
Mike Reams								_ [
Director		X				-		0	0	0
Pam Swisher								_		
Director		X			<u> </u>	\vdash		0	0	0
Jimmy Ulrich		١,,						_	_	
<u>Director</u>	l <u></u>	X			L	لـــا		0	0	0

Part VII	Section A	. Officers, Directors, Trus	tees	, Ke	y Em	plo	yees	, an	d Highest Compensated E	imployees (continued)		
	A) and title •	(B) Average		_	(C check	all th	_		(D) Reportable	(E) Reportable	(F) Estimate	
	•	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization organization organization organization other contents of the contents of th	tion e eon ed
	ilhelm										-	
Direct	or		X						0	0		0
												
				-				-				
	-							-				
	-										··	
1b Total			<u> </u>	<u> </u>	L							
	number of individual	viduals (including those in 1	a) wl	no re	ceive	ed m	ore t	han	\$100,000 in reportable com	npensation from the		
emplo	yee on line 1a'	list any former officer, directive of the complete Schedu	ile J	for s	uch I	ndivi	dual				3	res No
the org	ganization and lual	ted on line 1a, is the sum of related organizations great	er th	an \$	150,0	000?	'If "Y	es,"	complete Schedule J for su	m uch	4	ic. Z m
		on line 1a receive or accrute the organization? If "Yes,"									5	X
1 Comp	Independent lete this table f ensation from t	Contractors for your five highest comper the organization	nsate	d inc	depe	nder	nt cor	trac	tors that received more that	n \$100,000 of		
		(A) Name and business address							Descrip	(B) tion of services	Comp	(C) pensation
				-				_				-
2 7 11												
		pendent contractors (include the organization	ling t	hose	: in 1) wh	o rec	eive	d more than \$100,000 in		0	90 (2008)

.. .

<u>Pa</u>	<u>rt VI</u>	II Statement of Rev	enue					
				·	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
SS	12	Federated campaigns	1a					5,2,5,5,5,5,
in a		, -				,	-	,
Contributions, gifts, grants and other similar amounts		Membership dues	1b			*4 -		,
a, ts	С	Fundraising events	1c			-	,	
Pgi	d	Related organizations	1d			, Je e		
ΣE	е	Government grants (contributions)	1e	7,600	•	1.		
o s		All other contributions, gifts, grants,						
돌림	-	and similar amounts not included above	1f	16,367				و پر پ
<u> </u>				10,307				
55	_	Noncash contributions included in lines 1	a-1f \$					
0 "	<u>h</u>	Total. Add lines 1a-1f .		<u> </u>	23,967			Yang San Pangalan San
Program Service Revenue				Busn. Code			* . ,	1.48年11.111
ē	2a	Ticket Sales			177,815	177,815	,	-
<u></u>	ь	Costume rentals			5,073	5,073		
- 8	_				2,805	2,805	- /	
ا چَ	C	Awards Income						
တိ	d	Membership Dues			1,795	1,795		
a	е							
ğ	f	All other program service rev	enue					
P.	а	Total. Add lines 2a-2f			187,488	海北海市市城市公司	45.77	14 10 30 90 11 11 11
		Investment income (including	drudende	interest and			<u> </u>	
	3		dividends,	, interest, and	252			252
		other similar amounts)			253			253
	4	Income from investment of ta	x-exempt b	oond proceeds >				
	5	Royalties		_				
		(ı) Real		(II) Personal		建筑设施设施设		10000000000000000000000000000000000000
	6a	Gross Rents 1	1,910	, ,		被证券还是是		
	b	Less rental exps.						
	-		1 010		为一种的一种			
	С		1,910		in a resultant in the	amin'n 11781 asalim	を発展を表する。 ことがら	
	_d	Net rental income or (loss)			11,910	5 tres 5 t 1 2 t 2 t 2 t 2 t 2 t 2 t 2 t 2 t 2 t	20 19 2 2 2 1 2 2	11,910
	/a	Gross amount from sales of assets (1) Security	ies	(II) Other				
		other than inventory	j			声。如塞到此意		
	ь	Less cost or other						
	_	basis & sales exps	1			1、11分享基本模		
				·		The State of		
		Gain or (loss)			E100 34 354.	THE WILLIAM STATES	Section (1967)	24、2017至1925年202
	đ	Net gain or (loss) .	_	<u> </u>	,			
	8a	Gross income from fundraising ev	rents				المراجعة الم	
9		(not including \$		i	1 1 1 1 1 1 1 1	"""""""""		三式装件 等
e u		of contributions reported on line 1	c).			The same of the sa		19.00 400
Other Revenu		See Part IV, line 18	″ a	10,108	1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		4 + 35 20 4 10 20 20
F			i,	1,829				1973 A. 1. 7 C. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
ŧ		Less: direct expenses			6 . / 1. 13	1 14 (15) 14 (1.24 m 1 1 1 1	13.55-5-48.353
0		Net income or (loss) from fun		rents ▶	8,279			8,279
	9a	Gross income from gaming activity	ties		Profes Poplar	الراب المعالم المراجع المناسبة والمناسبة المارية		15次要提出的原料。
		See Part IV, line 19	а	1,134	المراجع والمحيرة أما منوس ما يو			1767年最後
	ь	Less: direct expenses	ьГ	36			是在100mm	
	•	Net income or (loss) from gar	mina activit		1,098			1,098
				IIC3 P	,		5 5 W	17000 1731 - 140514
	TUa	Gross sales of inventory, less	5		70 2 7 7 7	[· · · · · · · · · · · · · · · · · · ·	*# T	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
		returns and allowances	a		1 1	3 - 2 - 2	9	They are series
	b	Less: cost of goods sold	b	 .	5 · · ·		1 1 g 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	С	Net income or (loss) from sal	es of inven	itory				
		Miscellaneous Rever		Busn. Code	,	,	7.5 M	112
	11-				2,768	•	,	
	11a	Concessions		F 4 3 0 3 3				2,768
	b	Program Acknowledgme		541800			2,135	
	C	Miscellaneous Income			1,891	<u> </u>		1,891
	d	All other revenue				ļ		
	e	Total. Add lines 11a-11d			6,794			. 1 2 . 1
	12	Total Revenue. Add lines 1h	ı, 2g. 3. 4. !	5, 6d, 7d. 8c.				
		9c, 10c, and 11e	. 5	•	239,789	187,488	2,135	26,199

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and				<i>i</i>
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in			k k 1	
	the U.S. See Part IV, line 22	500	500		· . ` ·
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U S. See Part IV, lines 15 and 16			1217	A service from
4	Benefits paid to or for members			(. m &	
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified			···-	
•	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				:
7	Other salaries and wages	56,384		56,384	
	Pension plan contributions (include section 401(k)	30,304		30,304	-
8					
^	and section 403(b) employer contributions)				
9	Other employee benefits	4 170		4 170	
10	Payroll taxes	4,179		4,179	
11	Fees for services (non-employees)				
_	Management				
b	•	0.600		0.600	
	Accounting	2,600		2,600	
	Lobbying		-5" - 2 2014 1 - JW5 - 28 4	17 (* 14) 303/17 (* * * * * * *) = (*) = (*)	
е	Professional fundraising services See Part IV, line 17		क्षेत्र कर कर के किसी हो हो। इसके कर के किसी के किसी हो की किसी हो किसी हो किसी हो किसी हो किसी हो किसी हो किसी	是語語的於人物。此次	
f	Investment management fees				
g	Other				
12	Advertising and promotion	2,836	2,836		
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	11,000	11,000	-	
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials			···-·	
19	Conferences, conventions, and meetings			<u> </u>	
20	Interest			· · · · · · · · · · · · · · · · · · ·	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	13,960	13,475	485	
23	Insurance				
24	Otherson				3 3 4 - 3 3 3 9
24	Other expenses. Itemize expenses not				文物學 一致智慧
	covered above. (Expenses grouped together	*			
	and labeled miscellaneous may not exceed		1	-3 \$1 × 20 ° 2 × 10 ° 1	y Service Community of the Community of
_	5% of total expenses shown on line 25 below.)	100 [70	100 570	r' - 3 - 113 -	3 2 2 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
a	Production expenses	102,578	102,578	· · · · · · · · · · · · · · · · · ·	
b	Utilities	26,047	26,047	4 551	
C	Office Supplies	4,551		4,551	
d	Bank charges	4,255		4,255	····
e	Insurance All other expenses	3,667 15,317	0 202	3,667	
25	Total functional expenses. Add lines 1 through 24f	247,874	8,282 164,718	7,035 83,156	
26	Joint Costs. Check here	241,014	104,/10	03,130	
20	SOP 98-2. Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation				
	g oonoleanon		l <u> </u>		

	/		· · · - · · · · · · · · · · · · · · · ·	,	_			
				(A)	ļ	(E		
				Beginning of year		End o	f year	
	1	Cash—non-interest bearing			1	<u> </u>		
ŀ	2	Savings and temporary cash investments		78,697	2	ļ	33,	122
İ	3	Pledges and grants receivable, net			3			
	4	Accounts receivable, net .		839	4		<u>2,</u>	792
	5	Receivables from current and former officers, directors, tru	istees, key					
		employees, or other related parties. Complete Part II of Sc	hedule L		5			
	6	Receivables from other disqualified persons (as defined un	nder section					
Ì		4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete		,	,· .		
		Part II of Schedule L			6			
ß	7	Notes and loans receivable, net			7			
se	8	Inventories for sale or use		,	8			
Assets	9	Prepaid expenses and deferred charges		9,784	9		23,	626
`	10a	Land, buildings, and equipment cost basis	10a 251,987	S	,		٠,٢,٠,	
	b	Less: accumulated depreciation. Complete			12 12 (54)		٠, ٠,٠	300
		Part VI of Schedule D	10b 176,037	52,965		1	75,	
	11	Investments—publicly traded securities		/	11			
	12	Investments—other securities. See Part IV, line 11			12			
	13	Investments—program-related See Part IV, line 11			13	<u> </u>		
	14	Intangible assets			14			-
	15	Other assets. See Part IV, line 11	•	1,043			1	049
	16	Total assets. Add lines 1 through 15 (must equal line 34)	• -	143,328		1	36,	
_	17	Accounts payable and accrued expenses	· · · · · · · · · · · · · · · · · · ·	4,378		 		037
	18	Grants payable		4,370	18	 	Ο,	05
	19	Deferred revenue			19	<u> </u>		
		•			20	 		
g	20	Tax-exempt bond liabilities			 	<u> </u>		
Liabilities	21	Escrow account liability. Complete Part IV of Schedule D	Lance	建度5000 PEC 20 TB-1400 PT X 1	21	THE STATE 1 SLIPS	Gr. S.	5. 1h c
þi	22	Payables to current and former officers, directors, trustees	•	· · · · · · · · · · · · · · · · · · ·	7			``}{\$\`.
ja.		employees, highest compensated employees, and disqual	ined	學(1977年) · 人名斯克·	25.	and with the state of the	53.	j5,
_		persons. Complete Part II of Schedule L			22	 		
	23	Secured mortgages and notes payable to unrelated third p	arties		23			
	24	Unsecured notes and loans payable			24			
	25	Other liabilities. Complete Part X of Schedule D		27,239			<u> 26,</u>	
	26	Total liabilities. Add lines 17 through 25		31,617	26	ļ	32,	913
nces		Organizations that follow SFAS 117, check here ▶ 🛚	and	是在1994年11年11日 1	2.3	[19] [1] [1]	, 4.	٠ . ² ٠
2		complete lines 27 through 29, and lines 33 and 34.		The state of the	(· · ·	A Bridge The Try	= -	C 41 4
Balaı	27	Unrestricted net assets		111,711	27	1	.03,	<u>626</u>
Ö	28	Temporarily restricted net assets			28			
Fund	29	Permanently restricted net assets	,		29			
교		Organizations that do not follow SFAS 117, check her	e► ∐	家庭·阿拉克	1	العيام الترابع الأول ما أنها العيام الترابع الأول ما أنها		1 10 10
ō		and complete lines 30 through 34.		High comment of the first of	***	Por Marcher	1	والمراجعة المراجعة
	30	Capital stock or trust principal, or current funds			30			
Assets	31	Paid-in or capital surplus, or land, building, or equipment fi	und		31			
As	32	Retained earnings, endowment, accumulated income, or o	other funds		32	<u> </u>		
Net	33	Total net assets or fund balances		111,711	33	1	.03,	626
z	34	Total liabilities and net assets/fund balances		143,328	34	1	36,	539
_P	art :	XI Financial Statements and Reporting		· · · · · · · · · · · · · · · · · · ·				
							Yes	No
1	Ac	counting method used to prepare the Form 990: C	ash X Accrual O	ther		1,12	7.	
2	W	ere the organization's financial statements compiled or revie	wed by an independent accountar	nt?		2a	Х	<u>l</u>
t	W	ere the organization's financial statements audited by an ind	ependent accountant?			2b		Х
•	: If'	"Yes" to lines 2a or 2b, does the organization have a commit	tee that assumes responsibility fo	r oversight of				П
		e audit, review, or compilation of its financial statements and				2c	Х	1
3		s a result of a federal award, was the organization required to						
		e Single Audit Act and OMB Circular A-133?	-			За		X
t		"Yes," did the organization undergo the required audit or aud	lits?			3b		
_	•			······································			, gan	12009

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

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

OMB No 1545-0047 2008

> Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

The Peoria Players

Employer identification number 37-0460200

_Pa	art I	Reaso	on for Public Charity S	Status (All organizations	must co	omplete	this p	<u>art.) (s</u>	see ins	struction	ons)		
The	orga	nization is not a	a private foundation because	it is (Please check only one org	ganization)							
1	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)												
2	П	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)											
3	П	A hospital or a	a cooperative hospital service	e organization described in secti	ion 170(b)	(1)(A)(iii)	. (Attach	Schedu	ıle H.)				
4	П	A medical res	earch organization operated	in conjunction with a hospital de	scribed in	section 1	70(b)(1)(A)(iii).	Enter th	e hospi	ital's name,		
	_	city, and state).							·			
5	П	-		a college or university owned or	operated	by a gove	ernmenta	al unit de	escribed	ın			
	_	=	b)(1)(A)(iv). (Complete Part I		•								
6	\Box			vernmental unit described in sec	tion 170(b)(1)(A)(v	·).						
7	П	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	П	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)											
9	X												
		receipts from	activities related to its exemp	ot functionssubject to certain e	xceptions,	, and (2) n	o more	than 33	1/3 % o	f its			
		support from	gross investment income and	unrelated business taxable inco	ome (less	section 51	11 tax) fr	om busi	nesses				
		acquired by th	ne organization after June 30	, 1975. See section 509(a)(2). (Complete	Part III)							
10		An organization	on organized and operated e	xclusively to test for public safety	y See sec	tion 509(a)(4). (s	ee instru	ictions)				
11		An organization	on organized and operated e	xclusively for the benefit of, to pe	erform the	functions	of, or to	carry ou	it the				
		purposes of o	ne or more publicly supporte	d organizations described in sec	tion 509(a)(1) or se	ction 509	9(a)(2). \$	See sec	tion			
		509(a)(3). Ch	eck the box that describes th	e type of supporting organization	n and com	plete lines	11e thr	ough 11	h.				
	_	a Type	I b Type II	c Type III–Functiona	ally Integra	ated	d	Тур	e III-Ot	her			
е	Ш	By checking to	his box, I certify that the orga	nization is not controlled directly	or indirec	tly by one	or more	disqual	ıfied				
		persons other	than foundation managers a	nd other than one or more public	cly suppor	ted organ	izatıons	describe	ed in sec	ction			
		,	ection 509(a)(2).										
f		_		mination from the IRS that it is a	Type I, Ty	pe II, or T	ype III s	upportin	ng				
		-	check this box										Ш
g		_	_	on accepted any gift or contributi	ion from a	ny of the							
		following pers									•		Γ.
				ntrols, either alone or together wi	ith person	s describe	ed in (ii)				[Yes	No
		, ,	below, the governing body of	·· -							11g(i)		
		• • •	member of a person describe	• •							11g(ii)		
		` '	ontrolled entity of a person de	** **							[11g(iii)	!	L
_h		Provide the f	ollowing information about the	e organizations the organization	supports				,				
(i)		e of supported	(ii) EIN	(iii) Type of organization (described on lines 1–9	1 ' '	organization		ou notify		s the	(vii) Am		
	Org	ganization		above or IRC section	in col (i) listed in your governing document?		the organization in col (i) of your		, -	on in col zed in the	supp	on	
				(see instructions))	L	,	sup	port?	U	S ?			
					Yes	No	Yes	No	Yes	No			
									}				
					-	<u> </u>		<u> </u>	 				
						 -			 		<u> </u>		
						i							
					 	 		<u> </u>	 				
					1								
					ļ	, ,		ļ					
Tota	al			,			,						

	(Complete only if you che	ecked the box	on line 5, 7, or	8 of Part I.)			
Sec	tion A. Public Support						
Cal	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1-3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4	一路以外的工程	1				
Sec	tion B. Total Support						
Cal	endar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)	Company of the Co					
11	Total support. Add lines 7 through 10	· · · · · · · · · · · · · · · · · · ·	1	1 a 1 - 1200 1 21	San Address (S)	Roman Services	
12	Gross receipts from related activities, etc.	•				12	
13	First five years. If the Form 990 is for the	•	second, third, fourt	h, or fifth tax year a	is a section 501(c)	(3)	
500	organization, check this box and stop here tion C. Computation of Public Su						P
		· · · · · · · · · · · · · · · · · · ·		(6)		144 1	
14 15	Public support percentage for 2008 (line 6, Public support percentage from 2007 Sche		*	(1))		15	%
16a	33 1/3 % support test—2008. If the organ			and line 14 is 22	1/2 % or more, ch		%
IUa	and stop here. The organization qualifies			5, and line 14 is 55	1/3 % of more, cire	CK UIIS DOX	▶ 🗌
b	33 1/3 % support test—2007. If the organ		•	or 16a, and line 15.	ıs 33 1/3 % or more	a chack this	
	box and stop here. The organization quali				15 33 1/3 /6 01 111011	e, Gleck this	▶ □
17a	10%-facts-and-circumstances test—200	• •			or 16b. and line 14	ıs 10% or	• -
	more, and if the organization meets the "fa	-					
	organization meets the "facts-and-circums"						▶ □
b	10%-facts-and-circumstances test—200		• •		•	ne 15 is 10% or	
	more, and if the organization meets the "fa	-					
	organization meets the "facts-and-circums			•	•		▶ □
18	Private foundation. If the organization did				_	nstructions	▶ [
						Schedule A /Form 99	

Schedule A (Form 990 or 990-EZ) 2008 The Peoria Players

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.)

Sec	tion A. Public Support						
Cal	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	40,994	27,103	19,460	16,167	25,762	129,486
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	207,153	199,294	232,153	242,602	201,864	1,083,066
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 1-5	248,147	226,397	251,613	258,769	227,626	1,212,552
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 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 Add lines 7a and 7b						
8	Public support (Subtract line 7c from	248,147	226,397	251,613	258,769	227,626	
	line 6)		A CHEST	12.19.1.18	(July 1988 1. 1. 1.	以"·"。"·"	1,212,552
Sec	tion B. Total Support						
Ca	lendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6	248,147	226,397	251,613	258,769	227,626	1,212,552
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	9,766	11,740	10,187	11,956	12,163	55,812
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	,					
С	Add lines 10a and 10b	9,766	11,740	10,187	11,956	12,163	55,812
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						·····
13	Total support. (Add lines 9, 10c, 11,	257,913	238,137	261,800	270,725	239,789	
	and 12)			7514	<u> </u>	or washing or	1,268,364
14	First five years. If the Form 990 is for the organization, check this box and stop here	•	second, third, fourt	h, or fifth tax year a	as a section 501(c)	(3)	▶ [
Sec	ction C. Computation of Public Su	pport Percenta	ige				
15	Public support percentage for 2008 (line 8,	column (f) divided	by line 13, column ((f))		15	95.5997 %
16	Public support percentage from 2007 Sche	dule A, Part IV-A, Ir	ne 27g			16	95 6833 %
Sec	ction D. Computation of Investmen	nt Income Perc	entage			· · · · · · · · · · · · · · · · · · ·	
17	Investment income percentage for 2008 (III			olumn (f))		17	4.4003 %
18	Investment income percentage from 2007					18	4.3167 %
19a	17 is not more than 33 1/3 %, check this be	ox and stop here. T	he organization qu	alifies as a publicly	supported organiz	ation	▶ [∑
ь	33 1/3 % support tests—2007. If the orga						_
20	line 18 is not more than 33 1/3 %, check the Private foundation. If the organization did						
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	e, orroom ting box a			

Part IV Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047

2008

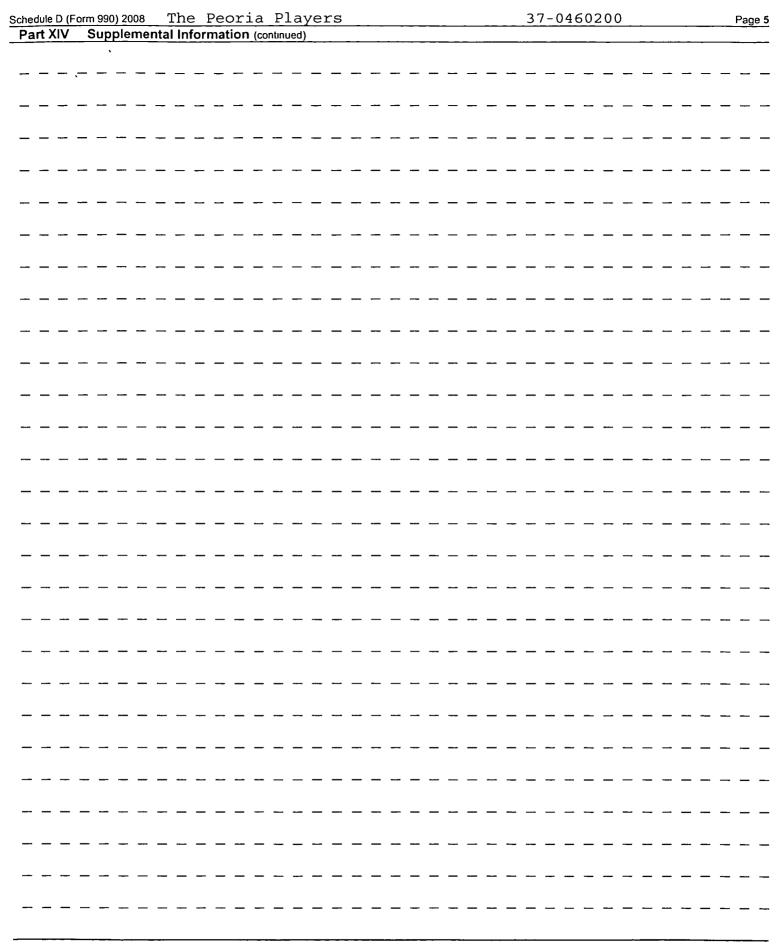
Open to Public

Inspection Name of the organization Employer identification number The Peoria Players 37-0460200 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990. Part IV. Part II Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space 2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year 🕨 _ _ _ _ _ Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service. provide the following amounts relating to these items. (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Sche	dule D (Form 990) 2008 The Peori	<u>a Players</u>			37-046	50200_			Pag	je 2
Pa	rt III Organizations Maintaining	Collections of Art,	Historical Treasu	ures, o	Other Sir	nilar Asse	ets (co	ntinu		
3	Using the organization's accession and other ritems (check all that apply)	records, check any of the	following that are a sig	inificant u	se of its colle	ction				
а	Public exhibition	d 🗍 Loar	n or exchange program	ns						
b	Scholarly research	e Othe								
c	Preservation for future generations						_			
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.									
5	During the year, did the organization solicit or assets to be sold to raise funds rather than to				ıılar		∏ Y€	<u>.</u> s	□ No	D.
Pa	rt IV Trust, Escrow and Custodi				answered	"Yes" to F				_
	Part IV, line 9, or reported a	_						-,		
1a	is the organization an agent, trustee, custodial				ot .					
	included on Form 990, Part X?				•		☐ Ye	15	□ No	0
h	If "Yes," explain the arrangement in Part XIV a	and complete the following	ı tahle:				_ ··			
_	roof oxplain the change months are the	complete and lone	,					mount		_
_	Beginning balance					1c	•		<u> </u>	_
C	Additions during the year					1d				_
<u>a</u>	· ·		•			 				_
e	Distributions during the year	•				1e				_
•	Ending balance					1f				_
	Did the organization include an amount on For	rm 990, Part X, line 21?					Y€	:S	∐ No	>
	If "Yes," explain the arrangement in Part XIV		1 (2)							
Pa	rt V Endowment Funds. Compl				<u>_</u>					
		(a) Current year	(b) Pnor year	(c) Two	years back	(d) Three year	s back	e) Four	years ba	ck
1a	Beginning of year balance		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 5 66	22 - 2 - 2	- "			A 560	<u></u>
b	Contributions .		ne state of the	ا این کرد. این کرد تا		لي الدورة المناه	S (3)	į, · ·	24% T	
С	Investment earnings or losses			THE STATES	新护王城走	15 4 17 4 Ta	1. 200	. 535	<u>ķās:</u>	49.1 3.463.44
d	Grants or scholarships				網線等的	Tanking .	, pr. :	ا او المعالم م	ا المستادة المستادة	
е	Other expenditures for facilities		And the second second	10 To	是是自己	建北洋			أريبي والمالية	i.
	and programs			200	1. 4. 110 12 13 15 15 15 15 15 15 15 15 15 15 15 15 15					-ئذ
f	Administrative expenses		13 C. 1846	1	3-478/22/13-43	10 m	1.5	٠	i negative e	
g	End of year balance		1,4,5		N. 1. 1. 1. 1.			. :		<u> </u>
2	Provide the estimated percentage of the year	end halance held as:		1	12.77					
a	Board designated or quasi-endowment	%								
h	Permanent endowment > %	"								
~	Term endowment ▶ %									
73	Are there endowment funds not in the possess	sion of the organization th	est are held and admini	stered fo	r tha					
Ja	organization by:	sion of the organization to	iat are nelo and admini	Stelled lo	uic			٢	Yes I	
	(i) unrelated organizations						í	2-(1)	res r	No
	=							3a(i)		
	(ii) related organizations							3a(ii)		
	If "Yes" to 3a(II), are the related organizations	•					Į.	3b		
<u> 4</u>				D = 4 V	11: 40	-				
Pa	ınt VI Investments—Land, Buildi						1			
	Description of investment	(a) Cost or other basis (investment)	(b) Cost or oth		(c) Depr	eciation	(0) Book	value	<u></u>
1a	Land				12.4	,	ļ			
b	Buildings						1			
c	Leasehold improvements						<u></u>			
đ	Equipment		251	,987	1	.76,037	<u>'</u>		75,9	50
_ е	Other .									
	I. Add lines 1a-1e. (Column (d) should equal Fo	orm 990, Part X, column (B), line 10(c))			•	1		75,9	50
					<u></u>					_

(a) Description of liability	(b) Amount
Federal income taxes	
Deferred income	25,185
Accrued wages	1,450
Accrued Federal Income Tax	158
eralincome taxes Deferred income Accrued wages Accrued Federal Income Tax Accrued State Income Tax	83
Total. (Column (b) should equal Form 990, Part X, col. (B) line 25)	26,876

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48



Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return.

OMB No 1545-0172

Name(s) shown on return

Name	s) shown on return The Peo	ria Player	c					fying n	umber 60200
	ess or activity to which this form relates	<u>lla Flayer</u>	5					046	0200
	ndirect Depreciati	on							
			why Under Coa	4: 1	70				
Pa	•	•	-			aamalata F	lard I		
_	Note: If you have a				eiore you	complete F	an i.	г	750 000
1	Maximum amount. See the instruction	J		ses				2	250,000
2	Total cost of section 179 property placed in service (see instructions) Threshold cost of section 179 property before reduction in limitation (see instructions)								000 000
3	·	•	•	struction	s)			3	800,000
4	Reduction in limitation Subtract line		· ·					4_	
5	Dollar limitation for tax year Subtract line		less, enter -0- If man				-	5	,
	(a) Description	of property		(b) Cost	(business use	only) (c) Elected cost		1000年100日 1000日 1000日
6									
									1、18.15.15.15.15.15.15.15.15.15.15.15.15.15.
7	Listed property Enter the amount from				į	7			一年一年十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二
8	Total elected cost of section 179 pro	•	ın column (c), lınes	6 and 7	•			8	
9	Tentative deduction Enter the small	ller of line 5 or line 8						9	
10	Carryover of disallowed deduction fr	rom line 13 of your 20	007 Form 4562					10	
11	Business income limitation Enter th	e smaller of business	income (not less t	han zer	o) or line 5 (s	ee instructions	s)	11	
12	Section 179 expense deduction Ad-	d lines 9 and 10, but	do not enter more t	than line	: 11			12	
13	Carryover of disallowed deduction to				▶	13			三十五十二十五十二十五十二十五十五十五十二十二十二十二十二十二十二十二十二十二十
	Do not use Part II or Part III below for	or listed property. Ins	tead, use Part V						
::Pá	ត្រីវ៉ាស្ទែ Special Depreciatio	on Allowance an	d Other Depre	ciatio	n (Do not	include list	ed proper	ty.) (See instructions.)
14	Special depreciation allowance for q	qualified property (oth	er than listed prope	erty) pla	ced in service	:			
	during the tax year (see instructions	s)						14	
15	Property subject to section 168(f)(1)) election						15	
16	Other depreciation (including ACRS	5)						16	
Pa	MACRS Depreciation	on (Do not inclu	de listed prope	rty.) (S	See instruc	ctions.)			
			Secti	on A					
17	MACRS deductions for assets place	ed in service in tax ye	ars beginning befo	re 2008		•		17	11,316
18	If you are electing to group any assets pla	aced in service during the	e tax year into one or	more ger	eral asset acco	unts, check here	. ▶ 🗍		Tally design the
	Section B—/	Assets Placed in Se	rvice During 2008	Tax Ye	ar Using the	General Dep	reciation Sy	stem	
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depre (business/investme only-see instruc	ent use	(d) Recovery period	(e) Conventio	n (f) Me	thod	(g) Depreciation deduction
19a	3-year property	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1							
b	5-year property	1 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1		170	5.0	HY	S/	'L	17
С	7-year property		36	,776	7.0	HY	S/	'L	2,627
d	10-year property								
e	15-year property								
f	20-year property	7-1-1-5							
g	25-year property	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			25 yrs.		S/L		
h	Residential rental				27 5 yrs	ММ	S/L		
	property			-	27 5 yrs	MM	S/L		
i	Nonresidential real				39 yrs	MM	S/L		
	property					ММ	S/L		
	Section C—As	ssets Placed in Serv	ice During 2008 T	ax Year	Using the A	Iternative De			1
20a	Class life	20 gen 20 gen			I		S/L		
	12-year	a take sa sa sa sa sa sa sa sa sa sa sa sa sa			12 yrs		S/L		
	40-year	7 77			40 yrs	ММ	S/L		
	rt IV Summary (See inst	tructions.)	 	-					<u> </u>
21	Listed property. Enter amount from		· · · · · · · · · · · · · · · · · · ·	_				21	
22	Total. Add amounts from line 12, lin		es 19 and 20 in col	umn (a)	and line 21				
_	Enter here and on the appropriate li	_				tr.		22	13,960
23	For assets shown above and placed			po.uti	1				15,300
	enter the portion of the basis attribu	-	•			23			

37-0460200

Federal Statements

Statement 1 - Form 990-T, Part I, Line 12 - Other Income

Description		Amount		
Program Acknowledgments	\$	2,135		
Total	\$	2,135		

Year Ended: June 30, 2009

37-0460200

The Peoria Players 4300 N. University St. Peoria, IL 61614

Electing out of the 50% Bonus Depreciation Allowance for All Eligible Depreciable Property

The taxpayer elects out of the 50% first-year bonus depreciation allowance under IRC Section 168(k) for all eligible asset classes of depreciable property acquired after December 31, 2007. This election applies to all eligible depreciable property placed in service after December 31, 2007.

Federal Statements 37-0460200 **Taxable Interest on Investments** Unrelated Business Code Exclusion Postal Amount Description Code Code 253 14 Interest 253 Total

	Fund	φ
	Management & General	\$ 2,426 2,361 1,239 1,239 768 83 7,035
ements	Part IX, Line 24f - All Other Expenses Total Program Expenses Service	\$ 3,380 237 226 828 828 828 828 828 828 828 828 828
Federal Statements	Form 990, Part IX, Line 24f	\$ 3,380 2,426 2,426 2,361 1,239 822 768 680 237 226 1000 1000 1000 15,317
37-0460200	Description	Awards expense Repairs and maintenance Repairs and maintenance Telephone Postage Miscellaneous Concession supplies Dues and subscriptions Photography Library expense Social expense Federal Income Tax Parking Security State Income Tax Total

orm 8868

Department of the Treasury

DAA

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

nternal Revenue	Service				
● If you are f	iling for an Automatic 3-Month Extension, complete o	nly Part I and check this box			▶ X
=	iling for an Additional (Not Automatic) 3-Month Exten	-	1).		_
Do not comple	ete Part II unless you have already been granted an aut	tomatic 3-month extension on a previously filed For	m 8868		
·Part I	Automatic 3-Month Extension of Time. O				
A corporation r	equired to file Form 990-T and requesting an automatic (6-month extension—check this box and complete			. \Box
Part I only					
All other corpo	rations (including 1120-C filers), partnerships, REMICs, a	and trusts must use Form 7004 to request an exten	sion of		
ime to file inco	me tax returns				
Flectronic Fili	ng (e-file). Generally, you can electronically file Form 88	368 if you want a 3-month automatic extension of til	ne to file		
	rns noted below (6 months for a corporation required to f	•			
	(1) you want the additional (not automatic) 3-month exte	•			
•	emposite or consolidated Form 990-T. Instead, you must			m	
	e details on the electronic filing of this form, visit www.irs.		-	•••	
				er identification nun	nhor
Type or	Name of Exempt Organization		Employ	er identification num	iibei
print	460200				
File by the due date for	460200				
filing your	Number, street, and room or suite no If a P.O. box, se	e instructions			
return See	4300 N. University St.				
instructions	City, town or post office, state, and ZIP code For a for				
	Peoria IL 61				
	return to be filed (file a separate application for each re			П	
X Form 99	}(orm 990-T (corporation)		Form 4720	
Form 99		orm 990-T (sec 401(a) or 408(a) trust)		Form 5227	
Form 99	Ħ	orm 990-T (trust other than above)		Form 6069	
☐ Form 99	0-PF L Fo	orm 1041-A		Form 8870	
If the orga If this is fo for the whole galist with the r I reques until for the o	names and EINs of all members the extension will cover. It an automatic 3-month (6 months for a corporation required $2/15/10$, to file the exempt organization return for reganization's return for: calendar year or tax year beginning $7/01/08$, and ending	the group, check this box and and ared to file Form 990-T) extension of time or the organization named above. The extension is	i this is attach		▶ □
	x year is for less than 12 months, check reason:		in account	ing period	
•	nonrefundable credits. See instructions.		3a	\$	
	oplication is for Form 990-PF or 990-T, enter any refunda	ble credits and estimated tax	1		
-	ts made. Include any prior year overpayment allowed as		3b	\$	
	Due. Subtract line 3b from line 3a. Include your payment		1. 7	7	
	with FTD coupon or, if required, by using EFTPS (Electro				
•	s. See instructions	ono i duciai rax i aymoni	3c	s	
	u are going to make an electronic fund withdrawal with th	us Form 8868, see Form 8453-FO and Form 9970		1 *	
for payment in		10 1 0m1 0000, see 1 0m1 0400-EO and 1 0m1 00/5-			
	ct and Paperwork Reduction Act Notice, see Instruct	lione		Form 8868 (Re	av 4 2000)
. U. I IIValy A	ot and raperwork neduction Act Notice, see instruct	ions.		i Jilli Juuu (Ri	~~ ~~ <u>~~</u> UU3)