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# **Return of Organization Exempt From Income Tax**

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

OMB No 1545-0047 2008

Depai Intern	rtment of the Tre hal Revenue Serv	easury rice	ļ	► The organization may have to use a	і сору (	of this return	to satisfy s	tate repor	tıng requiren	nents	Ot	pen to Pub	olic Insp	ectio
	For the 2008	calenda	ır year, o	or tax year beginning Sep 1		-	, 2008, ar	nd endi	ng Aug	31	•	, 2009		
	Check if applicab			C Name of organization						D Employ	yer Ide	ntification Nu	ımber	
	Address cha	I F	Please use IRS label	TBA Theatre, Inc.						77-	060	7918		
	Name chang	-	or print or type.	Number and street (or P O box if ma	all is no	t delivered to	street addr)	Room/	suite	E Teleph	one nu	mber		
	Initial return		See specific	PO Box 241104						(90	7)	677-75	29	
	Termination		Instruc- tions.	City, town or country			State Zi	P code +	4	,				
	Amended re		dons.	Anchorage			AK 9	9524		G Gross	receints	s 170	,008.	_
	Ħ		F Name :	and address of principal officer				3021	H(a) Is this	a group retu			Yes	Х
	Application	Poag		itchell PO Box 241104	nn al	horage	V K C	9524	H(b) Are all				Yes	Ħ
	Tax-exemp					4947(a)(1)		527	If 'No,'	attach a list	(see i	nstructions) <sup>1</sup>	_	_
<u> </u>						4347 (a)(1	<del>/                                    </del>	321	H(a) Craus	exemption n		<b>•</b>		
<u>J</u>	Website: ▶			heatre.org	<u></u>		], <sub>V</sub>	4 5	ation 200			f legal domici	1- 7 L	
K	Type of organi		Corpora	ation Trust Association	Other •		<b>L</b> rea	r or Forma	illon 200.	<u> </u>	State 0	i legal domici	ie AIX	
Pa		ummaı		to-le mission or most sign	uficon	t ootuutioo	Tho	atro	arts f	undame	ant s	l ckil	16	
		aescribe	e tne org	ganization's mission or most sign	mcan	it activities	, Tile	alle.	arts r	undanie	5116	1 - 2 K 1 1	:72 -	
<u>8</u>											<del>-</del>			
틸														
Ş	2 Chook	this box		If the organization discontinued					re than 25					
Activities & Governance	2 Check 3 Numbe			bers of the governing body (Part			i dishosei	u oi iiio	ie man 25	/6 UI 11.5 a	3	3		
≪ಶ	4 Numbe		_	t voting members of the governir		-	I. line 1b)				4	3		
Ęi	5 Total n		•	yees (Part V, line 2a)		, ,	,				5			
₩	6 Total n			eers (estimate if necessary)							6	50		
5ਕੋ ∣	<b>7a</b> Total g	ross unr	elated b	ousiness revenue from Part VIII,	iine 13	2, column	(C)				7 8	a		(
<u> </u>	<b>b</b> Net un	related b	ousiness	taxable income from Form 990-	T, line	e 34					7 t	b		
7									P	rior Year		Cur	rent Ye	ar
nses Revenue	8 Contrib	utions a	ınd gran	ts (Part VIII, line 1h)						23,0	075.		23,	93
<u> </u>	9 Program service revenue (Part VIII, line 2g)									132,	744.		146,	06
Revenue	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)													
ď	The Other revenue (Fart VIII, Column (A), lines 5, 66, 66, 96,						)				414.			
	12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) 15									157,	233.		170,	00
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)										185.			4
	14 Benefits paid to or for members (Part IX, column (A), line 4)													
_	15 Salarie	s, other	comper	nsation, employee benefits (Part	IX, co	olumn (A),	lines 5-1	0)		38,2	228.			(
Ses	16a Profess	sional fu	ındraisin	ig fees (Part IX, column (A), line	11e)									
Expenses				nses (Part IX, column (D), line 2				0.						
ΔĬ			•	• • • • • • • • • • • • • • • • • • • •	-	. ———		<u> </u>	-	110	E 0 0		150	12
		· · ·	-	X, column (A), lines 11a-11d, 11			053			116,			<u>159,</u>	
				nes 13-17 (must equal Part IX, c	olumr					154,			<u>159,</u>	
	19 Reveni	ue less e	expense	s Subtract line 18 from line 12		REC	CEIVE	D	<b></b>		240.		10,	
p 50						Γ			Begi	nning of \			d of Yea	
A B		ssets (F			329	MAN	11 17 00		Ĭ —	357,			358,	
Net Assets or Fund Balances				, line 26)	4 1	(Alyi	17 20	IU	် လ	310,			299,	
	<b>22</b> Net as:			ances Subtract line 21 from line	<u>20 l</u>				2	47,	327		59,	<u> 13</u> 2
Pa	rt II Si	ignatu	<u>re Blo</u>	ck	┷	OGE	I ME	17	~ <u> </u>					
	Under	penalties	of perjury,	I declare that I have examined this return, Declaration of preparer (other than office	includi	ng accompan	ying schedu	l <del>es and st</del>	tements, and	to the best	of my k	knowledge an	d belief, it	ıs
	true,	correct, and	a complete	Declaration of preparer (other than once	:) IS Da:	seu on an ini	ormation or v	willen biet	arei nas any					
Sig	ın  ►_	<i>b</i> : -	<i>3V6</i>	me proson						> -1	1-	2010		
He	re   🖫	ignature of	f officer	1011 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1. 1		1		Da	ate				
	•	<b>P.</b> SI	nane	e vintement in	18t	ic Dir	ector							
	7	ype or prin	t name an	d title			•							
						,	Date	е		heck if		Preparer's idi (see instruction	entifying n	umbe
Pai			. Λ	a V Malalua		-h	.			elf- mployed 🏲	- X	(***	,	
Pre		ture I	<b>-</b> M	ar warren	W	(V 1 -	04	/20/	10					
	rer's	name (or	MAR	K WOHLGEMUTH CPA			1	, <u> , .</u>						
Us	e ivours	if self-		Box 210948				<del></del>		IN ►				
On	ly emplo	ss, and				AK	99521	- N Q A Q			- (90	771 24	3-611	6
N 4	ZIP +	4		HORAGE	/=			0940	<u>  P</u>	hone no	(3)			N
				with the preparer shown above?										
BAA	A For Privac	y Act an	id Papei	rwork Reduction Act Notice, see	the s	separate ir	nstruction	ıs.		TEEA0101	1 04/2	23/09 Fo	orm <b>990</b>	j

<u>Forn</u>	m 990 (2008) · TBA Theatre, Inc.	77-C	60791	.8		Page 2
Pa	rt III : Statement of Program Service Accomplishments (see instructions)					
١ 1						
	Theatre arts fundamental skills					
	Did the organization undertake any significant program services during the year which were not listed or	on the prior				
	Form 990 or 990-EZ?	·		Yes	X	No
	If 'Yes,' describe these new services on Schedule O.					
3	Did the organization cease conducting, or make significant changes in how it conducts, any program s	ervices?		Yes	X	No
	If 'Yes,' describe these changes on Schedule O.					
	Describe the exempt purpose achievements for each of the organization's three largest program service and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants a expenses, and revenue, if any, for each program service reported.	es by expense and allocations	to othe	on 501 rs, the	(c)(3) total	
4:	a(Code)(Expenses \$158,570. including grants of \$0  Primary focus on using medium of theatre arts to provide an environment of learning fundamental skills for performers and technicians, in a fun/safe environment					
	<b>b</b> (Code) (Expenses \$including grants of \$	) (Dayanya	ċ			
41	b (Code) (Expenses \$ including grants of \$	_) (Nevenue	٧		_	—,
						- <b></b>
			<b></b>			<b>. –</b> – -
4	c (Code) (Expenses \$ including grants of \$	_) (Revenue	\$			)
			- <b></b>			<del>-</del>
			<b>-</b> -			
						. <b></b>
40	d Other program services. (Describe in Schedule O.)					
	(Expenses \$ including grants of \$ ) (Revenue				)	
4	e Total program service expenses ► \$ 158,570. (Must equal Part IX, Line 25, column	n (B) )				

**Checklist of Required Schedules** Part IV Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes.' complete 1 Schedule A 2 Х Is the organization required to complete Schedule B, Schedule of Contributors? 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 Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II 4 Х 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 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice 6 on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I Х 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 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D. Part III 8 X 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 9 x Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V 10 Х Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If 'Yes,' complete Schedule D, Parts VI, 11 X VII, VIII, IX, or X as applicable 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 Х 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E 14a Did the organization maintain an office, employees, or agents outside of the US? 14a Х **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 Х 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 Х 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 Х Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I 17 Х 17 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II 18 Х Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G. Part III 19 X 19 20 Х Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H 20 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 Х 21 22 22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III Х Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete 23 Х Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K. If 'No,'go to question 25 24a Х 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24c any tax-exempt bonds? 24d d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 25 a 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 X b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from 25b Х a prior year? If 'Yes,' complete Schedule L, Part I 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 X

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

Form 990 (2008) TBA Theatre, Inc.
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.			
i	a 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	<del>-</del>	<u>x</u>
ı	b Have a family member who had a direct or indirect business relationship with the organization? If 'Yes,' complete Schedule L, Part IV	28b		<u>x</u>
•	c 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		<u> </u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		<u>x</u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		<u> x</u>
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 Schedule N, Part II	32		х
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		X
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		х
BAA		Form	990 (	(2008)

	$\Box$	Yes	No
1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U S Information Returns Enter -0- if not applicable  1a 0			
<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	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  2a		-	_
2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
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 this return?	3a		х
<b>b</b> If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3ь		
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)?	4a		х
<b>b</b> If 'Yes,' enter the name of the foreign country: ▶	]		,
See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1</b> , Report of Foreign Bank 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>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
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?	5 c		
6a Did the organization solicit any contributions that were not tax deductible?	6a		Х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?	6Ь		
7 Organizations that may receive deductible contributions under section 170(c).	_		
a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7 a		Х
<b>b</b> If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		х
d If 'Yes,' indicate the number of Forms 8282 filed during the year			
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7</b> f		Х
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7 h		
8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	- 8		X
9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	9 a		Х
<b>b</b> Did the organization make any distribution to a donor, donor advisor, or related person?	9 b		Х
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12			
<b>b</b> Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11 Section 501(c)(12) organizations. Enter.			
a Gross income from other members or shareholders			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		L
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b	<u> </u>	000	(2000)
BAA	Form	990	(2008)

Form 990 (2008) TBA Theatre, Inc.

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

Sec	tion A.	Governing Body and Management				
	For each processes	'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, or changes in Schedule O See instructions.	describe the circumstances,		Yes	No
1 a	Enter the	number of voting members of the governing body	1a 3	╛		'
ı	<b>c</b> Enter the	number of voting members that are independent	1 <b>b</b>  3	4		'
2	Did any o officer, di	officer, director, trustee, or key employee have a family relationship or a business receiver, trustee or key employee?	elationship with any other	2	X	
3	Did the or of officers	rganization delegate control over management duties customarily performed by or us, directors or trustees, or key employees to a management company or other perso	inder the direct supervision on?	3		X
4		rganization make any significant changes to its organizational documents prior Form 990 was filed?		4		<u>X</u>
5		rganization become aware during the year of a material diversion of the organizatio	n's assets?	5		X
		organization have members or stockholders?		6		X
7	a Does the governing	organization have members, stockholders, or other persons who may elect one or $\mathfrak q$ body?	nore members of the	7a	х	
ı	Are any o	decisions of the governing body subject to approval by members, stockholders, or of	ther persons?	7b		X
8	Did the or the follow	rganization contemporaneously document the meetings held or written actions unde ring	rtaken during the year by			
	a The gove	rning body?		8a		Х
	-	nmittee with authority to act on behalf of the governing body?		8b	Х	
		organization have local chapters, branches, or affiliates?		9 a		X
ſ	o If 'Yes,' d and brand	loes the organization have written policies and procedures governing the activities of the ches to ensure their operations are consistent with those of the organization?	of such chapters, affiliates,	9ь		
	describe	py of the Form 990 provided to the organization's governing body before it was filed in Schedule O the process, if any, the organization uses to review the Form 990		10	<u>x</u>	
		iny officer, director or trustee, or key employee listed in Part VII, Section A, who cal ion's mailing address? <i>If 'Yes,' provide the names and addresses in Schedule O</i>	nnot be reached at the	11		<u>x</u>
Sec	tion B.	Policies				
12:	a Does the	organization have a written conflict of interest policy? If 'No,' go to line 13		12a	Yes	No X
		ers, directors or trustees, and key employees required to disclose annually interests	that could give rise			
	to conflic	ts?	and tour give nee	12b		
•	Does the Schedule	organization regularly and consistently monitor and enforce compliance with the position $\frac{1}{2}$ of how this is done	licy? If 'Yes,' describe in	12c		
		organization have a written whistleblower policy?	•	13		X
		organization have a written document retention and destruction policy?		14		X
		rocess for determining compensation of the following persons include a review and comparability data, and contemporaneous substantiation of the deliberation and de	approval by independent cision			
	-	nization's CEO, Executive Director, or top management official?		15a		
I		icers of key employees of the organization?		156	Х	
		the process in Schedule O. (see instructions)				!
16	a Did the o entity dur	rganization invest in, contribute assets to, or participate in a joint venture or similar ring the year?	arrangement with a taxable	16a		X
	in joint ve	ias the organization adopted a written policy or procedure requiring the organization enture arrangements under applicable federal tax law, and taken steps to safeguard th respect to such arrangements?	i to evaluate its participation the organization's exempt	16b		a sai
Sec	tion C.					
17		tates with which a copy of this Form 990 is required to be filed <ul> <li>Alaska</li> </ul>		<b>-</b>	- <b></b> -	
18	Section 6	5104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, an Indicate how you make these available. Check all that apply	and 990-T (501(c)(3)s only) av	aılable	for pu	iblic
		website Another's website Upon request				
	statemen	in Schedule O whether (and if so, how) the organization makes its governing docurets available to the public				ıal
		name, physical address, and telephone number of the person who possesses the b				0110
	- Andre	a Egger 13041 Norak Place, Anchorage	<u>AK _ 99516 (9</u>	907)_(	2//-	ATT0
2 / /				Form	990	(2008)

Page 7 Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Part VII

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

- 1 a 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) or 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 the organization did not	compens	ate an	y of	fice	r, dı	rector,	trus	stee, or key employee		<del> </del>		
(A)	(B)	(c)						(D)	(E)	(F)		
Name and Title	Average hours		tion (	_	k all t	hat app		Reportable	Reportable	Estimated amount of other		
	per week	adividi el trascee or director	institutional frustee	Offi-ei	Key employee	Hig) est conçuisated employee	Farnei	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations		
Shane Mitchell President	2.00			х				0.	0.	0.		
Erin Dagon Secretary	2.00			х				0.	0.	0.		
Wayne Mitchell Treasurer	2.00			х				0.	0.	0.		
										,		

Part VII   Section A. Officers, Directors, Trus	(B)	(Ey	<u> </u>		c)	сэ,	an	(D)	(E)	(F)
Name and Title	Average				•	hat a	pply)	Reportable compensation from	Reportable	Estimated
	hours per week	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee		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
	ļ					-				
	-									
	-									
	-									
								, ,		
1 b Total							•	0.	0	<del></del>
2 Total number of individuals (including those in 1a) worganization ►	ho rece	ived	mor	re th	an :	\$100	00,00	0 in reportable cor	mpensation from t	he
organization										Yes No
<ul> <li>3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in</li> <li>4 For any individual listed on line 1a, is the sum of repthe organization and related organizations greater th</li> </ul>	dıvıdual oortable	com	pen	satı	on a	and (	othe	r compensation from	om	3 X
ındıvıdual										4 X
5 Did any person listed on line 1a receive or accrue or rendered to the organization? If 'Yes,' complete Sch	edule J	for s	uch	per	son	1111 61	ateu			5 X
Section B. Independent Contractors  1 Complete this table for your five highest compensate	ed indep	ende	ent d	cont	ract	ors	that	received more that	n \$100,000 of	
compensation from the organization  (A)			-					(В	<u> </u>	(C)
Name and business addres	s _						·	Description	of Services	Compensation
			•	_						
2 Total number of independent contractors (including	those is	1) 11	tho:			1 m		han \$100 000 in		
compensation from the organization	uiose III	۷ را	,,,,,,	-	.,,,	a 1110	, <del>, , ,</del>			

[1 4	TVIII Statement of Nevende	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributions)  f All other contributions, gifts, grants, and similar amounts not included above q Noncash contribns included in lns 1a-1f  \$ 1,948.				
	h Total. Add lines 1a-1f	23,939.			
PROGRAM SERVICE REVENUE	Business Code  2a Workshops/Tuition 711110  b Tickets/Performances 711110  c d	59,510. 86,559.	59,510. 86,559.	0.	0.
AM S	e				
20G	f All other program service revenue	146,069.			
Δ.	<ul> <li>g Total. Add lines 2a-2f</li> <li>3 Investment income (including dividends, interest and other similar amounts)</li> <li>4 Income from investment of tax-exempt bond proceeds</li> <li>5 Royalties</li> </ul>	140,009.			
	(i) Real (ii) Personal  6a Gross Rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss)				
	7a Gross amount from sales of assets other than inventory  b Less cost or other basis and sales expenses c Gain or (loss)  d Net gain or (loss)				
OTHER REVENUE	8a Gross income from fundraising events (not including \$ 3,045.  of contributions reported on line 1c) See Part IV, line 18  b Less direct expenses  c Net income or (loss) from fundraising events				
	9a Gross income from gaming activities See Part IV, line 19  b Less direct expenses  c Net income or (loss) from gaming activities				
	10a Gross sales of inventory, less returns and allowances a b Less cost of goods sold c Net income or (loss) from sales of inventory			-	
	Miscellaneous Revenue  Business Code  11 a  b  c  d All other revenue				
	e Total. Add lines 11a-11d  12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c and 11e	170.008	146.069	0	0

Page 10

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).

Do i 6b.	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	( <b>B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1					·
2	0 t t tt v v v vtv v v tv v vdv v dv v d	44.	44.		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
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	0.	0.	0.	0.
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
ä	a Management				
ŀ	<b>)</b> Legal				· · · · · · · · · · · · · · · · · · ·
•	: Accounting .	600.	0.	600.	0.
	d Lobbying				
	Prof fundraising svcs. See Part IV, In 17				
1	Investment management fees				
Ģ	g Other .	35,110.	35,110.	0.	0.
	Advertising and promotion				
	Office expenses	13,561.	13,561.	0.	0.
	Information technology				
	Royalties	27.000	27.202		
	Occupancy	37,323.	37,323.	0.	0.
17 18	Travel Payments of travel or entertainment expenses for any federal, state, or local public officials	5,296.	5,296.	0.	0.
19	Conferences, conventions, and meetings				
20	Interest				
	Payments to affiliates				· -
	Depreciation, depletion, and amortization	8,891.	8,891.	0.	0.
23	Insurance	510.	510.	0.	0.
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				····
á	3 	0.	0.	0.	0.
ı	Advertising	3,295.	3,295.	0.	0.
•	Production Expenses	54,540.	54,540.	0.	0.
•	t	0.	0.	0.	0.
•		0.	0.	0.	0.
1	All other expenses				
	Total functional expenses. Add lines 1 through 24f	<u>159,170.</u>	158,570.	600.	0.
26	Joint Costs. Check here ► ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
- A					Form 990 (2008)

					(A) Beginning of year		(E End o	B) f year	
_	1	Cash - non-interest-bearing			24,520.	1		34,3	19.
	2	Savings and temporary cash investments			,	2			
	3	Pledges and grants receivable, net				3			
	4	Accounts receivable, net				4			
	5	Receivables from current and former officers, directors or other related parties. Complete Part II of Schedule	s, truste L	ees, key employees,		5			
	6	Receivables from other disqualified persons (as define	d unde	er section 4958(f)(1))					
		and persons described in section 4958(c)(3)(B) Comp	olete Pa	art II of Schedule L		6			
A S S E T S	7	Notes and loans receivable, net			1,567.	7		1,5	67.
Ē	8	Inventories for sale or use				8			
S	9	Prepaid expenses and deferred charges				9			
	10 a	Land, buildings, and equipment cost basis	10 a	346,765.					
	b	Less accumulated depreciation Complete Part VI of							
		Schedule D	10ь	24,080.	331,576.	10 c	3:	22,6	85.
	11	Investments - publicly-traded securities				11			
	12	Investments – other securities See Part IV, line 11				12			
	13	Investments – program-related See Part IV, line 11				13			
	14	Intangible assets		ľ		14			
	15	Other assets See Part IV, line 11				15			
	16	Total assets Add lines 1 through 15 (must equal line	34)		357,663.	16	3.	58,5	$\frac{-1}{71}$ .
	17	Accounts payable and accrued expenses			641.	17			
	18	Grants payable		ľ		18		_	
	19	Deferred revenue			19				
Ļ	20	Tax-exempt bond liabilities			20				
Å	21	Escrow account liability Complete Part IV of Schedule	D O	į		21			
LIABILIT	22	Payables to current and former officers, directors, trus highest compensated employees, and disqualified personal compensated employees.	tees. k	ey employees, Complete Part II					
Ţ		of Schedule L				22			
E S	23	Secured mortgages and notes payable to unrelated the	rd part	ies		23			
	24	Unsecured notes and loans payable			309,695.	24	2	99,4	39.
	25	Other liabilities Complete Part X of Schedule D				25			
	26	Total liabilities. Add lines 17 through 25			310,336.	26	2	99,4	39.
Ñ		Organizations that follow SFAS 117, check here ▶	ar	nd complete lines					
N E T		27 through 29 and lines 33 and 34.		ĺ		1			
Ą	27	Unrestricted net assets				27			
ASSE	28	Temporarily restricted net assets				28			
Ś	29	Permanently restricted net assets				29			
R		Organizations that do not follow SFAS 117, check he	re 🟲	X and complete					
E		lines 30 through 34.		_					_
FUXD	30	Capital stock or trust principal, or current funds				30			
Β	31	Paid-in or capital surplus, or land, building, and equip	ment fu	and		31			
BALAZCEの	32	Retained earnings, endowment, accumulated income,	or othe	er funds	47,327.	32	_	59,1	32.
Ñ	33	Total net assets or fund balances.			47,327.	33		59,1	32.
Š	34	Total liabilities and net assets/fund balances			357,663.	34		58,5	
Pa	rt X	Financial Statements and Reporting							
1	Ace	counting method used to prepare the Form 990:	Cash	Accrual	Other			Yes	No
2	a We	ere the organization's financial statements compiled or r	eviewe	d by an independent ac	countant?		2a		X
	<b>b</b> We	ere the organization's financial statements audited by ar	ındep	endent accountant?			2b		Х
		Yes' to 2a or 2b, does the organization have a committed in the committed in the compilation of its financial statements and select the compilation of its financial statements.					2c		
3	a As	a result of a federal award, was the organization requir dit Act and OMB Circular A-133?	ed to u	indergo an audit or audi	its as set forth in the Si	ngle	3a		х
		on Act and Olvib Circular A-155?  Yes,' did the organization undergo the required audit or	audite:	,			3b	-+	Λ_
RΔ		res, and the organization undergo the required about or	auuits		<del></del>			990 (2	2000

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

Department of the Treasury Internal Revenue Service **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

Schedule A (Form 990 or 990-EZ) 2008

Employer identification number Name of the organization 77-0607918 TBA Theatre, Inc. 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 (Please check only one organization) 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.) A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H) 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii) Enter the hospital's An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 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) 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 9 X 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). (see instructions) An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h 11 Type III- Other Type II Type III - Functionally integrated a | Type I By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? a Yes No a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) (i) below, the governing body of the supported organization 11 g (i) 11 g (ii) a family member of a person described in (i) above? (iii) a 35% controlled entity of a person described in (i) or (ii) above? 11 g (iii) Provide the following information about the organizations the organization supports (iii) Type of organization (described on lines 1-9 above or IRC section (v) Did you notify the organization in col (i) of (vi) is the organization in col (i) organized in the US? (i) Name of Supported Organization (vii) Amount of Support (ii) EIN (iv) Is the organization in col (i) listed in your your support? (see instructions)) governing document? Yes Yes No Yes No Total

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

<u>'Par</u>	(Complete only if you checke	•			(ס), ו א(ויי) an	ia 170(b)(1	<u>,,,,,</u> ,,	′') 	
Sec	tion A. Public Support					<b></b>			
Cale begi	ndar year (or fiscal year nning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008		(f) Tota	al
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants')								
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf								
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public 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								
Sec	tion B. Total Support	T		Υ		<b>,</b>			
Cale begi	ndar year (or fiscal year nning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008		(f) Tota	al
7	Amounts from line 4								
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources								
9	Net income form unrelated business activities, whether or not the business is regularly carried on								
10	Other income Do not include gain or loss form the sale of capital assets (Explain in Part IV)								
11	Total support. Add lines 7 through 10							_	
12	Gross receipts from related activ	ities, etc (see ins	tructions)			L	12		
13	First five years. If the Form 990 organization, check this box and		ition's first, secor	nd, third, fourth, o	r fifth tax year as a	a section 501	(c)(3)		<u>►</u> ∏
	tion C. Computation of Pu								
14	Public support percentage for 20			e 11, column (f)		_	14		%_
15	Public support percentage for 20	07 Schedule A, Pa	art IV-A, line 26f			L	15		%_
16 a	33-1/3 support test – 2008. If the and stop here. The organization	e organization did qualifies as a pub	not check the bo licly supported or	x on line 13, and ganization	the line 14 is 33-1	/3 % or more	, checł	k this box	<b>►</b> □
ŀ	33-1/3 support test - 2007. If the and stop here. The organization	e organization did qualifies as a pub	not check a box licly supported or	on line 13, or 16a, ganization	and line 15 is 33-	1/3% or more	e, chec	k this box	► 🗌
17 a	10%-facts-and-circumstances to or more, and if the organization in the organization meets the 'facts	meets the 'facts-a	nd-circumstances	s' test, check this t	oox and stop here.	. Explaın ın P	art IV I	)% how	► 🗌
ŀ	o 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-and	meets the 'facts-a	nd-circumstances	s' test, check this b	oox and stop here	. Explain in P	art IV I	is 10% how the	► □
18	Private foundation. If the organiz	zation did not che	ck a box on line,	13, 16a, 16b, 17a,					<b>&gt;</b>
BAA					S	chedule A (Fo	rm 99	0 or 990-EZ	2008

# Schedule'A (Form 990 or 990-EZ) 2008 TBA Theatre, Inc. Part III Support Schedule for Organizations Described in Section 509(a)(2)

	(Complete only if you chec	ked the box on line	e 9 of Part I)					
Sec	tion A. Public Support							
Cale	ndar year (or fiscal yr beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	8	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants ')	2,301.	2,514.	27 <b>,</b> 957.				32,772.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose	21,577.	20,513.	119,557.				161,647.
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							
_	Total. Add lines 1-5 Amounts included on lines 1, 2, 3 received from disqualified persons	23,878.	23,027.	147,514.				194,419.
t	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						1	
	7c from line 6)							194,419.
Sec	tion B. Total Support	<del></del>				<u> </u>		<u> </u>
	ndar year (or fiscal yr beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	8 1	(f) Total
	Amounts from line 6	23,878.	23,027.	147,514.	(4) 2001	1		194,419.
-	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	23,070.	23,021.	111/3111				131,113.
c	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b,							
12	whether or not the business is regularly carried on Other income. Do not include							
	gain or loss from the sale of capital assets (Explain in Part IV.)							104 410
13 14	Total support. (add Ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and	Is for the organizat stop here	tion's first, second	l, third, fourth, or	fifth tax year as	l a section 501	(c)(3)	194,419. ►
Sec	tion C. Computation of Pu		ercentage					
	Public support percentage for 20			13, column (f))			15	100.00%
	Public support percentage from 2	- · · · · · · · · · · · · · · · · · · ·					16	100.00%
	tion D. Computation of Inv				·	<u>.</u>		
	Investment income percentage for				າ (f))		17	%
18	Investment income percentage fr				· \//	ŀ	18	
	33-1/3 support tests – 2008. If the more than 33-1/3%, check this b	he organization did	not check the box	x on line 14, and	line 15 is more thicly supported or	ا han 33-1/3% ganization		
t	33-1/3 support tests – 2007. If the is not more than 33-1/3%, check	he organization did	I not check a box of	on line 14 or 19a.	and line 16 is mo	ore than 33-1	/3%, a	
20	Private foundation. If the organiz	zation did not chec	k a box on line 14	, 19a, or 19b, che	ck this box and s	see instructio	ns _	▶ [

Schedule 'A	(Form	990 or 9	90-EZ	2008	TE	3A	Thea	atre	e,	Inc	٠.							77.	-060	7918	3	F	Page 4
Schedule A	<b>Supp</b> Part	lemen II, line	tal In	forma	tion ; or	. Co Par	mple t III,	ete t line	this 12	par . Pr	t to ovide	prov e an	ide y oth	the ner	explana addition	atıor nalı	n requ	uired	by P า. (se	art II	, line struction	10; ons)	
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## SCHEDULE D (Form 990)

# **Supplemental Financial Statements**

OMB No 1545-0047

2008

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

vame	of the organization		Employer Identification flumber
TB/	A Theatre, Inc.		77-0607918
Pai	rt I Organizations Maintaining Dono	r Advised Funds or Other Similar Fu	inds or Accounts Complete if
	the organization answered 'Yes' t	o Form 990, Part IV, line 6.	·
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and don	or advisors in writing that the assets held in de	onor advised
_	funds are the organization's property, subject to		∐ Yes ∐ No
6	Did the organization inform all grantees, donor used only for charitable purposes and not for timpermissible private benefit?	he benefit of the donor or donor advisor or oth	us may be ler Yes No
Pai	rt II Conservation Easements Compl	ete if the organization answered 'Yes	
	Purpose(s) of conservation easements held by		- to 1 of 11 of 50, 1 dic 10, 11 of 5
•	Preservation of land for public use (e.g., re		n of an historically important land area
	Protection of natural habitat		n of certified historic structure
	Preservation of open space	reservation	Tor contined matoric structure
2	Complete lines 2a-2d if the organization held a	a qualified conservation contribution in the form	n of a conservation easement on the last day
2	of the tax year	qualified conservation contribution in the form	n or a conservation casement on the last day
			Held at the End of the Year
á	a Total number of conservation easements		2a
ı	b Total acreage restricted by conservation easer	nents	2b
	Number of conservation easements on a certif		2c
	d Number of conservation easements included in	n (c) acquired after 8/17/06	2 d
3	Number of conservation easements modified,	transferred, released, extinguished, or termina	ted by the organization during the taxable
	year ►		
4	Number of states where property subject to co	nservation easement is located >	<u> </u>
5	Does the organization have a written policy re- enforcement of the conservation easement it be	garding the periodic monitoring, inspection, vicolds?	plations, and Yes No
6	Staff or volunteer hours devoted to monitoring	•	<del>-</del>
7	Amount of expenses incurred in monitoring, in		
8	170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?		∐ Yes ∐ No
9	In Part XIV, describe how the organization rep include, if applicable, the text of the footnote to conservation easements.	orts conservation easements in its revenue and the organization's financial statements that constants.	nd expense statement, and balance sheet, and describes the organization's accounting for
Pa	organizations Maintaining Collectory Complete if the organization ans	ections of Art, Historical Treasures, owered 'Yes' to Form 990, Part IV, lin	or Other Similar Assets e 8.
1:	a If the organization elected, as permitted under treasures, or other similar assets held for publ the text of the footnote to its financial statemen	ic exhibition, education, or research in furthera	ent and balance sheet works of art, historical ance of public service, provide, in Part XIV,
ı	b If the organization elected, as permitted under treasures, or other similar assets held for publ amounts relating to these items:	ic exhibition, education, or research in furthera	ance of public service, provide the following
	(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 a amounts required to be reported under SFAS	t, historical treasures, or other similar assets 16 relating to these items:	
:	a Revenues included in Form 990, Part VIII, line	1	►\$ ►\$
ı	b Assets included in Form 990, Part X		<b>▶</b> \$

Schedule'D (Form 990) 2008 TBA	Theatre, Inc.		· · · · · · · · · · · · · · · · · · ·	77-060			Page 2
Part III Organizations Mainta	ining Collections	s of Art, Histor	<u>rical Treasures, or</u>	Other Similar Ass	ets (co	ntınu	ed)
Using the organization's accession that apply)	n and other records,	check any of the f	following that are a sign	nificant use of its collect	ion item	s (ched	k all
a Public exhibition		<b>d</b> Loan or	exchange programs				
<b>b</b> Scholarly research		e 🔲 Other					
<b>c</b> Preservation for future gener	ations						
4 Provide a description of the organ Part XIV		·			ın		
5 During the year, did the organiza assets to be sold to raise funds r.	ather than to <u>be mair</u>	itained as part of t	he organization's collec	ction?	Yes		No
Part IV Trust, Escrow and Cu IV, line 9, or reported	istodial Arrangei an amount on Fo	ments Comple orm 990, Part	te if organization a X, line 21.	answered 'Yes' to F	orm 99	90, Pa 	art 
1 a Is the organization an agent, trus included on Form 990, Part X?	tee, custodian, or oth	er intermediary fo	r contributions or other	assets not	Yes		No
<b>b</b> If 'Yes,' explain the arrangement	in Part XIV and comp	olete the following	table:				
					Amount		
c Beginning balance				1 c			
<b>d</b> Additions during the year				1 d			
e Distributions during the year				1 e			
f Ending balance				1f]	_		
2a Did the organization include an a	mount on Form 990,	Part X, line 21?			Yes	L	_ No
<b>b</b> If 'Yes,' explain the arrangement		<del></del>		0.00 10/1			
Part V Endowment Funds Co					1		
	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) F	our year	s back
1 a Beginning of year balance					-		
<b>b</b> Contributions					-		
c Investment earnings or losses							
<b>d</b> Grants or scholarships					ļ		
<ul> <li>Other expenditures for facilities and programs</li> </ul>							
f Administrative expenses					<del> </del>		
<b>g</b> End of year balance		<u> </u>			l		
2 Provide the estimated percentage	e of the year end bala	ance held as:					
a Board designated or quasi-endow	/ment ►	<del></del> %					
<b>b</b> Permanent endowment ►	8						
c Term endowment ►	<del>8</del>						
3a Are there endowment funds not a organization by:	n the possession of the	ne organization tha	at are held and adminis	tered for the		Yes	No
(i) unrelated organizations					3a(i)		
(ii) related organizations					3a(ii)		
b If 'Yes' to 3a(II), are the related of	rganizations listed as	required on Sche	dule R?		3b		
4 Describe in Part XIV the intended	uses of the organiza	ation's endowment	funds				
Part VI Investments-Land, E	Buildings, and Ed	uipment. See	Form 990, Part X,	line 10.			
Description of investment		st or other basis nvestment)	(b) Cost or other basis (other)	(c) Depreciation	( <b>d</b> ) B	ook Va	alue
<b>1a</b> Land .							
<b>b</b> Buildings			346,765.	24,080.		322	,685.
c Leasehold improvements							
<b>d</b> Equipment							
e Other							
Total. Add lines 1a-1e (Column (d) sho	ould equal Form 990,	Part X, column (B	3), line 10(c) )	•			<u>,685.</u>
DAA				Cohoo	tulo D /E	orm QC	2008

Schedule **D** (Form 990) 2008

Part VII	Investments—Other Securities See	Form 990, Part X, Iir	ne 12	
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valua Cost or end-of-year mark	tion ket value
Financial of	derivatives and other financial products			· · · · · · · · · · · · · · · · · · ·
	eld equity interests			
Total. (Colu	ımn (b) should equal Form 990 Part X, col (B) line 12.)			
Part VII	I Investments-Program Related (Se	e Form 990, Part X, I	ine 13)	
	(a) Description of investment type	(b) Book value	(c) Method of valua	tion
			Cost or end-of-year mark	ket value
				·
				-
				<del></del>
			,	
	nn (b)(should equal Form 990, Part X, Col (B) line 13)	<u> </u>		
Part IX	Other Assets (See Form 990, Part			
	(a)	Description		(b) Book value
	<del></del>			
<del></del>				-
			<del></del>	
				<del></del>
		<del></del>		
				l
	umn (b) Total (should equal Form 990, Part X,		<u>.</u>	<u> </u>
Part X	Other Liabilities (See Form 990, Pa			
	(a) Description of Liability	(b) Amount	—	
Federal In	come Taxes			
			—	
			—	
<del>-</del> ,	(1) Table 11 15 000 5 17 1501 05			
	nn (b) Total (should equal Form 990, Part X, col (B) line 25)			
In Part XI'	V, provide the text of the footnote to the organi: under FIN 48	zation's financial statement	is that reports the organization's liability	tor uncertain tax

Schedule D (Form 990) 2008 TBA Theatre, Inc.

77-0607918

Page 3

•	e Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investments expenses not included on Form 990, Part VIII, line 7b		
	Other (Describe in Part XIV)		
_	c Add lines 4a and 4b	4c	
	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)  **T XIII   Reconciliation of Expenses per Audited Financial Statements With Expenses	<u> </u>	
1	Total expenses and losses per audited financial statements	1	
	Amounts included on line 1 but not on Form 990, Part IX, line 25		
	a Donated services and use of facilities 2a		
ь	Prior year adjustments 2b		
c	Losses reported on Form 990, Part IX, line 25		
d	d Other (Describe in Part XIV)		
е	e Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
_	a Investments expenses not included on Form 990, Part VIII, line 7b		
	Other (Describe in Part XIV)		
	c Add lines <b>4a</b> and <b>4b</b> Total expenses Add lines <b>3</b> and <b>4c</b> (This should equal Form 990, Part I, line 18)	4c	
	rt XIV Supplemental Information	1 3 1	
	aplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part II, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b		
BAA	TEEA3304 12/23/08	Schedule <b>D</b> (Form	990) 2008

Schedule'D	(Form 990) 2008 TBA Theatre, Inc. Supplemental Information (continued)	77-0607918	Page <b>5</b>
Part XIV	Supplemental Information (continued)		
		<b></b>	
		Schedule <b>D</b> (Forn	- 000\ 0000
BAA	TEEA3305 07/24/08	Scriedule <b>D</b> (FOrn	11 22U) 4UUO

Name(s) shown on return

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

2008

Attachment Sequence No 67

ldentifying number

77-0607918 TBA Theatre, Inc. Business or activity to which this form relates / Form 990EZ Form 990 Election To Expense Certain Property Under Section 179 Part I Note: If you have any listed property, complete Part V before you complete Part I 1 \$250,000 Maximum amount. See the instructions for a higher limit for certain businesses 1 2 Total cost of section 179 property placed in service (see instructions) 3 \$800,000. Threshold cost of section 179 property before reduction in limitation (see instructions) 3 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0-. If married filing separately, see instructions 5 (b) Cost (business use only) (C) Elected cost 6 (a) Description of property 7 Listed property Enter the amount from line 29 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction Enter the smaller of line 5 or line 8 Carryover of disallowed deduction from line 13 of your 2007 Form 4562 10 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs) 11 12 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 Carryover of disallowed deduction to 2009. Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property ) (See instructions ) |Part II Special depreciation allowance for qualified property (other than listed property) placed in service during the 14 tax year (see instructions) 15 Property subject to section 168(f)(1) election 16 Other depreciation (including ACRS) MACRS Depreciation (Do not include listed property ) (See instructions) Section A 8,891 MACRS deductions for assets placed in service in tax years beginning before 2008 17 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2008 Tax Year Using the General Depreciation System (C) Basis for depreciation (a) (b) Month and (d) (e) (g) Depreciation (business/investment use Convention year placed in service deduction Classification of property Recovery period only - see instructions) 19a 3-year property **b** 5-year property c 7-year property d 10-year property e 15-year property f 20-year property S/L 25 yrs g 25-year property 27.5 yrs MM S/L h Residential rental property MM S/L 27.5 yrs MM S/L i Nonresidential real 39 yrs property S/L MM Section C - Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System S/L 20 a Class life S/L 12 vrs b 12-year S/L MM c 40-year 40 yrs Part IV Summary (See instructions) 21 Listed property Enter amount from line 28 Total Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on 22 8,891. the appropriate lines of your return Partnerships and S corporations — see instructions For assets shown above and placed in service during the current year, enter

Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement ) **Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable. Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles) No 24b If 'Yes,' is the evidence written? 24 a Do you have evidence to support the business/investment use claimed? Yes Yes No (i) (h) Elected section 179 cost Basis for depreciation (business/investment Type of property (list vehicles first) Cost or Recovery Method/ Depreciation deduction Date placed investment in service other basis period Convention HSA use only) percentage Special depreciation allowance for qualified listed property placed in service during the tax year and 25 25 used more than 50% in a qualified business use (see instructions) Property used more than 50% in a qualified business use 27 Property used 50% or less in a qualified business use Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 28 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other 'more than 5% owner,' or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles (a) (b) (c) **(f)** 30 Total business/investment miles driven Vehicle 4 Vehicle 2 Vehicle 3 Vehicle 5 Vehicle 6 Vehicle 1 during the year (do not include commuting miles) 31 Total commuting miles driven during the year Total other personal (noncommuting) miles driven Total miles driven during the year Add lines 30 through 32 Yes Yes No Yes No Yes No Yes No Yes No No Was the vehicle available for personal use during off-duty hours? Was the vehicle used primarily by a more 35 than 5% owner or related person Is another vehicle available for 36 personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions). No Yes Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, 37 by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners Do you treat all use of vehicles by employees as personal use? Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? Do you meet the requirements concerning qualified automobile demonstration use? (See instructions) Note: If your answer to 37, 38, 39, 40, or 41 is 'Yes,' do not complete Section B for the covered vehicles Part VI Amortization (b) (c) (d) (e) **(f)** (a) amortization begins Amortizable amount Amortization Description of costs Code Amortization for this year period or percentage 42 Amortization of costs that begins during your 2008 tax year (see instructions) 43 Amortization of costs that began before your 2008 tax year 43

44

Total. Add amounts in column (f) See the instructions for where to report