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Form 990  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)	OMB No 1545-0047
	The organization may have to use a copy of this return to satisfy state reporting requirements	2011 Open to Public Inspection

A For the 2011 calendar year, or tax year beginning 01-01-2011 and ending 12-31-2011		D Employer identification number 95-1543396	
B Check if applicable ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending	C Name of organization OLD GLOBE THEATRE		E Telephone number (619) 231-1941
	Doing Business As THE OLD GLOBE		G Gross receipts \$ 22,988,719
	Number and street (or P O box if mail is not delivered to street address) PO BOX 122171	Room/suite	
	City or town, state or country, and ZIP + 4 SAN DIEGO, CA 921122171		
	F Name and address of principal officer MICHAEL G MURPHY PO BOX 122171 SAN DIEGO, CA 921122171		H(a) Is this a group return for affiliates? ☐ Yes ☒ No
I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () ◀ (insert no) ☐ 4947(a)(1) or ☐ 527		H(b) Are all affiliates included? ☐ Yes ☐ No If "No," attach a list (see instructions)	
J Website: ▶ WWW.THEOLDGLOBE.ORG		H(c) Group exemption number ▶	
K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶		L Year of formation 1937	M State of legal domicile CA

Part I		Summary	
Activities & Governance	1 Briefly describe the organization's mission or most significant activities THE TONY AWARD-WINNING OLD GLOBE IS THE SIXTH LARGEST REGIONAL THEATRE IN THE COUNTRY AND SAN DIEGO'S FLAGSHIP ARTS INSTITUTION FOR THE PAST 77 YEARS. THE OLD GLOBE PRODUCES A YEAR-ROUND SEASON OF 15 OR MORE PLAYS AND MUSICALS, INCLUDING WORLD PREMIERES, MODERN CLASSICS, NEW MUSICALS, BROADWAY-BOUND PRODUCTIONS, AND THE HIGHLY-REGARDED SUMMER SHAKESPEARE FESTIVAL, AVERAGING MORE THAN 630 PERFORMANCES AND NEARLY 250,000 ANNUAL ADMISSIONS. EDUCATION AND OUTREACH PROGRAMS THROUGHOUT SAN DIEGO COUNTY, INCLUDING LITERACY INITIATIVES, FREE STUDENT MATINEES, PRE-PERFORMANCE WORKSHOPS, AND A HIGH SCHOOL SUMMER SHAKESPEARE INTENSIVE, REACH UP TO 50,000 CHILDREN AND ADULTS EACH YEAR. THE OLD GLOBE/UNIVERSITY OF SAN DIEGO PROFESSIONAL ACTOR TRAINING PROGRAM IS AN INTENSIVE, TWO-YEAR COURSE OF STUDY IN CLASSICAL THEATRE, LEADING TO THE MFA DEGREE. THE OLD GLOBE IS AT THE FOREFRONT OF THE NATION'S LEADING PERFORMING ARTS ORGANIZATIONS, SETTING A STANDARD FOR EXCELLENCE IN AMERICAN THEATRE.		
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	47
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	45
	5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	670
6 Total number of volunteers (estimate if necessary)	6	1,151	
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	399,786	
b Net unrelated business taxable income from Form 990-T, line 34	7b	398,948	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	7,155,021	6,890,952
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	12,822,773	12,873,047
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	52,073	74,803
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	40,921	541,965
		20,070,788	20,380,767
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	75,950	73,300
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	11,897,320	12,449,584
	16a Professional fundraising fees (Part IX, column (A), line 11e)	8,684	21,654
	b Total fundraising expenses (Part IX, column (D), line 25) 1,237,817		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	9,505,530	9,656,903
	18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	21,487,484	22,201,441
	19 Revenue less expenses. Subtract line 18 from line 12	-1,416,696	-1,820,674
Net Assets or Fund Balances		Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	58,293,508	56,106,627
	21 Total liabilities (Part X, line 26)	9,955,154	9,798,758
	22 Net assets or fund balances. Subtract line 21 from line 20	48,338,354	46,307,869

Part II		Signature Block	
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.			
Sign Here	***** Signature of officer		2012-11-08 Date
	MICHAEL G MURPHY MANAGING DIRECTOR/PRESIDENT Type or print name and title		
Paid Preparer's Use Only	Preparer's signature	PATRICIA J MAYER	Date
	Check if self-employed	☒	Preparer's taxpayer identification number (see instructions) P00188643
	Firm's name (or yours if self-employed), address, and ZIP + 4	MOSS ADAMS LLP 9665 GRANITE RIDGE DRIVE SUITE 600 SAN DIEGO, CA 92123	
	EIN	91-0189318	Phone no (858) 627-1400
May the IRS discuss this return with the preparer shown above? (see instructions)			☒ Yes ☐ No

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

THE MISSION OF THE OLD GLOBE IS TO PRESERVE, STRENGTHEN AND ADVANCE AMERICAN THEATRE BY CREATING THEATRICAL EXPERIENCES OF THE HIGHEST PROFESSIONAL STANDARDS, PRODUCING AND PRESENTING WORKS OF EXCEPTIONAL MERIT, DESIGNED TO REACH CURRENT AND FUTURE AUDIENCES, ENSURING DIVERSITY AND BALANCE IN PROGRAMMING, PROVIDING AN ENVIRONMENT FOR THE GROWTH AND EDUCATION OF THEATRE PROFESSIONALS, AUDIENCES AND THE COMMUNITY AT LARGE

If "Yes," describe these new services on Schedule O

If "Yes," describe these changes on Schedule O

4a	(Code)	(Expenses \$ 17,304,654 including grants of \$)	(Revenue \$ 12,836,634)
	THE OLD GLOBE PRODUCES 15 OR MORE PRODUCTIONS YEAR-ROUND, INCLUDING WORLD PREMIERES, MODERN CLASSICS, NEW MUSICALS, BROADWAY-BOUND PRODUCTIONS WITH A CENTERPIECE OF AN OUTDOOR SUMMER SHAKESPEARE FESTIVAL OF THREE CLASSICS PERFORMED IN ROTATING REPERTORY BY A 25-MEMBER ACTING COMPANY. THE GLOBE USES 3 PERFORMING SPACES WITH CAPACITIES OF 600/600/250, AND PLAYED 673 PUBLIC PERFORMANCES IN 2011 TO AN AUDIENCE OF 247,390, INCLUDING 224,417 PAID TICKETS AND 22,973 FREE ADMISSIONS, PRIMARILY DISTRIBUTED THROUGH SCHOOLS AND NONPROFIT ORGANIZATIONS. THE OLD GLOBE IS AT THE FOREFRONT OF THE NATION'S LEADING PERFORMING ARTS ORGANIZATIONS, SETTING A STANDARD FOR EXCELLENCE IN AMERICAN THEATER.		

4b	(Code)	(Expenses \$ 624,761	including grants of \$ 73,300)	(Revenue \$ 36,413)
EDUCATION PROGRAMS ARE OFFERED YEAR-ROUND THROUGHOUT SAN DIEGO COUNTY. PROGRAMS INCLUDE LITERACY INITIATIVES, FREE STUDENT MATINEES, PRE-PERFORMANCE WORKSHOPS, A HIGH SCHOOL SUMMER SHAKESPEARE INTENSIVE, A MIDDLE SCHOOL CONSERVATORY, PROFESSIONAL DEVELOPMENT FOR TEACHERS AND TEACHING ARTISTS, AND LIFE-LONG LEARNING PROGRAMS SUCH AS INSIGHT SEMINARS, SUMMER SHAKESPEARE IN THE GARDEN, THE SPEAKER'S BUREAU, BEHIND-THE-SCENES TOURS, AND FREE PUBLIC EVENTS. IN 2011, THESE PROGRAMS DIRECTLY SERVED 18,851 STUDENTS AND ADULTS. THE OLD GLOBE/UNIVERSITY OF SAN DIEGO PROFESSIONAL ACTOR TRAINING PROGRAM IS AN INTENSIVE, TWO-YEAR COURSE OF STUDY IN CLASSICAL THEATRE, LEADING TO THE MASTER OF FINE ARTS DEGREE.				

[illegible]

4e	Total program service expenses	\$ 17,929,415
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Part IV

Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A.</i>	1	Yes
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	2	Yes
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I.</i>	3	No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II.</i>	4	No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III.</i>	5	No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I.</i>	6	No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II.</i>	7	No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i>	8	No
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? <i>If "Yes," complete Schedule D, Part IV.</i>	9	No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V.</i>	10	Yes
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>	11a	Yes
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i>	11b	No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i>	11c	No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i>	11d	No
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i>	11e	No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X.</i>	11f	Yes
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i>	12a	No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.</i>	12b	Yes
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i>	13	No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Part I.</i>	14b	No
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 U S ? <i>If "Yes," complete Schedule F, Part II and IV.</i>	15	No
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 U S ? <i>If "Yes," complete Schedule F, Part III and IV.</i>	16	No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i>	17	Yes
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II.</i>	18	Yes
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i>	19	No
20a	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H.</i>	20a	No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b	

Part IV

Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax Compliance					
Check if Schedule O contains a response to any question in this Part V ☐					
		Yes	No		
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. .	1a	268		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes		
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return. .	2a	670		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2b	Yes		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes		
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	3b	Yes		
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 or securities account)?	4a			No
b	If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a			No
b	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).				
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			No
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8			
9	Sponsoring organizations maintaining donor advised funds.				
a	Did the organization make any taxable distributions under section 4966?	9a			
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b			
10	Section 501(c)(7) organizations. Enter				
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b			
11	Section 501(c)(12) organizations. Enter				
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 amounts due or received from them).	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
a	Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state.	13a			
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b			
c	Enter the aggregate amount of reserves on hand.	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b			

Part VI

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.
Check if Schedule O contains a response to any question in this Part VI ☒

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
1a	47		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	45
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	Yes
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a	The governing body?	8a	Yes
b	Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

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

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

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed ☒ CA
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 made these available. Check all that apply. ☒ Own website ☒ Another's website ☒ Upon request
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization. ☒ MARK SOMERS DIRECTOR OF FINANCE 1363 OLD GLOBE WAY SAN DIEGO, CA 92101 (619) 231-1941

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

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

Form **990** (2011)

Part VII

1b	Sub-Total			
c	Total from continuation sheets to Part VII, Section A			
d	Total (add lines 1b and 1c)	1,032,180	0	100,992

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►6

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
EIGHTY EIGHT ENTERTAINMENT LLC PO BOX 20116 BALTIMORE, MD 212840116	PROVIDE HERSHEY FELDER PERFORMANCES	196,925

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

Part VIII

Statement of Revenue

				(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 . . .	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c	1,272,848				
	d	Related organizations	1d	170,587				
	e	Government grants (contributions)	1e	806,194				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	4,641,323				
	g	Noncash contributions included in lines 1a-1f \$ 925,329						
	h	Total. Add lines 1a-1f		6,890,952				
Program Service Revenue	2a	ADMISSIONS	Business Code 900099	11,914,045	11,914,045			
	b	ENHANCEMENT REVENUE	900099	793,311	793,311			
	c	OTHER REVENUE	900099	129,278	129,278			
	d	EDUCATIONAL PROGRAMS	611600	36,413	36,413			
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f		12,873,047				
	Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		74,920			74,920
4		Income from investment of tax-exempt bond proceeds . .						
5		Royalties		13,643			13,643	
6a		Gross rents	(i) Real 90,980					
b		Less rental expenses	56,620					
c		Rental income or (loss)	34,360					
d		Net rental income or (loss)		34,360		-675	35,035	
7a		Gross amount from sales of assets other than inventory	(i) Securities 1,685,881	(ii) Other				
b		Less cost or other basis and sales expenses	1,685,998					
c		Gain or (loss)	-117					
d		Net gain or (loss)		-117				-117
8a		Gross income from fundraising events (not including \$ 1,272,848 of contributions reported on line 1c) See Part IV, line 18						
a			257,586					
b		Less direct expenses	568,740					
c		Net income or (loss) from fundraising events . .		-311,154				-311,154
9a		Gross income from gaming activities See Part IV, line 19						
a								
b		Less direct expenses						
c		Net income or (loss) from gaming activities . .						
10a		Gross sales of inventory, less returns and allowances						
a			701,249					
b		Less cost of goods sold	296,594					
c	Net income or (loss) from sales of inventory . .		404,655	404,655				
Miscellaneous Revenue		Business Code						
11a	PASSTHROUGH K-1 UBIT	531390	400,461		400,461			
b								
c								
d	All other revenue							
e	Total. Add lines 11a-11d		400,461					
12	Total revenue. See Instructions		20,380,767	13,277,702	399,786		-187,673	

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22	73,300	73,300		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,133,172	404,294	429,316	299,562
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	9,074,776	7,499,727	1,099,726	475,323
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	447,457	420,807	14,522	12,128
9	Other employee benefits	873,442	781,041	54,857	37,544
10	Payroll taxes	920,737	794,068	69,331	57,338
11	Fees for services (non-employees)				
a	Management				
b	Legal	39,176	9,217	26,152	3,807
c	Accounting	80,750		80,750	
d	Lobbying				
e	Professional fundraising See Part IV, line 17	21,654			21,654
f	Investment management fees				
g	Other	1,591,554	1,484,750	106,804	
12	Advertising and promotion	734,073	734,073		
13	Office expenses	142,595	77,817	25,534	39,244
14	Information technology	198,066	4,389	193,677	
15	Royalties	724,864	724,864		
16	Occupancy				
17	Travel	369,414	317,609	28,487	23,318
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	16,847	9,337	5,769	1,741
20	Interest	144,021	144,021		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,650,307	1,331,956	318,351	
23	Insurance	142,624	100,077	42,547	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	WORKERS COMP INSURANCE	469,312	434,336	21,021	13,955
b	HOUSING	463,540	463,540		
c	BANK CHARGES	367,801	268	361,993	5,540
d	SETS, PROPS, AND PAINT	350,096	350,096		
e					
f	All other expenses	2,171,863	1,769,828	155,372	246,663
25	Total functional expenses. Add lines 1 through 24f	22,201,441	17,929,415	3,034,209	1,237,817
26	Joint costs. Check here ☐ if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			47,529	1	101,240
	2	Savings and temporary cash investments			10,324,856	2	9,971,920
	3	Pledges and grants receivable, net			13,013,327	3	12,402,915
	4	Accounts receivable, net			205,565	4	306,107
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L				5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use			117,045	8	111,890
	9	Prepaid expenses and deferred charges			905,134	9	720,466
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	44,277,242			
	b	Less accumulated depreciation	10b	12,870,921	32,065,610	10c	31,406,321
	11	Investments—publicly traded securities			238,704	11	266,671
	12	Investments—other securities See Part IV, line 11				12	
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			1,375,738	15	819,097
	16	Total assets. Add lines 1 through 15 (must equal line 34)			58,293,508	16	56,106,627
Liabilities	17	Accounts payable and accrued expenses			758,231	17	1,513,034
	18	Grants payable				18	
	19	Deferred revenue			3,271,282	19	4,015,791
	20	Tax-exempt bond liabilities			3,745,701	20	3,615,697
	21	Escrow or custodial account liability Complete Part IV of Schedule D				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties			2,000,000	23	500,000
	24	Unsecured notes and loans payable to unrelated third parties			179,940	24	154,236
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			9,955,154	26	9,798,758
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			9,337,810	27	9,284,074
	28	Temporarily restricted net assets			37,028,602	28	35,181,816
	29	Permanently restricted net assets			1,971,942	29	1,841,979
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			48,338,354	33	46,307,869
	34	Total liabilities and net assets/fund balances			58,293,508	34	56,106,627

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	20,380,767
2	Total expenses (must equal Part IX, column (A), line 25)	2	22,201,441
3	Revenue less expenses Subtract line 2 from line 1	3	-1,820,674
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	48,338,354
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-209,811
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	46,307,869

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		No
b	Were the organization's financial statements audited by an independent accountant?	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both ☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separated basis		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
OLD GLOBE THEATRE

Employer identification number
95-1543396

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

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1

☐

A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**

2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7

☐

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)

8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9

☒

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10

☐

An organization organized and operated exclusively to test for public safety See**section 509(a)(4).**

11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box

g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(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?

h

☐

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

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

Part II

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

Section A. Public Support						
Calendar year	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
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						

Section B. Total Support						
Calendar year	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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 (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11 Total support (Add lines 7 through 10)						

12 Gross receipts from related activities, etc (See instructions)

12

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

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f))

14

15 Public Support Percentage for 2010 Schedule A, Part II, line 14

15

16a 33 1/3% support test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

16b 33 1/3% support test—2010. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization

17b 10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization

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

Part IIISupport Schedule for Organizations Described in IRC 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	10,155,403	9,937,021	10,040,557	7,155,021	6,890,422	44,178,424
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	13,834,863	12,074,012	11,965,531	13,422,853	13,574,296	64,871,555
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	23,990,266	22,011,033	22,006,088	20,577,874	20,464,718	109,049,979
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	2,232,482	1,323,896	2,479,687	1,540,718	1,459,093	9,035,876
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0
c Add lines 7a and 7b	2,232,482	1,323,896	2,479,687	1,540,718	1,459,093	9,035,876
8 Public Support (Subtract line 7c from line 6)						100,014,103

Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6	23,990,266	22,011,033	22,006,088	20,577,874	20,464,718	109,049,979
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	594,072	511,936	316,642	180,531	179,543	1,782,724
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	30,826	13,201	-20,799	69	399,786	423,083
c Add lines 10a and 10b	624,898	525,137	295,843	180,600	579,329	2,205,807
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)	1,404,793	686,810	408,213	221,871	257,586	2,979,273
13 Total support (Add lines 9, 10c, 11 and 12)	26,019,957	23,222,980	22,710,144	20,980,345	21,301,633	114,235,059
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here	☐					

Section C. Computation of Public Support Percentage		
15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	15	87.550 %
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	86.860 %

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))	17	1.930 %
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18	1.830 %
19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	☐	
b 33 1/3% support tests—2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	☐	
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions	☐	

Part IV **Supplemental Information.** 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. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation
SCHEDULE A, PART II, LINE 12, EXPLANATION OF OTHER INCOME SPECIAL EVENT REVENUE

Additional Data

Software ID:

Software Version:

EIN: 95-1543396

Name: OLD GLOBE THEATRE

Form 990, Special Condition Description:

Special Condition Description

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ANN STECK BOARD MEMBER	4 00	X						0	0	0
ANTHONY S THORNLEY VICE CHAIR - FINANCE & TRE	7 00	X		X				0	0	0
SANDRA REDMAN BOARD MEMBER	4 00	X						0	0	0
VALERIE S COOPER BOARD MEMBER	2 00	X						0	0	0
KATHRYN HATTOX BOARD MEMBER	7 00	X						0	0	0
JOSEPH BENOIT BOARD MEMBER	2 00	X						0	0	0
MARY BETH ADDERLEY BOARD MEMBER	2 00	X						0	0	0
DONALD COHN IMMEDIATE PAST-CHAIR	7 00	X		X				0	0	0
PETER J COOPER BOARD MEMBER	3 00	X						0	0	0
DENI JACOBS BOARD MEMBER	4 00	X						0	0	0
CONRAD PREBYS BOARD MEMBER	4 00	X						0	0	0
NICOLE CLAY BOARD MEMBER	2 00	X						0	0	0
PAMELA A FARR BOARD MEMBER	3 00	X						0	0	0
DEAN THORP BOARD MEMBER	2 00	X						0	0	0
ELIZABETH ALTMAN BOARD MEMBER	2 00	X						0	0	0
VICTOR P GALVEZ BOARD MEMBER	3 00	X						0	0	0
ELAINE BENNETT DARWIN VICE CHAIR - NOMINATING	7 00	X		X				0	0	0
ELIZABETH HELMING BOARD MEMBER	2 00	X						0	0	0
HAROLD W FUSON JR CHAIR	10 00	X		X				0	0	0
VIVIANA IBANEZ BOARD MEMBER	2 00	X						0	0	0
JO ANN KILTY BOARD MEMBER	2 00	X						0	0	0
DAPHNE JAMESON BOARD MEMBER	2 00	X						0	0	0
SUSAN MAJOR BOARD MEMBER	5 00	X						0	0	0
SILVIJA DEVINE BOARD MEMBER	2 00	X						0	0	0
KAREN FOX BOARD MEMBER	2 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
NANCI HULL BOARD MEMBER	2 00	X						0	0	0
RENEE SCHATZ BOARD MEMBER	2 00	X						0	0	0
STACEY LEVASSEUR VASQUEZ BOARD MEMBER	2 00	X						0	0	0
DANIEL L SULLIVAN PHD BOARD MEMBER	2 00	X						0	0	0
JULIE J SULLIVAN PHD BOARD MEMBER	4 00	X						0	0	0
EVELYN MACK TRUITT BOARD MEMBER	4 00	X						0	0	0
DEBRA TURNER BOARD MEMBER	4 00	X						0	0	0
CAROLYN YORSTON-WELLCOME BOARD MEMBER	3 00	X						0	0	0
CRYSTAL WATKINS BOARD MEMBER	2 00	X						0	0	0
PAMELA CESAK BOARD MEMBER	2 00	X						0	0	0
JEAN-MARIE HAMEL BOARD MEMBER	3 00	X						0	0	0
RAMIN POURTEYMOUR BOARD MEMBER	2 00	X						0	0	0
PAULA POWERS BOARD MEMBER	3 00	X						0	0	0
DAVID REAGAN BOARD MEMBER	2 00	X						0	0	0
LYNNE WHEELER BOARD MEMBER	2 00	X						0	0	0
JEAN SHEKHTER BOARD MEMBER	2 00	X						0	0	0
HARVEY WHITE SECRETARY	4 00	X		X				0	0	0
JUNE YODER BOARD MEMBER	2 00	X						0	0	0
LOUIS G SPISTO PRESIDENT/EXEC PROD	40 00	X		X				400,740	0	42,783
JAMES A WENING BOARD MEMBER	3 00	X						0	0	0
KARIN WINNER BOARD MEMBER	2 00	X						0	0	0
VICKI L ZEIGER BOARD MEMBER	3 00	X						0	0	0
ROBERT DRAKE DIRECTOR OF PRODUCTION	40 00			X				106,100	0	12,320
DAVID HENSON SECRETARY/DIR OF MARKETING	40 00			X				133,943	0	4,090
MICHAEL G MURPHY VP/GENERAL MANAGER	40 00			X				138,177	0	14,976

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
TODD SCHULTZ DIRECTOR OF DEVELOPMENT	40 00			X				139,407	0	12,315
MARK SOMERS TREASURER/CFO	40 00			X				113,813	0	14,508

SCHEDULE D
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2011

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization
OLD GLOBE THEATRE

Employer identification number
95-1543396

Part I

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

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	
	☐ Yes ☐ No	
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 for any other purpose conferring impermissible private benefit	
	☐ Yes ☐ No	

Part II

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)
☐ Preservation of land for public use (e g , recreation or pleasure) ☐ Preservation of an historically importantly land area
☐ Protection of natural habitat ☐ Preservation of a 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
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

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

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, 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

a Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____

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

Part III

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

3

Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

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

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV and complete the following table

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

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

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a	Beginning of year balance	348,675	313,477	259,888	300,621
b	Contributions	26,800	25,100	25,000	25,575
c	Investment earnings or losses	-48	17,950	37,192	-57,174
d	Grants or scholarships				
e	Other expenditures for facilities and programs	8,053	7,852	8,603	8,318
f	Administrative expenses				816
g	End of year balance	367,374	348,675	313,477	259,888

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶ 100 000 %

c

Term endowment ▶

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations

3a(i)

Yes

No

(ii) related organizations

3a(ii)

No

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

3b

4

Describe in Part XIV the intended uses of the organization's endowment funds

Part VI

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

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		1,750,000		1,750,000
b Buildings		4,542,177	1,110,219	3,431,958
c Leasehold improvements		33,611,408	8,649,327	24,962,081
d Equipment				
e Other		4,373,657	3,111,375	1,262,282
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				31,406,321

Schedule D (Form 990) 2011

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements			
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	20,380,767
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	22,201,441
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-1,820,674
4	Net unrealized gains (losses) on investments	4	-80,893
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-254,468
9	Total adjustments (net) Add lines 4 - 8	9	-335,361
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-2,156,035

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return			
1	Total revenue, gains, and other support per audited financial statements	1	21,258,140
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	-80,893
b	Donated services and use of facilities	2b	254,442
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	703,824
e	Add lines 2a through 2d	2e	877,373
3	Subtract line 2e from line 1	3	20,380,767
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	20,380,767

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return			
1	Total expenses and losses per audited financial statements	1	23,414,175
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	254,442
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	958,292
e	Add lines 2a through 2d	2e	1,212,734
3	Subtract line 2e from line 1	3	22,201,441
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	22,201,441

Part XIV Supplemental Information		
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.		
IDENTIFIER	Return Reference	Explanation
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THE ORGANIZATION CONTINUES RAISING FUNDS DIRECTLY FOR THE ENDOWMENT WITH THE INTENT THAT A 5% ANNUAL DRAW WILL COVER THE STRUCTURAL DEFICIT OF EARNED/CONTRIBUTED REVENUE AND EXPENSE NEEDED TO FULFILL ITS MISSION
PART XI, LINE 8 - OTHER ADJUSTMENTS		CHANGE IN ALLOWANCE 130,110 K-1 PASSTHROUGH VS BOOK -259,028 CONSOLIDATING AJE -125,550 TOTAL TO SCHEDULE D, PART XI, LINE 8 -254,468
		PART X THE OLD GLOBE HAS NO UNRECOGNIZED TAX BENEFITS OR LIABILITIES AS OF DECEMBER 31, 2011 AND 2010 PART XII, LINE 2D, OTHER SPECIAL EVENTS EXPENSE \$568,740 COST OF GOODS SOLD \$296,594 K-1 PASSTHROUGH VS BOOK \$-259,028 CHANGE IN PLEDGE ALLOWANCE \$130,110 CONSOLIDATION AJE \$-89,212 RENTAL EXPENSE RECLASS \$56,620 TOTAL \$703,824 PART XIII, LINE 2D, OTHER SPECIAL EVENTS EXPENSE \$568,740 COST OF GOODS SOLD \$296,594 CONSOLIDATION AJE \$36,338 RENTAL EXPENSE RECLASS \$56,620 TOTAL \$958,292

Part II Fundraising Events.

Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
		<u>GALA</u> (event type)	<u>VARIOUS</u> (event type)	<u>(total number)</u>	(Add col (a) through col (c))
Revenue	1	Gross receipts	1,326,812	203,622	1,530,434
	2	Less Charitable contributions	1,113,722	159,126	1,272,848
	3	Gross income (line 1 minus line 2)	213,090	44,496	257,586
Direct Expenses	4	Cash prizes			
	5	Non-cash prizes			
	6	Rent/facility costs			
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses	297,132	271,608	568,740
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶			
	11	Net income summary Combine lines 3 and 10 in column (d). ▶			
					(568,740)
					-311,154

Part III Gaming.

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

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
					(Add col (a) through col (c))
Revenue	1	Gross revenue			
Direct Expenses	2	Cash prizes			
	3	Non-cash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	7	Direct expense summary Add lines 2 through 5 in column (d) ▶			
	8	Net gaming income summary Combine lines 1 and 7 in column (d) ▶			
					()

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

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

b If "No," Explain _____

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

b If "Yes," Explain _____

- 11

Does the organization operate gaming activities with nonmembers?

☐

Yes

☐

No
- 12

Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

☐

Yes

☐

No

13

Indicate the percentage of gaming activity operated in

a	The organization's facility	13a
b	An outside facility	13b

14

Provide the name and address of the person who prepares the organization's gaming/special events books and records

Name

Address

15a

Does the organization have a contract with a third party from whom the organization receives gaming revenue?

☐

Yes

☐

No

b

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

c

If "Yes," enter name and address

Name

Address

16

Gaming manager information

Name

Gaming manager compensation

\$

Description of services provided

☐

Director/officer

☐

Employee

☐

Independent contractor

17

Mandatory distributions

a

Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

☐

Yes

☐

No

b

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

Part IV

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

Identifier	ReturnReference	Explanation
------------	-----------------	-------------

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
OLD GLOBE THEATRE

Grants and Other Assistance to Organizations,
Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990

OMB No 1545-0047

2011

Open to Public
Inspection

Employer identification number
95-1543396

Part I

General Information on Grants and Assistance

- 1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No
- 2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ▶ ☐

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶

3

Enter total number of other organizations listed in the line 1 table ▶

Part IIIGrants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) UIVERSITY OF CALIFORNIA, SAN DIEGO, MASTERS OF ARTS PROGRAM	19	67,300	0	FAIR MARKET VALUE	N/A
(2) GLOBE HONORS SCHOLARSHIPS	7	6,000	0	FAIR MARKET VALUE	N/A

Part IVSupplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 GRANTS/STIPENDS ARE GIVEN TO GRADUATE STUDENTS IN AN MFA PROGRAM RUN JOINTLY BY THE UNIVERSITY OF SAN DIEGO AND OLD GLOBE THEATRE THE STIPENDS' PURPOSE FOR MFA STUDENTS IS TO COVER A SMALL PORTION OF MONTHLY LIVING EXPENSES OVER A TWO YEAR COURSE OLD GLOBE THEATRE ALSO GIVES SCHOLARSHIPS/FELLOWSHIPS TO THE WINNERS OF GLOBE HONORS, AN AWARDS PROGRAM THAT CELEBRATES THE BEST TALENT AMONG SAN DIEGO'S HIGH SCHOOLERS THE SCHOLARSHIPS' PURPOSE FOR GLOBE HONORS WINNERS IS TO FURTHER THEIR STUDIES IN THEATRE

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2011

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization
OLD GLOBE THEATRE

Employer identification number
95-1543396

Part I

Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items		
	☒ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	1b	Yes
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply		
	☒ Compensation committee ☒ Written employment contract ☐ Independent compensation consultant ☒ Compensation survey or study ☒ Form 990 of other organizations ☒ Approval by the board or compensation committee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization		
a	Receive a severance payment or change-of-control payment?	4a	No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.		
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of		
a	The organization?	5a	No
b	Any related organization?	5b	No
	If "Yes," to line 5a or 5b, describe in Part III		
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of		
a	The organization?	6a	No
b	Any related organization?	6b	No
	If "Yes," to line 6a or 6b, describe in Part III		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	No
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8	No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9	

Part II **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) LOUIS G SPISTO	(i)	400,740	0	0	19,350	23,433	443,523	0
	(ii)	0	0	0	0	0	0	0
(2) MICHAEL G MURPHY	(i)	138,177	0	0	4,259	10,717	153,153	0
	(ii)	0	0	0	0	0	0	0
(3) TODD SCHULTZ	(i)	139,407	0	0	4,219	8,096	151,722	0
	(ii)	0	0	0	0	0	0	0
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III **Supplemental Information**

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
	PART I, LINE 1B	FIRST-CLASS TRAVEL AND SOCIAL DUES WERE PROVIDED TO THE PRESIDENT. THE BENEFITS WERE NOT TREATED AS TAXABLE INCOME AS THEY WERE 100% BUSINESS RELATED. FIRST-CLASS TRAVEL WAS APPROVED BY THE BOARD IN 2003 BECAUSE IT IS MEDICALLY RELATED.

Schedule K (Form 990)	Supplemental Information on Tax Exempt Bonds ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O (Form 990). ▶ Attach to Form 990. ▶ See separate instructions.	OMB No 1545-0047
		2011
		Open to Public Inspection

Department of the Treasury Internal Revenue Service	Name of the organization OLD GLOBE THEATRE	Employer identification number 95-1543396
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Part I Bond Issues

(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased		(h) On Behalf of Issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A OLD GLOBE THEATRE	95-1543396		08-12-2010	3,802,430	REPAYMENT OF EXISTING NOTES PAYABLE		X		X		X

Part II Proceeds

		A		B		C		D	
1	Amount of bonds retired								
2	Amount of bonds defeased								
3	Total proceeds of issue	3,802,430							
4	Gross proceeds in reserve funds								
5	Capitalized interest from proceeds								
6	Proceeds in refunding escrow								
7	Issuance costs from proceeds								
8	Credit enhancement from proceeds								
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds								
11	Other spent proceeds								
12	Other unspent proceeds								
13	Year of substantial completion								
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?		X						
15	Were the bonds issued as part of an advance refunding issue?		X						
16	Has the final allocation of proceeds been made?	X							
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X							

Part III Private Business Use

					A		B		C		D	
					Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?					X						
2	Are there any lease arrangements that may result in private business use of bond-financed property?				X							

Part III

Private Business Use (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use?		X						
b	If 'Yes' to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c	Are there any research agreements that may result in private business use of bond-financed property?		X						
d	If 'Yes' to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government	0 %							
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government	8 400 %							
6	Total of lines 4 and 5	8 400 %							
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	X							

Part IV

Arbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		X						
2	Is the bond issue a variable rate issue?		X						
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?		X						
b	Name of provider								
c	Term of hedge								
d	Was the hedge superintegrated?								
e	Was a hedge terminated?								
4a	Were gross proceeds invested in a GIC?		X						
b	Name of provider								
c	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5	Were any gross proceeds invested beyond an available temporary period?		X						
6	Did the bond issue qualify for an exception to rebate?	X							

Part V

Procedures To Undertake Corrective Action

Check the box if the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations ☐ Yes ☒ No

Part VI

Supplemental Information

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

Identifier	Return Reference	Explanation
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Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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

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

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

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

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

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

Part II Loans to and/or From Interested Persons.

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

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
Total ▶ \$										

Part III Grants or Assistance Benefitting Interested Persons.

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

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

Part IV

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) SANDRA REDMAN	BOARD MEMBER	141,910	INTEREST PAYMENTS ON MORTGAGE TO COMMERCIAL BANK IN WHICH BOARD MEMBER IS AN OFFICER OF SUCH BANK		No

Part V

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

Identifier	Return Reference	Explanation
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SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

NonCash Contributions

►Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30.
► Attach to Form 990.

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Part I

Types of Property

	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests	X	3	6,300	QUOTED VALUE OF COST
4 Books and publications	X		28,800	QUOTED VALUE OF COST
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	11	240,400	AVG PRICE DAY OF TRANSF
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (COMPUTER UPGRADE - SOFTWARE, HARDWARE, LICENSES)	X	1	491,675	QUOTED VALUE OF COST
26 Other ► (FOOD AND BEVERAGE)	X	8	75,650	COST
27 Other ► (JEWELRY & ACCESSORIES FOR GALA AUCTION)	X	3	24,115	QUOTED VALUE OF COST
28 Other ► (EVENT TICKETS FOR GALA AUCTION)	X	3	6,330	SALE OF COMPARABLE ITEM
Other ► (DONATED TABLE GIFTS FOR EVENTS)	X	1	38,685	QUOTED VALUE OF COST
Other ► (FABRIC FOR CUSTUME SHOP)	X	1	12,374	QUOTED VALUE OF COST
Other ► (PHOTOS FOR GLOBE EVENTS)	X	1	1,000	QUOTED VALUE OF COST
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement			29	
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?				Yes No
b If "Yes," describe the arrangement in Part II				
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?				Yes
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?				Yes
b If "Yes," describe in Part II				
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II				

Part III

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
THIRD PARTY USE	PART I, LINE 32B	THE ORGANIZATION USES THIRD PARTIES TO SELL NON-CASH ITEMS AT AUCTION THEY ALSO USE AN INVESTMENT BROKER TO SELL PUBLICALLY TRADED STOCK RECEIVED AS A CONTRIBUTION

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 6	THE ORGANIZATION HAS ONE CLASS OF MEMBERSHIP
	FORM 990, PART VI, SECTION A, LINE 7A	THE ORGANIZATION HAS ONE CLASS OF MEMBERSHIP, WHO HAVE THE RIGHT TO ELECT OFFICERS AS PROPOSED TO THEM BY THE NOMINATING COMMITTEE
	FORM 990, PART VI, SECTION B, LINE 11	DIRECTOR OF FINANCE (CORPORATE OFFICER) AND TAX PREPARER COMPLETE 990, WHICH IS REVIEWED BY THE MANAGING DIRECTOR/PRESIDENT AFTER MANAGEMENT'S APPROVAL OF THE 990, EACH MEMBER OF THE BOARD OF DIRECTORS IS PROVIDED ACCESS TO THE PUBLIC DISCLOSURE COPY OF THE 990 PRIOR TO FILING THE RETURN WITH THE IRS
	FORM 990, PART VI, SECTION B, LINE 12C	EACH DIRECTOR, PRINCIPAL OFFICER AND MEMBER OF A COMMITTEE SHALL ANNUALLY SIGN A STATEMENT WHICH AFFIRMS THAT SUCH PERSON HAS RECEIVED A COPY OF THE CONFLICTS OF INTEREST POLICY, HAS READ AND UNDERSTANDS THE POLICY, HAS AGREED TO COMPLY WITH THE POLICY, AND UNDERSTANDS THAT THE OLD GLOBE IS A CHARITABLE ORGANIZATION AND THAT IN ORDER TO MAINTAIN ITS FEDERAL TAX EXEMPTION IT MUST ENGAGE PRIMARILY IN ACTIVITIES WHICH ACCOMPLISH ONE OR MORE OF ITS TAX-EXEMPT PURPOSES IF A CONFLICT ARISES, THAT BOARD MEMBER CAN NOT VOTE ON THE TRANSACTION
	FORM 990, PART VI, SECTION B, LINE 15	THE CONTRACT FOR THE EXECUTIVE PRODUCER/PRESIDENT IS NEGOTIATED DIRECTLY WITH THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS THEIR PROCESS INCLUDES A PERSONNEL APPRAISAL, THE THEATRE COMMUNICATIONS GROUP SALARY SURVEY AND PEER DISCUSSION WITH BOARDS OF OTHER MAJOR PERFORMING ARTS INSTITUTIONS THE MOST RECENT SEVEN-YEAR CONTRACT COVERS 1/1/11 - 12/31/17 A WRITTEN SUBSTANTIATION IS HELD IN THE FILES OF THE ORGANIZATION'S INDEPENDENT ATTORNEY THE EXECUTIVE PRODUCER/PRESIDENT USES THE ORGANIZATION'S FORMAL APPRAISAL PROCESS, ON-GOING EVALUATIONS, AND COMPARABILITY INFORMATION FROM THE ANNUAL THEATRE COMMUNICATIONS GROUP SALARY SURVEY FOR EACH CORPORATE OFFICER AND/OR KEY EMPLOYEE POSITIONS INCLUDE GENERAL MANAGER, DIRECTOR OF DEVELOPEMENT, DIRECTOR OF MARKETING, AND DIRECTOR OF FINANCE THIS ANNUAL PROCESS HAS BEEN IN PLACE SINCE YEAR-BEGINNING 2004 CONTEMPORANEOUS SUBSTANTIATION IS A FINAL NEW SALARIES DOCUMENT WHICH IS SIGNED BY THE EXECUTIVE PRODUCER AND GENERAL MANAGER AND FORWARDED TO HUMAN RESOURCES AND PAYROLL FOR IMPLEMENTATION OUTSIDE THIS PROCESS, THE POSITION OF FESTIVAL ARTISTIC DIRECTOR HAS A MULTI-YEAR, NEGOTIATED CONTRACT, WITH SAME CRITERIA USED JOINTLY BY EXECUTIVE PRODUCER/PRESIDENT AND BOARD CHAIR
	FORM 990, PART VI, SECTION C, LINE 19	AUDITED FINANCIAL STATEMENTS ARE AVAILABLE ON THE ORGANIZATION'S WEBSITE OR UPON REQUEST GOVERNING DOCUMENTS AND THE CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -80,893 CHANGE IN ALLOWANCE 130,110 K-1 PASSTHROUGH VS BOOK -259,028 TOTAL TO FORM 990, PART XI, LINE 5 -209,811

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization	
						Yes	No
(1) OLD GLOBE ENDOWMENT TRUST PO BOX 122171 SAN DIEGO, CA 921122171 33-6125358	509(A)(3) SUPPORT ORGANIZATION OF OLD GLOBE	CA	501(C)(3)	11A	N/A		No

Part III

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

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

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

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

Part V

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

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

1

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

a

Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity

b

Gift, grant, or capital contribution to related organization(s)

c

Gift, grant, or capital contribution from related organization(s)

d

Loans or loan guarantees to or for related organization(s)

e

Loans or loan guarantees by related organization(s)

f

Sale of assets to related organization(s)

g

Purchase of assets from related organization(s)

h

Exchange of assets with related organization(s)

i

Lease of facilities, equipment, or other assets to related organization(s)

j

Lease of facilities, equipment, or other assets from related organization(s)

k

Performance of services or membership or fundraising solicitations for related organization(s)

l

Performance of services or membership or fundraising solicitations by related organization(s)

m

Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

n

Sharing of paid employees with related organization(s)

o

Reimbursement paid to related organization(s) for expenses

p

Reimbursement paid by related organization(s) for expenses

q

Other transfer of cash or property to related organization(s)

r

Other transfer of cash or property from related organization(s)

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

No

No

Yes

No

No

No

No

No

No

No

No

No

No

No

No

No

No

No

2

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

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) GRANT FROM OLD GLOBE ENDOWMENT	C	170,587	BOARD APPROVED
(2)			
(3)			
(4)			
(5)			
(6)			

Schedule R (Form 990) 2011

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

[illegible]

Part VII

Supplemental Information

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

Identifier	Return Reference	Explanation	
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