

## See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



# Form **990-EZ**

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

2013

OMB No 1545-1150

**Open to Public** 

Inspection

Department of the Treasury Internal Revenue Service

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

▶ Do not enter Social Security numbers on this form as it may be made public.

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

January 1 A For the 2013 calendar year, or tax year beginning 2013, and ending December 31 C Name of organization B Check if applicable Address change Reading Civic Opera Society, Inc. (DBA Reading Civic Theatre) Room/suite Name change tumber and street (or PO box, if mail is not delivered to street address) Initial return 122 N. 10th Street 610-375-7482 Terminated City or town, state or province, country, and ZIP or foreign postal code F Group Exemption Amended return Number ▶ Application pending Reading, PA 19601 23-6394242 G Accounting Method Other (specify) ▶ H Check ► ☑ if the organization is not readingcivic.org required to attach Schedule B J Tax-exempt status (check only one) — 

501(c)(3) 

501(c) (€) (Form 990, 990-EZ, or 990-PF) ) ◀ (insert no ) ☐ 4947(a)(1) or K Form of organization ✓ Corporation ☐ Trust L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Check if the organization used Schedule O to respond to any question in this Part I Contributions, gifts, grants, and similar amounts received . . . . 4,871 2 Program service revenue including government fees and contracts 2 8,859 3 Membership dues and assessments 3 2,600 Investment income 4 9 Gross amount from sale of assets other than inventory 5a Less cost or other basis and sales expenses . 5b Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) Gaming and fundraising events Gross income from gaming (attach Schedule G if greater than W. **b** Gross income from fundraising events (not including \$ 1,450 of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) . 6b 12,430 Less: direct expenses from gaming and fundraising events 8,199 6c Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract 6d 4,231 Gross sales of inventory, less returns and allowances 7a Less cost of goods sold . . . . . . . . . . . . ¢ Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 7c 0 8 Other revenue (describe in Schedule O) 1,324 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 8d, 7c, and 8 9 21,894 10 Grants and similar amplints paid (list in Schedule O) 10 650 Benefits paid to or for members . 11 11 0 Salaries, other compensation, and employed benefits . . . 12 12 0 Professional fees and other payments to independent contractors 13 13 2,130 Occupancy, rent, lutilities, and maintenance 14 14 9,817 15 Printing, publications postage, and shipping 15 4,683 16 Other expenses (describe in Schedule O) 16 17,048 17 Total expenses. Add lines 10 through 16 17 34,328 Excess or (deficit) for the year (Subtract line 17 from line 9) . . . 18 18 <12,434> Net Assets Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with 19 end-of-year figure reported on prior year's return) . 19 468,932 20 20 Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year. Combine lines 18 through 20 21 456,498

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 106421

Form **990-EZ** (2013)

Par	rt II Balance Sheets (see the instructions	-	,				
`	Check if the organization used Schedul	e O to respond to ar	y question in this			🔽	
				(A) Beginning of year		(B) End of year	
22	Cash, savings, and investments			38,989		26,555	
23	Land and buildings			120,000	23	120,000	
24	Other assets (describe in Schedule O) .			309,943	_	309,943	
25	Total assets		· · _	468,932	_	456,498	
26	Total liabilities (describe in Schedule O)			<u> </u>	26	0	
27	Net assets or fund balances (line 27 of column			468,932	27	456,498	
Part						Expenses	
A // 4	Check if the organization used Schedul	<del>-</del> -			, ,	quired for section	
	t is the organization's primary exempt purpose?					(c)(3) and 501(c)(4) anizations and section	
	cribe the organization's program service accomp				494	7(a)(1) trusts, optional	
	neasured by expenses. In a clear and concise in ons benefited, and other relevant information for e		services provided	, the number of	for (	others)	
		<del></del>	nun nengeram for local	l high cahool		T	
	2014 Gala - This is a fund raiser for our organization		nip program for local	nigh school			
	seniors and juniors 250 attendees; 4 scholarship v	vinners.					
	(Grants \$ ) If this amoun	it includes foreign gra	nts check here	▶ □	28a	5,441	
29	Presented the show "Jerry's Girls" - Attendees 300		into, check here .			3,441	
20	Presented the show Jerry's Girls - Attendees 300						
	(Grants \$ ) If this amour	it includes foreign gra	nts, check here .	▶ □	298	2,650	
30	Produced and presented the concert version of an				-		
	Music and libretto written by 3 local individuals						
				1			
	(Grants \$ ) If this amoun	it includes foreign gra	nts, check here .	▶ □	30a	1,495	
31	Other program services (describe in Schedule O)						
	(Grants \$ ) If this amoun	nt includes foreign gra	nts, check here .	▶ 🗆	31a	2,573	
32	(Grants \$ ) If this amount includes foreign grants, check here ▶ ☐  32 Total program service expenses (add lines 28a through 31a) ▶						
	· · · · · · · · · · · · · · · · · · ·				32	1-7.00	
Par	List of Officers, Directors, Trustees, and Ko	ey Employees (list each	one even if not com	pensated—see the II		1-1.00	
Par	· · · · · · · · · · · · · · · · · · ·	ey Employees (list each	one even if not coming question in this	pensated—see the II Part IV		1-7.00	
Par	List of Officers, Directors, Trustees, and Ke Check if the organization used Schedul	ey Employees (list each le O to respond to an (b) Average	n one even if not cominy question in this (c) Reportable	pensated—see the II Part IV	nstru	ictions for Part IV)	
Par	List of Officers, Directors, Trustees, and Ko	ey Employees (list each le O to respond to an (b) Average hours per week	n one even if not coming question in this (c) Reportable compensation (Forms W-2/1099-MISC	pensated—see the II Part IV (d) Health benefits, contributions to employ benefit plans, and	nstru	ictions for Part IV)	
Par	List of Officers, Directors, Trustees, and Ke Check if the organization used Schedul	ey Employees (list each le O to respond to an (b) Average	n one even if not cominy question in this  (c) Reportable compensation	pensated—see the II Part IV (d) Health benefits, contributions to employ	nstru	ictions for Part IV)	
	List of Officers, Directors, Trustees, and Ke Check if the organization used Schedul	ey Employees (list each le O to respond to an (b) Average hours per week	n one even if not coming question in this (c) Reportable compensation (Forms W-2/1099-MISC	pensated—see the II Part IV (d) Health benefits, contributions to employ benefit plans, and	nstru	ictions for Part IV)	
Tim E	List of Officers, Directors, Trustees, and Ke Check if the organization used Schedul (a) Name and title	ey Employees (list each le O to respond to as  (b) Average hours per week devoted to position	n one even if not coming question in this (c) Reportable compensation (Forms W-2/1099-MISC	pensated—see the II Part IV (d) Health benefits, contributions to employ benefit plans, and deferred compensatio	nstru	ictions for Part IV)	
Tim E 7 Wir Larry	List of Officers, Directors, Trustees, and Kenneck of the organization used Schedul (a) Name and title  Byerly Indisor Court, Reading, Pa 19606  y Pisano	ey Employees (list each le O to respond to al  (b) Average hours per week devoted to position  President - 10 hours	n one even if not coming question in this (c) Reportable compensation (Forms W-2/1099-MISC (if not paid, enter -0-)	pensated—see the II Part IV	ee (e	ctions for Part IV)	
Tim E 7 Wir Larry 125 F	List of Officers, Directors, Trustees, and Kenneck of the organization used Schedul (a) Name and title  Byerly Indisor Court, Reading, Pa. 19606 In Philadelphia Ave., Reading, PA. 19607	ey Employees (list each le O to respond to an  (b) Average hours per week devoted to position  President - 10	n one even if not coming question in this (c) Reportable compensation (Forms W-2/1099-MISC (if not paid, enter -0-)	pensated—see the II Part IV	ee (e	ctions for Part IV)	
Tim E 7 Wir Larry 125 F Linda	List of Officers, Directors, Trustees, and Kenney Check of the organization used Schedul (a) Name and title  Byerly Indisor Court, Reading, Pa. 19606 In Prisano Philadelphia Ave., Reading, PA. 19607 In A. Kauffman	ey Employees (list each le O to respond to an  (b) Average hours per week devoted to position  President - 10 hours  V.P 5 hours	n one even if not coming question in this  (c) Reportable compensation  (Forms W-2/1099-MISC (if not paid, enter -0-)	pensated—see the II Part IV  (d) Health benefits, contributions to employ benefit plans, and deferred compensatio	ee (e	ctions for Part IV)	
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Part	· · · · · · · · · · · · · · · · · · ·			
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this	Pan	Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a		162	140
	detailed description of each activity in Schedule O	33		1
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the			
35a	change on Schedule O (see instructions)	34		✓
	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		✓
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		✓
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		✓
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		✓
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 0			
ь	Did the organization file Form 1120-POL for this year?	37b		<b>1</b>
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee <b>or</b> were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? .	-		
<b>.</b>		38a	· ·	
ъ 39	If "Yes," complete Schedule L, Part II and enter the total amount involved	1	. , x	t t
а	Initiation fees and capital contributions included on line 9	× , ,		,
b	Gross receipts, included on line 9, for public use of club facilities	1 .	. ?	
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under.	16		~
	section 4911 ▶		1.2.5	
b	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit	1.32	`.@-;-"	P
	transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been			,
_	reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b	ļ	✓
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		,	~ f
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization	**		
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	100	, 	
41	List the states with which a copy of this return is filed	40e	L	
42a		610-37	5-748	2
	Located at ► 122 N. 10th Street, Reading, PA		-3736	
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		1
	If "Yes," enter the name of the foreign country: ▶	4,	; · · · · · · · · · · · · · · · · · · ·	
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	<u> </u>	. 3	
_		400	1	
c	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c	l.,	
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here			▶⊔
	and enter the amount of tax-exempt interest received or accrued during the tax year		\ \ \ 	l Ma
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be	F	Yes	No
	completed instead of Form 990-EZ	44a		1
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b	3	<b>F</b> ✓
С	Did the organization receive any payments for indoor tanning services during the year?	44c		<b>✓</b>
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an		,	
	explanation in Schedule O	44d	<u> </u>	1
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		[ ✓
45b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b	*	-

Page	•
raye	-

46	Did the organization engage, directly or i	ndirectly, in political o	campaign activities of	n behalf of o	r in opposit	tion 🖂	162	NO Pi
	to candidates for public office? If "Yes,"	•	, Part I		<u> </u>	46		1
Part \	All section 501(c)(3) organizations must answer questions 47–49b and 52, and complete the tables for lines							
	50 and 51. Check if the organization used So	shadula O ta raspana	d to any guestion in	thic Bort \/I				
	Check if the organization used Sc	nedule O to respond	to any question in	uns Part Vi			Yes	No
Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II								<b>√</b>
49a b 50	Is the organization a school as described Did the organization make any transfers If "Yes," was the related organization a s Complete this table for the organization' employees) who each received more that	to an exempt non-cha ection 527 organizations five highest comper	aritable related organi on? nsated employees (ot	zation? . her than offi			ees an	
	(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health contributions benefit plans, compe	to employee and deferred	(e) Estimate other con		
None								
<del></del>								
		4						
				-				
-		-		1				
		-						
		†						
			<u> </u>	1				
	Total number of other employees paid or		. <b>&gt;</b>					
	Complete this table for the organization			t contractors	who each	ı received	more	thar
	\$100,000 of compensation from the org	anization. If there is no	one, enter "None."					
	(a) Name and business address of each indepen	dent contractor	(b) Type of ser	vice	(c) Compensation			
None	•							
HOHE			-					
					j			
			<del></del>					
			_					
	······································		1					
		<del> </del>	†					
d	Total number of other independent contr	actors each receiving	over \$100,000 .	<b>&gt;</b>				
52	Did the organization complete Schedule	_		s and 4947(a	a)(1)			
	nonexempt charitable trusts must attach	a completed Schedu	le A			► ☐ Yes	3 🔲 I	No
	enalties of perjury, I declare that I have examined this rect, and complete Declaration of preparer (other that					nowledge and	d belief,	, it is
	rect, and complete Declaration of preparer (other tha	an onice; is cased on all inf	ormation of which preparer	nas any knowle	/_	1 117		
Sign	Sonature of officer	yma_		 Dat	<u> </u>	<u>'                                    </u>		
Here	Linda A. Kauffman	-		Jai	-			
	Type or print name and title							
Paid	Print/Type preparer's name	Preparer's signature	TC	ate	Check	ıf PTIN		
Prepa	arer				self-emplo			
Use (	1 <b>-</b> .			Firm	n's EiN ▶			
	Firm's address ▶			Pho	one no			
May th	ne IRS discuss this return with the prepare	er snown above? See	instructions			► Yes	sili	No

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

## **Public Charity Status and Public Support**

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

OMB No 1545-0047 2013

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name	of the organization							Employer id	dentificatio	n number	
			eading Civic Theatre)							394242	
Pa			rity Status (All orga				•		nstruction	ons.	
			ition because it is: (Fo						: <b>\</b>		
1 2	=										
3											
4			on operated in conjun						D(b)(1)(A)	l(iii). Enter	the
•	-	ne, city, and state							- ()()()	, (,	
5	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 7	=										
8			n section 170(b)(1)(A		nolete Pa	art II.)					
9	An organization receipts from support from	on that normally activities related gross investme	receives' (1) more that to its exempt functent income and unrelated June 30, 1975. See	an 331/3% Ions—sul lated bus	6 of its subject to disiness ta	upport fro certain ex xable inc	xceptions come (les	s, and (2) ss sectio	no mor	e than 33	1/3% of its
10	· · · · · · · · · · · · · · · · · · ·	-	operated exclusively					•	/ <b>/</b> 1		
11			nd operated exclusive							or to car	rv out the
	purposes of o	one or more pub	olicly supported organ	nizations	describe	d in sect	ion 509(a	a)(1) or se	ection 50	9(a)(2). Se	
	a ☐ Type I	b ☐ Type								tionally int	tegrated
е	By checking t	his box, I certify	that the organization		•	-		• •		•	_
			ers and other than one								
	or section 509										
f			a written determination	on from	the IRS	that it is	a Type	I, Type	ll, or Ty	oe III sup	porting _
	•	check this box									· · 🗆
g	following pers		he organization accep	oted any	gitt or co	ontributio	n from a	any of the	9		
	= :		ndirectly controls, eitl	her alone	or toget	hor with	noreone	docoribo	dun (u) n	nd l	Yes No
			ody of the supported				beigonia.	uescribe	u III (II) a	11g(i)	163 110
	7 7		on described in (i) abo	-						11g(ii)	
		•	a person described in		above?					11g(iii)	
h		-	on about the support							<u> </u>	<b>.</b>
(1)	Name of supported organization	(iı) EiN	(iii) Type of organization (described on lines 1–9 above or IRC section	(iv) Is the organization in col (i) listed in your governing document? (v) Did you notify the organization in col (i) of your support?		nization in of your	organiza (i) organi	Is the tion in col ized in the S ?	on in col suppo led in the		
			(see instructions))	Yes	No	Yes	No	Yes	No	-	
(A)								1			
<del></del>									ļ		
(B)											
(C)											
(D)											
(E)											
									<u>"</u>		

supported organization

18

Schedule A (Form 990 or 990-EZ) 2013 Page 2 Part II Support Schedule for Organizations Described in Sections 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 (or fiscal year beginning in) (a) 2009 (b) 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total Gifts, grants, contributions, membership fees received. (Do not include any "unusual grants.") . Tax revenues levied organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3. . . . 5 The portion of total contributions by each person (other unıt governmental or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . . . Public support. Subtract line 5 from line 4. Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (f) Total (e) 2013 7 Amounts from line 4 . 8 Gross income from interest, dividends. payments received on securities loans. rents, royalties and income from similar sources . . . . . . . . . 9 Net income from unrelated business activities, whether or not the business is regularly carried on . . . . . 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) 大阪 巻 あんり Total support. Add lines 7 through 10 11 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 section 501(c)(3) П Section C. Computation of Public Support Percentage 14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 14 % % 15 Public support percentage from 2012 Schedule A, Part II, line 14 15 16a 331/3% support test - 2013. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization . . . . . . . . . 331/3% support test - 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2013. 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 gualifies as a publicly supported organization . . . . . . . . . . . 

10%-facts-and-circumstances test - 2012. 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

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

.

### Part III

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.

If the organization fails to qualify under the tests listed below, please complete Part II.)

	If the organization fails to qualify	under the tes	its listed belo	w, please co	mplete Part I	1.)			
	on A. Public Support	- <del>-</del>							
Calen	dar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total		
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") Gross receipts from admissions, merchandise	38,485	7,968	12,637	8,379	8,804	76,273		
3	sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an	165,105	45,559	23,883	16,826	8,850	260,223		
	unrelated trade or business under section 513	229	o	ol	10,748	12,430	23,407		
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0		
5	The value of services or facilities furnished by a governmental unit to the organization without charge	. 0	o	0	0	0	0		
6	Total. Add lines 1 through 5	203,819	53,527	36,520	35,953	30,084	359,903		
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .	0	o	0	0	0	0		
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								
_	Add lines 7a and 7b	0	0	0	0	0			
8 8	Public support (Subtract line 7c from line 6.)		0	0	0	0	0		
Secti	on B. Total Support								
Calen	dar year (or fiscal year beginning in) ▶	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total		
9	Amounts from line 6	203,819	53.527	36,520	35,953	30,084	359,903		
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	468	230	26	161	9	749		
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0	0	0	0	0	0		
С	Add lines 10a and 10b	468	230	26	16	9	749		
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	0	0	0	0	0	0		
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	0	0	0	0	0.	0		
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)	204,287	53,757	36,546	35,969	30,093	360,652		
14	First five years. If the Form 990 is for the organization, check this box and stop he	ne organization		d, third, fourth			n 501(c)(3)		
Secti	on C. Computation of Public Support	rt Percentage	9						
15	Public support percentage for 2013 (line	<del>_</del>		3, column (f))		15	99 %		
16	Public support percentage from 2012 Sc		-			16	99 %		
	on D. Computation of Investment In			· · · · · · · · · · · · · · · · · · ·					
17	Investment income percentage for 2013			y line 13, colur	nn (f))	17	1 %		
18	Investment income percentage from 2013					18	1 %		
19a	331/2% support tests-2013. If the organ					ore than 331/39/			
	17 is not more than 331/8%, check this box	and stop here.	The organization	on qualifies as a	a publicly suppo	orted organization	on . ▶ 🗸		
b	331/a% support tests—2012. If the organization 18 is not more than 331/a%, check this						31/3%, and		
20									

Schedule A (F	Form 990 or 990-EZ) 2013	ige 4
Part IV	<b>Supplemental Information.</b> Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; are Part III, line 12. Also complete this part for any additional information. (See instructions).	nd
<del> </del>		
	<u> </u>	
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#### SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

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

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

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

Open to Public Inspection

Internal Revenue Service Name of the organization Employer identification number Reading Civic Opera Society, Inc. (DBA Reading Civic Theatre) 23-6394242 Line 8 - Other revenue: Refund of overpayment of AACT membership fees - \$45; Refund of deposit for "Les Miserables" royalties from MTI -\$350; Shared payment for piano tuning for production of "Another Time" from Brett Buckwalter - \$250 -- Total for this line item - \$1,324 Line 10 - Grants and similar amounts paid: \$650 to 3 of the 4 scholarship winners (4th paid directly by Reading Musical Foundation). Quinn Corcoran: \$350; Joshua Sell: \$150; John Williams: \$150. Line 16 - Other expenses Insurance for building, contents, liability - \$6,891; Social activity expense (fee for use of local pool facilities for summer picnic) - \$165; Costs for ticketing system - \$1,724; Technical expenses for sound, lighting props for shows that we produced - \$3,242 Theater rental fee - \$475; Musicians for "Jerry's Girls" - \$400; Advertising - \$1,859; Show royalties - \$2,042; Banking fees - \$250 -- these categories totalled \$17,048. Line 24 - Other assets: Value of building - \$120,000; Value of Drops - \$150,000; Value of Props - \$50,000; Value of sets - \$40,000; Value of Costumes - \$20,000; Value of office furniture, building contents (non-scenery) and shop tools - \$49,943 -- total value of these items: \$309,943