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### Form 990

Change of Accounting Period

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2013

Department of the Treasury Internat Revenue Service

Governance

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Revenue

19

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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 and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>. Open to Public Inspection For the 2013 calendar year, or tax year beginning 2013, and ending 6/30 2014 Employer Identification Number Check if applicable Hancock County Performing Arts Center X Address change 46-0912382 336 West Foulke Avenue Telephone number Name change Findlay, OH 45840 Initial return 419-423-2787 Terminated G Gross receipts \$ 6.534.599 Amended return H(a) is this a group return for subordinates F Name and address of principal officer Application pending Edward H. Reading, Yes No H(b) Are all subordinates included? If 'No,' attach a list' (see instructions) No Same As C Above X 501(c)(3) Tax-exempt status 501(c) ( ) ◀ (insert no.) 4947(a)(1) or Website: ► http://findlayforthearts.org H(c) Group exemption number X Corporation Trust L Year of formation 2012 M State of legal domicile Form of organization Association Part I Summary Briefly describe the organization's mission or most significant activities The Organization (1) fosters the development of an appreciation for the dramatic, dance, and musical arts in and around the Hancock County, Ohio community; (2) fulfills the community's artistic obligations with a focus on the highest possible standards of performance; and (3 Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 6 7a Total unrelated business revenue from Part VIII, column (C), line 12 7 a 0. b Net unrelated business taxable income from Form 990-T, line 34 7 h 0. **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) 6,532,674. 9 Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d) 1.925 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

	<b>12</b> To	otal revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	6,534,599
	<b>13</b> Gr	rants and similar amounts paid (Part IX, column (A), lines 1-3)	
	<b>14</b> Be	enefits paid to or for members (Part IX, column (A), line 4)	
	<b>15</b> Sa	alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	46,272
JSe:	<b>16a</b> Pr	ofessional fundraising fees (Part IX, column (A), line 11e)	
Kpei	<b>b</b> To	otal fundraising expenses (Part IX, column (D), line 25) ▶	
ú	<b>17</b> Ot	her expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,238,360
	<b>18</b> To	otal expenses Add lines 13-17 (must equal Par IX Column (A) line 25)	1,284,632

MAY 2 0 2015 Total assets (Part X, line 16) 5,249,967 0. ٣. 21 Total liabilities (Part X, line 26) 0 0. Net assets or fund balances Subtract line 21 from line 20 0. 5,249,967.

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Part II   Signature Block	Tare II Dignatare Block
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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 Decial	tion of preparer (other train officer) is based on an information of which preparer has any knowledge	
Sign Here	Edward H. Reading, Jr. Chair Type or print name and title	ste 5-15-2015
Paid Preparer	Patrick A. Sadowski Patrick A. Sadowski 5-15-2015  Firm's name Eastman & Smith Ltd.	
Use Only	Toledo, OH 43699-0032	Firm's EIN > 34-4404967  Phone no (419) 241-6000
May the IRS	discuss this return with the preparer shown above? (see instructions)	X  Yes  No

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Revenue less expenses Subtract line 18 from lin

TEEA0113L 11/08/13

Beginning of Current Year

Form 990 (2013)

46,272.

5,249,967. **End of Year** 

orm 9	90 (2013) Hancock County Performing Arts Center	46-0	91 <u>2</u> 38	2	Р	age 2
Part						
	Check if Schedule O contains a response or note to any line in this Part III					X
	riefly describe the organization's mission.					
<u>s</u>	ee_Schedule_O					
_						
_				<b>-</b>		
2 D	old the organization undertake any significant program services during the year which were not listed on the pric					
	orm 990 or 990-EZ?	,,		Yes	$\overline{X}$	No
	'Yes,' describe these new services on Schedule O		Ш	103	Δ	110
	and the organization cease conducting, or make significant changes in how it conducts, any program ser	vices?		Yes	$\overline{X}$	No
	'Yes,' describe these changes on Schedule O		ليا		•••	
	Describe the organization's program service accomplishments for each of its three largest program servicection 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of thers, the total expenses, and revenue, if any, for each program service reported	ces, as n grants an	neasuro d alloca	ed by e ations t	expen o	ses
A a ((	Code (Expenses \$ 1,156,168. including grants of \$ ) (R	evenue	Ś			
	The organization furthered its exempt purpose by acquiring a thea	tor f	ν <u></u>	+17 -	bac	<i>'</i>
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<u> </u>	Other program services (Describe in Schedule O.)					<del></del>
	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$				)	
	Total program service expenses ► 1,156,168.				<del></del>	
BAA	TEEA0102L 07/02/13			Forn	n 990	(2013)

TEEA0102L 07/02/13

BAA

ait	Translation required schedules		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		<u>X</u>
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? If 'Yes,' complete Schedule D, Part I	6		<u>x</u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		<u>x</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		<u>X</u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		X
0	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		野	
	Did the organization report an amount for land, buildings and equipment in Part X, line 10° If 'Yes,' complete Schedule D, Part VI	11 a	Х	
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? If 'Yes,' complete Schedule D, Part VII	11 b		X
C	Did the organization report an amount for investments — program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		X
	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? If 'Yes,' complete Schedule D, Part IX	11 d	_	X
	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		X
	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)? If 'Yes,' complete Schedule D, Part X	11 f		<u> </u>
	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a		Х
	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13 14a		X
	Did the organization maintain an office, employees, or agents outside of the United States?	144		
t	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? If 'Yes,' complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		_x_
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		X
	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? If 'Yes,' complete Schedule G, Part I (see instructions)	17		Х
	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		X
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		X
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20	-	Х
1	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b	<u> </u>	<u> </u>

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organizations or government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		х
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23		х
24 a	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? If 'Yes,' answer lines 24b through 24d and complete Schedule K If 'No, 'go to line 25a	24a		Х
Ł	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
•	: 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	i	
•	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
ı	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? If 'Yes,' complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27	55	X
	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 current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
١	b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b	! !	Х
	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 direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31	<u> </u>	Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I.	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	b If 'Yes' to line 35a, 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,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note. All Form 990 filers are required to complete Schedule O	38	Х	
BA		Forr	n 990 i	(2013

#### Form 990 (2013) Hancock County Performing Arts Center 46-0912382 Page 5 Part V. Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1 a 0 b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1 b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 1 c (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return X b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2 b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? Х 3 a b If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O 3 h 4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? Х **4** a **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 X 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 b 5 c c If 'Yes' to line 5a or 5b, did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit'any contributions that were not tax deductible as charitable contributions Х 6 a b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6 b 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? X 7 a 7 h b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Х 7 c d If 'Yes,' indicate the number of Forms 8282 filed during the year 7 d $\bar{\mathbf{x}}$ e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 e X f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 f g if the organization received a contribution of qualified intellectual property, did the organization file Form 8899 7 g as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7 h 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. 9a a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9 b 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 11 a b Gross income from other sources (Do not net amounts due or paid to other sources 11 b against amounts due or received from them ) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 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? 13a Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b c Enter the amount of reserves on hand 13 c 14 a X 14a Did the organization receive any payments for indoor tanning services during the tax year?

b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O

14b

Form 990 (2013) Hancock County Performing Arts Center 46-0912382 Page 6 Part Vi Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI X Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year 1 a 10 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. **b** Enter the number of voting members included in line 1a, above, who are independent 10 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other See Schedule O officer, director, trustee or key employee? 2 X 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 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Х 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X 6 Did the organization have members or stockholders? 6 X 7 a 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? Х 7 a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? 7 b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following. a The governing body? Х 8a X b Each committee with authority to act on behalf of the governing body? 8h 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 Х 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes X 10a Did the organization have local chapters, branches, or affiliates? 10 a 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 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a X b Describe in Schedule O the process, if any, used by the organization to review this Form 990 See Schedule O X 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Х c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done See Schedule O 120 Х 13 Did the organization have a written whistleblower policy? 13 X 14 Did the organization have a written document retention and destruction policy? 14 X 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 Х 15a X **b** Other officers of key employees of the organization 15<sub>b</sub> 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 X taxable entity during the year? 16a 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 taken steps to safeguard the organization's exempt status with respect to such arrangements? 16<sub>b</sub> Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. Another's website Other (explain in Schedule O) Own website X Upon request Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. See Schedule 0 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

BAA

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Form <b>990</b> (2013)	Hancock	County	Performing	Arts	Center

46-0912382

Page 7

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

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

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of 'key employee'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees; officers, key employees; highest compensated employees; and former such persons

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

				(C)	)					
(A) Name and Title	(B) Average hours per	ł .	x, ùn		ersor	(E) Reportable compensation from	(F) Estimated amount of other compensation			
	week (list any hours for related organiza tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099 MISC)	related organizations (W 2/1099 MISC)	from the organization and related organizations
(1) Edward H. Reading, Jr.	_ 10 _								_	_
Chair	0	X		Х	_			0.	0.	0.
(2) Ann Buis Vice Chair	5	x		х				0.	0.	0.
(3) William Conlisk	3				_		i			
Secretary	<del></del> -	x		х				0.	0.	0.
(4) Paul Smith	3									<del></del>
Secretary	0	Х		x l				0.	0.	0.
(5) Rodney Walton	3									
Treasurer	0	Х						0.	0.	0.
(6) David Cytlak	3					-				
Director	0	X		_	_		L_	0.	0.	0.
(7) Christopher Ostrander	3	ļ <sub></sub>					1		_	_
Director	0	X					1	0.	0.	0.
(8) Katherine Fell	3	l								
Director	0	X					ļ	0.	0.	0.
(9) Katherine Kreuchauf	3	,						0.	0.	0
Director	3	X			-		-	0.	0,	0.
(10) Myreon Cobb Director	<del> 3</del>	† <sub>x</sub>					ŀ	0.	0.	0.
(11) Patrick Sadowski	3	<u> </u>			_			0.	0.	<u> </u>
Director	15	l x l		ı	Ì			0.	0.	0.
(12)	<b>-</b> -									
(13)										
<u>(14)</u>										

Part VII	Section A. Office	ers, Directors, Trus	tees, I	Key	Em	ıplo	oye	es,	and	d Highest Com	pensated Emp	loyees	S (cont	tinued)
Name and title			Average hours per week (list any	box	, unle cer ar	heck ss pe nd a c	sition more erson directi	than is both	h an tee)	(D)  Reportable compensation from the organization (W-2/1099 MISC)	(E)  Reportable compensation from related organizations (W-2/1099-MISC)	amo con	(F) stimate unt of co	other tion
	hours for related organiza - tions below dotted line)	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	ormer	(W-2/1039 MISC)	(W-2/1033-MISC)	org an	rom the ganization id relate anization	on ed		
(15)														
(16)														
(17)													<del></del>	
(18)														
(19)				-										
(20)				-										<del></del>
(21)														
(22)														<del></del>
(23)														
(24)														
(25)														
1 b Sub	-total								<b>-</b>	0.	0.			0.
c Tota	I from continuation sh	neets to Part VII, Section	n A						<b>•</b>	0.	0.			0.
	I (add lines 1b and 1c)								_	0.	0.			0.
	I number of individuals (  the organization	including but not limited to 0	those I	ısted	abo	ve) v	who	recei	ved	more than \$100,00	00 of reportable comp	ensatio	n	
3 Did	the organization list an	ny <b>former</b> officer, directo	or tru	istaa	kov	, en	anlo	VAA	or h	nahest compensa	ted employee		Yes	No
on li	ne 1a? If 'Yes,' comple	ete Schedule J for such	ındıvıdu	ıal								3		X
the o	organization and relate in individual	ed organizations greater	than \$1	50,0	003	If '\	Yes'	com	plet	e Schedule J for	Hom	4		<u>x</u>
for s	services rendered to the	ne 1a receive or accrue e organization? <i>If 'Yes,</i> '	comper comple	satio	on fr	om dule	any <i>J fo</i>	unre or suc	late ch p	ed organization or erson	ındıvıdual	5		X
1 Com	B. Independent C	ur five highest compensation. Report compensation.	ated inde	epen	den	t co	ntra	ctors	tha	it received more t	han \$100,000 of			
	<u> </u>	(A) ame and business addre					<u> </u>		<u> </u>	Description	)		<b>C)</b> ensati	on
RCM Arc	hitects 322 South	Main Street Findla	v. OH	4584	0					Architectural			61,	593.
		2959 U.S. 23 Alvad								Construction				009.
	•	contractors (including bu		ıted t	o the	ose	liste	d abo	ve)	Mho received more	than	-		
\$100	0,000 of compensation	from the organization	2											

	Check if Schedule O contains a response or note to any	line in this Part VI	IL		П
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributions)  f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a-1f:  h Total. Add lines 1a-1f	6 522 674			
UE C	Business Code	6,532,674.			
PROGRAM SERVICE REVEN	2 a b c d e f All other program service revenue g Total. Add lines 2a-2f				
	Investment income (including dividends, interest and other similar amounts)	1 025	1 025		
	4 Income from investment of tax-exempt bond proceeds	1,925.	1,925.		
	5 Royalties				
OTHER REVENUE	(i) Real (ii) Personal  6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss)	-			
	7 a Gross amount from sales of assets other than inventory  b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss)	-	-		
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 a b Less direct expenses c Net income or (loss) from fundraising events  9a Gross income from gaming activities See Part IV, line 19 a b Less direct expenses b	-			
	c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances  b Less. cost of goods sold  c Net income or (loss) from sales of inventory				
	Miscellaneous Revenue Business Code  11 a  b  c  d All other revenue				
	e Total. Add lines 11a-11d				
	12 Total revenue. See instructions	6,534,599.	1,925.	0.	0.
BAA	TEEA	0109L 07/08/13			Form 990 (2013)

Seci	Check if Schedule O contains a r	esponse or note to any	line in this Part IX	mpiete column (A)	X
	not include amounts reported on lines 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				
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	0.	0.	0.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.1	0.	0.	0.
7	Other salaries and wages	41,801.	37,621.	4,180.	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	4,471.	4,024.	447.	
11	Fees for services (non-employees)				
ā	n Management	1,397.	1,257.	140.	
	Legal	149.	134.	15.	
	Accounting	1,738.	1,564.	174.	<del></del>
	Lobbying		<del></del>		
	Professional fundraising services See Part IV, line 17				
	Investment management fees				
y	Other (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule OSch	628,120.	565,308.	62,812.	
12	Advertising and promotion	29,423.	26,481.	2,942.	
13	Office expenses	2,437.	2,193.	244.	
14	Information technology	2,089.	1,880.	209.	
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
	Conferences, conventions, and meetings	2,956.	2,660.	296.	
20	Interest				
21	Payments to affiliates				
	Depreciation, depletion, and amortization	7 000		700	
	Insurance Other expenses Itemize expenses not	7,282.	6,554.	728.	
24	covered above (List miscellaneous expenses in line 24e if line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
i	AT&T utility relocation	210,589.	189,530.	21,059.	
	AEP utility relocation	158,709.	142,838.	15,871.	
	ACI Construction	126,009.	113,408.	12,601.	
	Bosendorfer Grand Piano	49,400.	44,460.	4,940.	
	e All other expenses	18,062.	16,256.	1,806.	
25	Total functional expenses. Add lines 1 through 24e	1,284,632.	1,156,168.	128,464.	0.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Total liabilities and net assets/fund balances

Page 11 Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (B) End of year (A) Beginning of year 57,517. Cash - non-interest-bearing Savings and temporary cash investments 2 3,298,268. Pledges and grants receivable, net 3 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L. 6 7 Notes and loans receivable, net 8 Inventories for sale or use Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis. 10 a Complete Part VI of Schedule D 1,893,977 b Less accumulated depreciation 10b 10 c 1,893,977 11 Investments - publicly traded securities 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 11 205. 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 0 5,249,967 16 Accounts payable and accrued expenses 17 17 18 18 Grants payable Deferred revenue 19 19 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D Loans and other payables to current and former officers, directors, trustees. key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 23 Unsecured notes and loans payable to unrelated third parties 24 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 0 26 0. Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ X and complete lines 27 through 29, and lines 33 and 34. 27 1,893,978. Unrestricted net assets 28 3,355,989 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here > and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund

BAA

32

33

34

5,249,967. Form 990 (2013)

5,249,967.

32

33

34

0

0.

rolm 990 (2013) Hancock County Periorming Arts Center 4	0-0317387		Га	ige 12
Part XI Reconciliation of Net Assets				
Check if Schedule O contains a response or note to any line in this Part XI				
1 Total revenue (must equal Part VIII, column (A), line 12)	1	6,53	34,5	599.
2 Total expenses (must equal Part IX, column (A), line 25)	2	1,28	34,6	532.
3 Revenue less expenses Subtract line 2 from line 1	3	5,24	19,9	967.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			0.
5 Net unrealized gains (losses) on investments	5			
6 Donated services and use of facilities	6	_		
7 Investment expenses	7			
8 Prior period adjustments	8			
9 Other changes in net assets or fund balances (explain in Schedule O).	9			0.
10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
column (B))	10	5,24	19, <u>9</u>	<u> 367.</u>
Part XII Financial Statements and Reporting				
Check if Schedule O contains a response or note to any line in this Part XII				П
	•		Yes	No
1 Accounting method used to prepare the Form 990 X Cash Accrual Other				
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O				
2 a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		X
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviseparate basis, consolidated basis, or both.	ewed on a			
Separate basis Consolidated basis Both consolidated and separate basis				
<b>b</b> Were the organization's financial statements audited by an independent accountant?		2 b		X
If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sep basis, consolidated basis, or both	parate			
Separate basis Consolidated basis Both consolidated and separate basis				
c If Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the aureview, or compilation of its financial statements and selection of an independent accountant?	ıdıt,	2 c		
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O				
3 a 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?	е	3 a		Х
<b>b</b> If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required or audits, explain why in Schedule O and describe any steps taken to undergo such audits	audit	3 b		
BAA		Form	990	(2013)

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

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

Attach to Form 990 or Form 990-EZ.

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

OMB No 1545 0047

2013

Open to Public Inspection

Employer identification number

Hancock County Performing Arts Center 46-0912382 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) A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii) Enter the hospital's An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) R An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts 9 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). An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or 11 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 c | Type III - Functionally integrated d Type III - Non-functionally integrated **b** | Type II 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 If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? (i) 11 g (i) A family member of a person described in (i) above? 11 g (ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11 g (iii) Provide the following information about the supported organization(s). h (v) Did you notify the organization in column (i) of your support? (vii) Amount of monetary (iii) Type of organization (described on lines 1 9 above or IRC section (iv) Is the organization in column (i) listed in (i) Name of supported organization (II) EIN (vi) is the organization in column (i) organized in the US? support (see instructions)) your governing document? Yes Yes No Yes No No (A) (B) (C) (D) (E) Schedule A (Form 990 or 990-EZ) 2013

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

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.)

Sect	ion A. Public Support						
Caleı begir	ndar year (or fiscal year nning in) ►	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')					6,532,674.	6,532,674.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge		_				0.
4	Total. Add lines 1 through 3	0.	0.	0.	0.	6,532,674.	6,532,674.
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)						0.
6	Public support. Subtract line 5 from line 4		,				6,532,674.
Sec	tion B. Total Support			· · ·			
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2009	<b>(b)</b> 2010	(c) 2011	<b>(d)</b> 2012	<b>(e)</b> 2013	(f) Total
7	Amounts from line 4	0.	0.	0.	0.	6,532,674.	6,532,674.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						0.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ).						0.
11	Total support. Add lines 7 through 10						6,532,674.
12	Gross receipts from related activ	vities, etc (see inst	tructions)			12	0.
13	First five years. If the Form 990 is organization, check this box and	for the organization stop here	n's first, second, thi	rd, fourth, or fifth t	ax year as a section	on 501(c)(3)	► X
Sec	tion C. Computation of Pu	blic Support P	ercentage				
	Public support percentage for 20			e 11, column (f))		14	%
15	Public support percentage from	2012 Schedule A,	Part II, line 14			15	%
16 a	33-1/3% support test — 2013. If and stop here. The organization	the organization of qualifies as a pub	did not check the locality supported or	box on line 13, ai ganization	nd the line 14 is 3	33-1/3% or more,	check this box
	33-1/3% support test — 2012. If and stop here. The organization	n qualifies as a pul	blicly supported o	rganization			- 1
17 a	10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts	meets the 'facts-a	and-circumstances	test, check this	box and stop he	re. Explain in Pai	t IV how
	10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an	meets the 'facts-a id-circumstances' i	and-circumstances test. The organiza	test, check this tion qualifies as	box and <b>stop he</b> a publicly suppor	re. Explain in Pai ted organization	rt IV now the ►
18	Private foundation. If the organi	zation did not che	ck a box on line 1	3, 16a, 16b, 17a	, or 17b, check th	is box and see in	structions

Schedule A (Form 990 or 990-EZ) 2013 Hancock County Performing Arts Center 46-0912382

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)

Sec	tion A. Public Support						
Calend	dar year (or fiscal yr 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 'unusùal grants ')						
2	Gross receipts from admissions, merchandise sold or						
	services performed, or facilities						1
	furnished in any activity that is						
	related to the organization's tax-exempt purpose						
3	Gross receipts from activities						<del></del>
-	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						
5	its behalf						
5	The value of services or facilities furnished by a						
	governmental unit to the				}		
	organization without charge						
	Total. Add lines 1 through 5						
/ a	Amounts included on lines 1, 2, and 3 received from						
	disqualified persons						
b	Amounts included on lines 2						
	and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or						
	1% of the amount on line 13 for the year						
_	Add lines 7a and 7b	····	,		<del></del>		
8	Public support (Subtract line			· · · · · · · · · · · · · · · · · · ·		<del></del>	
	7c from line 6.)						
	tion B. Total Support	(-) 0000	(h) 0010	(-) 0011	(4) 2012	(2) 2012	(A) Total
	dar year (or fiscal yr beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Amounts from line 6				ļ		
iva	Gross income from interest, dividends, payments received						
	on securities loans, rents,						
	royalties and income from similar sources						
b	Unrelated business taxable						
	income (less section 511						
	taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b		· · · · · · · · · · · · · · · · · · ·		<del> </del>		
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly carried on					İ	
12	Other income Do not include		-	<u> </u>	-		
	gain or loss from the sale of capital assets (Explain in						
	Part IV.)						
	Total Support. (Add Ins 9,10c, 11 and 12)						
14	First five years. If the Form 990 organization, check this box and	is for the organiz	ation's first, secoi	nd, third, fourth, o	or fifth tax year as	a section 501(c	c)(3)
					<del></del>		
	Public support percentage for 20			ne 13 column (f)	<u> </u>	15	;   %
	Public support percentage from	•	• • • • •	ric 15, coldinii (i)	,	16	
	tion D. Computation of Inv						<u></u>
<u>Sec</u>	Investment income percentage f				ımn (f))	17	*   %
	Investment income percentage f				(1//	18	<del></del>
	33-1/3% support tests — 2013.				and line 15 is mor	L	
	is not more than 33-1/3%, check	this box and <b>sto</b>	<b>p here</b> . The organ	nization qualifies	as a publicly supp	orted organizati	ion – []
	33-1/3% support tests – 2012. If line 18 is not more than 33-1/3%	6, check this box	and <b>stop here.</b> If	ne organization qu	ualifies as a public	ly supported or	ganization
20	Private foundation. If the organi	zation did not che	eck a box on line	14, 19a, or 19b, o	check this box and	d see instruction	ıs. 🏲 📗

Schedule	A (Form 990 or	· 990-EZ) 2013	Hanco	ock Count	ty Perfo	rming Ar	rts Cent	er 4	6-091238	2 Page	<del>)</del> 4
Part IV	Supplem or 17b; a (See inst	ental Inform nd Part III, li ructions).	nation. Pronne 12. Al	ovide the oso comple	explanatio te this par	ns require t for any a	ed by Part additional	II, line 10 informatio	; Part II, lin n.	e 17a 🗸	
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								<b>. – –</b> – – -			

# SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545 0047

Open to Publice Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

Har	ncock County Performing Arts C	enter		46-0912382	
	+ I Organizations Maintaining Dong	r Advised Funds or Othe	er Similar Fund	s or Accounts.	
	Complete if the organization answ	wered 'Yes' to Form 990,	Part IV, line 6.		,
		(a) Donor advised f	unds	(b) Funds and other accou	nts
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 dorare the organization's property, subject to the			or advised funds	☐ No
6	Did the organization inform all grantees, dono for charitable purposes and not for the benefit impermissible private benefit?	rs, and donor advisors in writir t of the donor or donor advisor,	ng that grant funds or for any other p	can be used only urpose conferring	□ No
D-1					
Par	<u>t'll .</u> Conservation Easements. Complete if the organization ans	wared 'Ves' to Form 990	Part IV line 7		
1	Purpose(s) of conservation easements held by				
1	Preservation of land for public use (e.g., r	` .	_ `` *'	an historically important land are	·a
	Protection of natural habitat	ecreation of education)	<b>_</b>	a certified historic structure	.a
	Preservation of open space	L		a certifica fiistorie structure	
2	· ·	acid a qualified concentration cont	ribution in the form	of a consensation assement on the	
2	Complete lines 2a through 2d if the organization I last day of the tax year	ield a qualified conservation cont	ribution in the form	of a conservation easement on the	
	•			Held at the End of the	Tax Year
	Total number of conservation easements			2 a	
ı	Total acreage restricted by conservation ease	ments		2 b	
	Number of conservation easements on a certi	fied historic structure included	ın (a)	2 c	
	d Number of conservation easements included i	n (c) acquired after 8/17/06, ar	nd not on a historic		
	structure listed in the National Register	ii (c) acquired after 6/1/700, ar	ia not on a mistoric		
3	Number of conservation easements modified, trantax year ►	nsferred, released, extinguished,	or terminated by the	organization during the	
4	Number of states where property subject to conse	ervation easement is located >			
5	Does the organization have a written policy re and enforcement of the conservation easemer		g, inspection, hand	lling of violations,	No
6	Staff and volunteer hours devoted to monitoring,	inspecting, and enforcing conserv	vation easements du	iring the year	
7	Amount of expenses incurred in monitoring, insper  ▶\$	ecting, and enforcing conservation	n easements during	the year	
8	Does each conservation easement reported o and section 170(h)(4)(B)(II)?	n line 2(d) above satisfy the re	quirements of sect	ion 170(h)(4)(B)(i) Yes	No
9	In Part XIII, describe how the organization reports include, if applicable, the text of the footnote	s conservation easements in its r to the organization's financial s	evenue and expense statements that des	e statement, and balance sheet, an scribes the organization's accour	d nting for
Pa	conservation easements  TIME Organizations Maintaining Colle Complete if the organization ans	ections of Art, Historical wered 'Yes' to Form 990,	Treasures, or C Part IV, line 8	Other Similar Assets.	
1	a If the organization elected, as permitted unde art, historical treasures, or other similar assets hi in Part XIII, the text of the footnote to its final	r SFAS 116 (ASC 958), not to	report in its revenu	ue statement and balance sheet	works of
	b If the organization elected, as permitted unde historical treasures, or other similar assets held f following amounts relating to these items	r SFAS 116 (ASC 958), to repo	ort in its revenue st	tatement and balance sheet work ance of public service, provide the	ks of art,
	(i) Revenues included in Form 990, Part VIII	, line 1		<b>►</b> \$	
	(ii) Assets included in Form 990, Part X			▶\$	
2	If the organization received or held works of art, amounts required to be reported under SFAS	historical treasures, or other simil 116 (ASC 958) relating to thes	ar assets for financi e items	al gain, provide the following	
	a Revenues included in Form 990, Part VIII, line			►\$	
	b Assets included in Form 990, Part X			<b>►</b> \$	

Schedule b (Form 990) 2013 Hanco	ock County	Performing A	rts Center	46-091	<u> </u>		Page 2
Part III Organizations Mainta	ining Collection	ons of Art, Histo	rical Treasures, o	r Other Similar Ass	ets (c	<u>ontinu</u>	ed)
Using the organization's acquisition items (check all that apply)	, accession, and o				collectio	n	
a Public exhibition		d Loan	or exchange programs				
<b>b</b> Scholarly research		e Other					
c Preservation for future gener	ations						
4 Provide a description of the organiz Part XIII.			_				
5 During the year, did the organiza to be sold to raise funds rather th	tion solicit or rec	eive donations of ar	t, historical treasures,	or other similar assets	Yes	Γ	No
Part IV Escrow and Custodia	l Arrangemen	its. Complete if t	he organization ar				
1 a Is the organization an agent, trus on Form 990, Part X?			·	her assets not included	Yes		No
<b>b</b> If 'Yes,' explain the arrangement	in Part XIII and	complete the follows	ng table		□	L	
2 - 1 - 1		•	J		Amoun	t	
c Beginning balance				1 c			
<b>d</b> Additions during the year				1 d			
e Distributions during the year				1 e			
f Ending balance				1 f			
2a Did the organization include an a	mount on Form 9	990, Part X, line 21?			Yes		No
<b>b</b> If 'Yes,' explain the arrangement	in Part XIII Che	ck here if the explar	ntion has been provide	d in Part XIII			]
		<del></del>					
Part V Endowment Funds. C	omplete if the	organization an			1		
	(a) Current year	(b) Prior year	(c) Two years bad	ck (d) Three years back	(e)	Four year	s back
1 a Beginning of year balance					ļ		
<b>b</b> Contributions					_		
c Net investment earnings, gains, and losses							
d Grants or scholarships							
<ul> <li>Other expenditures for facilities and programs</li> </ul>							····
f Administrative expenses					ļ		
<b>g</b> End of year balance							
2 Provide the estimated percentag	e of the current y	ear end balance (lin	ie 1g, column (a)) held	l as·			
a Board designated or quasi-endown	nent ►	8					
<b>b</b> Permanent endowment	%	_					
c Temporarily restricted endowmer		<sup>%</sup>					
The percentages in lines 2a, 2b,	and 2c should e	qual 100%					
3 a Are there endowment funds not in a organization by	the possession of	the organization that a	are held and administere	ed for the		Yes	No
(i) unrelated organizations.					3a(i)		
(ii) related organizations					3a(ii)		
<b>b</b> If 'Yes' to 3a(II), are the related	organizations list	ed as required on So	chedule R?		3b		
4 Describe in Part XIII the intende	d uses of the org	anization's endowme	ent funds.				
Part VI Land, Buildings, and							
Complete if the organ	ızatıon answe	red 'Yes' to Forn	n 990, Part IV, line	e 11a. See Form 990	0, Parl	t X, lır	ne 10.
Description of property	(a)	Cost or other basis	(b) Cost or other	(c) Accumulated	(d)	Book va	alue
		(investment)	basis (other)	depreciation			
1 a Land	<u> </u>					6 6 6	
<b>b</b> Buildings	<u> </u>		1,844,577.		1	,844	<u>, 577                                   </u>
c Leasehold improvements	<u> </u>						
d Equipment	<u> </u>		46 -6-				
e Other			49,400. column (B), line 10(c)	L			<u>, 400.</u> , 977.

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Schedule **D** (Form 990) 2013

			<b>、</b>	
Schedule D	(Form 990) 2013 Hancock County Per Investments — Other Securities.	rforming Arts C	enter 46	5-0912382 Page <b>3</b>
	Complete if the organization answered	'Yes' to Form 990		rm 990, Part X, line 12.
	ption of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost of	or end-of-year market value
	al derivatives			
	held equity interests			
(3) Other (A)				
(B)				
<u>(C)</u>			,	
(D)				
(E)				
(F)				
(G)				
(H)				
(1)	n (b) must equal Form 990, Part X, column (B) line 12 )			
			N/A	
I alt viii	Investments — Program Related. Complete if the organization answered	'Yes' to Form 990	, Part IV, line 11c. See Fo	rm 990, Part X, line 13.
	(a) Description of investment type	(b) Book value	(c) Method of valuation. Cost	or end-of-year market value
(1)				
(2)				
(3) (4)				
(5)				
(6)			-	
(7)				
(8)				
(9)				
(10)	n (b) must equal Form 990, Part X, column (B) line 13)			<del></del>
Part IX	Other Assets.	<u> </u>	<del> </del>	
	Complete if the organization answered		, Part IV, line 11d. See Fo	rm 990, Part X, line 15.
(1)	(a) De	scription		(b) Book value
(1) (2)		<del></del>		
(3)		<del>- · · •</del>		
(4)				
(5)				
(6) (7)				
(8)				
(9)				
(10)				
	lumn (b) must equal Form 990, Part X, column (	B), line 15 )		<u> </u>
Part X	Other Liabilities. Complete if the organization answered 'Yes' to F		e or 11f. See Form 990, Part X, I	ine 25
(1) Feder	(a) Description of liability ral income taxes	(b) Book value	<del> </del>	1
(2)	ar meeme taxes			1
(3)				
(4)				'
(5)				
(6) (7)			<del>-  </del>	· ·
(8)				
(9)				
(10)				
(11)				
Total. (Colum	nn (b) must equal Form 990, Part X, column (B) line 25 )	<u> </u>		

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.

Schedule D (Form 990) 2013 Hancock County Performing Arts	Center	46-0912382	Page 4
Part XI Reconciliation of Revenue per Audited Financial State	ments With Revenu	ie per Return. N/A	
Complete if the organization answered 'Yes' to Form 99	90, Part IV, line 12a	•	
1 Total revenue, gains, and other support per audited financial statements		1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12.			
a Net unrealized gains on investments	2a		
<b>b</b> Donated services and use of facilities	2 b		
c Recoveries of prior year grants	2 c		
d Other (Describe in Part XIII )	2 d		
e Add lines 2a through 2d	\ <del>-</del>	2 e	
3 Subtract line 2e from line 1		3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1.	1 1		
a Investment expenses not included on Form 990, Part VIII, line 7b	4 a		
<b>b</b> Other (Describe in Part XIII )	4 b		
c Add lines 4a and 4b	<u> </u>	4 c	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line	: 12)	5	
Part XII   Reconciliation of Expenses per Audited Financial Stat		ises ner Return. N/A	
Complete if the organization answered 'Yes' to Form 99			
	70, 1 art 14, mic 12a		
1 Total expenses and losses per audited financial statements		1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	ا ء ۔ ا		
a Donated services and use of facilities	2a		
<b>b</b> Prior year adjustments	2 b	<del></del>	
c Other losses	2 c		
d Other (Describe in Part XIII )	2 d	——————————————————————————————————————	
e Add lines 2a through 2d		2 e	· <del></del> -
3 Subtract line 2e from line 1	1 1	3	
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	45		
b Other (Describe in Part XIII )	4 a   4 b		
c Add lines 4a and 4b.	L_79	4c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	ne 18)	5	
Part XIII   Supplemental Information.			
	and 4 Part IV lines 1h a	nd 2h Part V	· · · · ·
Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a a line 4, Part X, line 2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b Als	so complete this part to p	provide any additional informa	ation
BAA		Schedule <b>D</b> (Form	990) 2013

#### **SCHEDULE M** (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

**Noncash Contributions** 

► Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

► Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Employer identification number

2013

Open To Public Inspection

46-0912382 Hancock County Performing Arts Center Part I Types of Property (c) Noncash contribution (a) Check if applicable (b) (d) Method of determining Number of contributions or amounts reported on Form 990, noncash contribution amounts items contributed Part VIII, line 1g Art - Works of art Art - Historical treasures 3 Art - Fractional interests 4 Books and publications 5 Clothing and household goods Cars and other vehicles 7 Boats and planes 8 Intellectual property 9 Securities - Publicly traded 10 Securities - Closely held stock 11 Securities - Partnership, LLC, or trust interests 12 Securities - Miscellaneous Qualified conservation contribution -Historic structures Qualified conservation contribution — Other Real estate - Residential Real estate - Commercial 715,870. Auditor Valuation 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 ► 56,809. Cash Equivalent (Prepaid Capitalized \_) X 1,161,300. Fair Market Value 26 Other > (Prepaid Expenses 27 Other ► 28 Other ► Number of Forms 8283 received by the organization during the tax year for contributions for which the 29 organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 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 30 a purposes for the entire holding period? Х b If 'Yes,' describe the arrangement in Part II 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 X 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell 32 a Х noncash contributions? b If 'Yes,' describe in Part II. 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

Schedule	<b>M</b> (Form 990) 2013	Hancock	County	Performing	Arts Center	46-091238	2 Page <b>2</b>
P.artil.	Supplemental I the organization received, or a c	nformation.  n is reporting ombination	Provide g in Part of both.	the information I, column (b), Also complete	n required by Part the number of co this part for any a	46-091238 II, lines 30b, 32b, and 33, ntributions, the number of additional information.	and whether items
							<b></b> -
	- <b>- </b>		· <b></b> -	<b>-</b>			
				. <b></b>			
					<b></b>		
			- <b>-</b>	<del></del> -			

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Schedule M (Form 990) 2013

#### **SCHEDULE O** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No 1545 0047

Employer identification number

Hancock County Performing Arts Center	46-0912382
Form 990, Part III, Line 1 - Organization Mission	
The Organization (1) fosters the development of an apprec	iation for the dramatic,
dance, and musical arts in and around the Hancock County,	Ohio community; (2)
fulfills the community's artistic obligations with a focu	s on the highest possible
standards of performance; and (3) provides educational pr	ograms and opportunities
for_new_artistic_talent	
Form 990, Part VI, Line 1a - Explanation of Delegated Broad Authority to	Committee
None	
Form 990, Part VI, Line 1a - Explanation of Material Differences of Voting	Rights
NoneNone	
Form 990, Part VI, Line 2 - Business or Family Relationship of Officers, D	Directors, Etc.
Directors Katherine Fell and Myreon Cobb both work for th	e University of Findlay.
Director Rodney Walton works for First Federal Bank, one	of two banks which holds
the organization's deposits.	
Form 990, Part VI, Line 11b - Form 990 Review Process	
The organization's bookkeeper compiles the information ne	cessary to prepare the Form
990. The organization's attorney, Patrick A. Sadowski (w	ho is also a Director),
prepares the Form 990 and circulates the Form 990 to the	Finance Committee for
review and approval. Upon review and approval, the organ	ization files the Form 990
through its attorney.	
Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement	t of Conflicts
Each new member of the Board of Directors reviews the Con	flict of Interest Policy
and signs an acknowledgement. If a Conflict of Interest a	rises with a particular
Director, such Director will be excused from discussion a	bout such conflict (i.e.
physically leave the board room) and recused from any dec	ision-making about such
conflict. This is done pursuant to the organization's Co	nflict of Interest Policy.

TEEA4901L 09/09/2013

Schedule <b>0</b> (Form 990 or 990-EZ) 2013  Name of the organization	Page 2
	Employer identification number
Hancock County Performing Arts Center	46-0912382
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available	
The organization will disclose nonprivileged documents upon re-	quest.
,	
BAA	Schedule <b>O</b> (Form 990 or 990-EZ) 2013

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2013 ·	Schedule O	Schedule O - Supplemental Information							
Client HANCOCKC	Hancock	County Performi	ng Arts Center		46-0912382				
5/13/15			.=		11.03AM				
Form 990, Part IX, Li Other Fees For Serv		(A) Total	(B) Program Services	(C) Management & General	(D) Fund- raising				
Architect Benefactor Group Theater Consulta		561,593. 65,527. 1,000. \$ 628,120.	505,434. 58,974. 900. \$ 565,308.	56,159. 6,553. 100. \$ 62,812.	\$ 0.				