Return of Organization Exempt From Income Tax

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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

A F	or the	2023 calendar year, or tax year beginning $JUL~1$, 2023 and en	nding J	<u>UN 30, 2024</u>	
B (heck if pplicable	C Name of organization		D Employer identifie	cation number
X	Addres	TIMELINE THEATRE COMPANY			
	Name change			36-41974	07
	Initial	,	oom/suite	E Telephone number	
	∃Final _return/	5539 N BROADWAY ST, STE B		773-281-	
	termin- ated			G Gross receipts \$	15,538,108.
	Ameno return	CHICAGO, IL 00040		H(a) Is this a group re	
	Application	F Name and address of principal officer: MICA KAMENSKI		for subordinates	? Yes X No
	pendin	SAME AS C ABOVE		H(b) Are all subordinates in	ncluded? Yes No
17	ax-exe	empt status: $X = 501(c)(3) = 501(c)(3)$ (insert no.) 4947(a)(1) or	527	If "No," attach a	list. See instructions
	Vebsit		_	H(c) Group exemptio	
		organization: X Corporation Trust Association Other	L Year o	of formation: 1997 $ m extbf{ iny}$	∥ State of legal domicile: IL
Pa	art I	Summary			
4	1	Briefly describe the organization's mission or most significant activities: ${f TIMELI}$	INE T	HEATRE COMPA	ANY
ü		PRESENTS STORIES INSPIRED BY HISTORY THAT	CONNE	CT WITH TOD	AY'S
Governance	2	Check this box if the organization discontinued its operations or disposed	d of more	than 25% of its net ass	
o ve	3	Number of voting members of the governing body (Part VI, line 1a)		3	22
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)			19
es es	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)			80
Vitie	6	Total number of volunteers (estimate if necessary)		6	200
Activities &	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	<u></u>		0.
				Prior Year	Current Year
Φ	8	Contributions and grants (Part VIII, line 1h)		6,082,029.	13,038,482.
Revenue	9	Program service revenue (Part VIII, line 2g)		576,853.	2,322,239.
eve	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		11,008.	172,469.
Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-35,650.	-117,357.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		6,634,240.	15,415,833.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
S		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,681,217.	2,046,868.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
xbe	b b	Total fundraising expenses (Part IX, column (D), line 25) 394,769	<u>9. </u>		
Ú		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,077,350.	2,178,822.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,758,567.	4,225,690.
	19	Revenue less expenses. Subtract line 18 from line 12		3,875,673.	11,190,143.
or Sec				ginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)		15,830,341.	27,033,718.
Net Assets or	21	Total liabilities (Part X, line 26)		653,126.	666,678.
	22	Net assets or fund balances. Subtract line 21 from line 20		15,177,215.	26,367,040.
	art II	Signature Block			
		Ities of perjury, I declare that I have examined this return, including accompanying schedules ar		•	knowledge and belief, it is
true	correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which	h preparer l	has any knowledge.	
		Signature of officer		 Date	
Sig				Date	
Her	е	MICA KAMENSKI, EXECUTIVE DIRECTOR Type or print name and title			
			In	Date Check	PTIN
D. '		Print/Type preparer's name Preparer's signature		if L	
Paid		GENEVRA KNIGHT GENEVRA KNIGHT		self-employ	
	arer	Firm's name PORTE BROWN LLC		Firm's EIN 3	6-2663358
use	Only	Firm's address 845 OAKTON STREET		DI. 0.4	7 056 1040
_		ELK GROVE VILLAGE, IL 60007		Phone no. 8 4	7-956-1040
Mα	/ tne IF	S discuss this return with the preparer shown above? See instructions			X Yes No

Pai	Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:	
	TIMELINE THEATRE COMPANY PRESENTS STORIES INSPIRED BY HISTORY THAT	
	CONNECT WITH TODAY'S SOCIAL AND POLITICAL ISSUES. OUR COLLABORATIVE	
	ORGANIZATION PRODUCES PROVOCATIVE THEATRE AND EDUCATION PROGRAMS THAT	
	ENGAGE, ENTERTAIN, AND ENLIGHTEN.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
	revenue, if any, for each program service reported.	
<u></u>	(Code:) (Expenses \$ 2,672,770 • including grants of \$) (Revenue \$ 2,322,239) •)
	TIMELINE THEATRE WAS FOUNDED IN 1997 WITH A GOAL OF EXPLORING TODAY'S	
	SOCIAL AND POLITICAL ISSUES THROUGH THE LENS OF THE PAST. OVER ITS	
	FIRST 25 YEARS, TIMELINE PRODUCED 84 PLAYS, INCLUDING 11 WORLD	
	PREMIERES AND 39 CHICAGO PREMIERES, THAT EXPLORED COUNTLESS FACETS OF	
	THAT MISSION. FROM LGBTQIA+ (THE NORMAL HEART, BOY) AND JEWISH	
	EXPERIENCES (A SHAYNA MAIDEL, MY NAME IS ASHER LEV) TO ISSUES OF	
	CULTURES INTERSECTING AND INTERTWINING (THE CHINESE LADY, A	
	DISAPPEARING NUMBER, A WALK IN THE WOODS), TO EXPLORATIONS OF PEACE,	
	HUMANITY, POLITICS, AND FAMILY (OSLO, RUTHERFORD AND SON, THE APPLE	
	FAMILY PLAYS), AND THE HISTORICAL ROOTS OF THE BLACK LIVES MATTER	
	MOVEMENT (RELENTLESS, KILL MOVE PARADISE, A RAISIN IN THE SUN),	
	TIMELINE'S RICH PRODUCTION HISTORY HIGHLIGHTS A MIX OF PERSPECTIVES.	
4b	(Code:) (Expenses \$220,075 • including grants of \$) (Revenue \$)
	TIMELINE'S LIVING HISTORY EDUCATION PROGRAM SHARES OUR MISSION AND ART	
	WITH CHICAGO PUBLIC SCHOOLS, ACTIVELY ENGAGING STUDENTS THROUGH	
	HIGH-QUALITY ARTS INTEGRATION RESIDENCIES THAT EXPLORE CONNECTIONS	
	BETWEEN HISTORY, ART AND THEIR OWN LIVES. LIVING HISTORY LESSON PLANS	
	CENTER STUDENT IDENTITY AND DEVELOP CRITICAL THINKING AND COMMUNICATION	1
	SKILLS. WORKING CLOSELY WITH CPS TEACHERS, THE LIVING HISTORY PROGRAM	
	SERVED OVER 600 STUDENTS IN CLASSROOMS IN THE 2023-2024 SCHOOL YEAR.	
	TIMELINE SOUTH IS A UNIQUE ARTS PROGRAM THAT PROVIDES TEENS A SAFE	
	SPACE FOR SELF-EXPRESSION, CREATIVITY, AND ENSEMBLE BUILDING ON THE	
	SOUTH SIDE OF CHICAGO. TEENS HAVE THE OPPORTUNITY TO LEARN CURIOSITY	
	ABOUT AND CONNECTION TO TIMELINE SOUTH IS OFFERED FREE OF CHARGE	
	MONDAY-FRIDAY FOR SIX WEEKS AND FOCUSES ON VOICE, SELF-EXPRESSION,	
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 2,892,845.	
	000	

18550404 251678 10-2011250

Form 990 (2023) TIMELINE THEATRE COMPANY Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
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		X
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> </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
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			\ .
	or in 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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		Х	
L	Part VI	11a	Λ	_
D	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	116		x
•	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	11b		
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
Ч	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	110		
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes." complete			
	Schedule D, Parts XI and XII	12a	X	
b	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
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> X</u>
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			٠,,
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u> </u>
16	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		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			v
10	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	10	Х	
10	1c and 8a? If "Yes," complete Schedule G, Part II	18	77	_
19	·	19		x
20-2	complete Schedule G, Part III	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II	21		х
	, the first conduction of the			

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Form 990 (2023) TIMELINE THEATRE COMPANY

Part IV Checklist of Required Schedules (continued)

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part X, column (A), line 27 if "Yes," complete Schedule (, Part) and if Yes, complete Schedule () and the organization current and former offices, directors, frustees, eye employees, and highest compensation of the organization current and former offices, directors, frustees, eye employees, and highest compensation demonstrates () and 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 way, that was issued after December 31, 2002? If "Yes," answer lines 240 through 24d and complete Schedule K If "No." go to line 25a. 24a Did the organization have at ax-exempt bond issue with an outstanding at any time during the year? 24b Did the organization aware that it may proceed of tax-exempt bonds beyond a temporary period exception? 24c Did the organization any proceeds of tax-exempt bonds beyond a temporary period exception? 24d Did the organization any proceeds of tax-exempt bonds beyond a temporary period exception? 24d Did the organization any proceeds of tax-exempt bonds beyond a temporary period exception? 24d Did the organization any proceeds of tax-exempt bonds beyond a temporary period exception? 25d Section 50(16), 50(16), 40(16), 40 and 50(16)29) organizations. Did the organization engage in an excess benefit that action with a disqualified person in a prior year, and that the transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part II 25b Shedule L, Part II 25c Shedule L, Part II 25c Shedule L, Part II 25d Did the organization exported on any of the organization prior Former officer, director, frustee, key employee, control or former officer,		Continued)		Yes	No
Part X. column (A), line 2? (if Yes, *complete Schedule I, Parts Land III 20 Did the organization supered the Schedule I, 2 to 1 Fast VI), School A, Ind. 3.4, a.15, about compensation of the organization supered and former officers, directors, trustees, key employees, and highest compensated employees? If Yes, *complete Schedule I, Part VI 24 Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the list day of the year, that was issued after becember 37, 2002? If Yes, *carsyer inex 2bb through 2bd and complete Schedule K. If Yes, *go to lib the organization unvest any proceeds of tax exempt bonds beyond a temporary period exception? 24b	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		163	140
23 Did the organization answer "Yes" to Part VII, Section A, Irin 3, 4, or 5, about compensation of the organization sourent and former officers, directors, trusteses, key employees, and highest compensated employees? 24 Did to the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the list day of the year, that was issued after December 31, 2002? 25 Pi "Yes," answer lines 24b through 24d and complex Schedule K. If "No," yo to line 25a 26 Did the organization minimal man resorve account of the than a refunding scrow at any time during the year to defease any tax-exempt bonds? 26 Did the organization manifarian an escrow account of the than a refunding scrow at any time during the year to defease any tax-exempt bonds? 27 Did the organization are as an "on behalf of issuer for bonds outstanding at any time during the year to defease any tax-exempt bonds? 28 Section \$5(16)\$, \$501(49)4, and \$501(49)80 organizations. Did the organization are gain an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L. Part I 28 Section \$5(16)\$, \$501(49)4, and \$501(49)80 organizations. Did not complicate organization are some that the transaction has not been reported on any of the organization spot for Forms 990 or 960-E27 If "Yes," complete Schedule L. Part II 28 Did the organization provide a garnt or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or 938 controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L. Part III 28 Was the organization provide a garnt or other assistance to any current or former officer, director, trustee, key and the propose or trustee, in the following parties? (See the Schedule L. Part III 28 Was the organization to exercity trustee, exercity or the following parties? (See the Schedule L. Part III 28 A C A 39% controlled entity of one or more i			22		х
and former officers, directions, fustees, key employees, and highest compensated employees? If "Yes," complete Schedule I, Part IV. 23	23				
Schedule / Late day of the year, that was issued after December 31, 2002? // "Yea," answer lines 24b through 24d and complete Schedule K. If "No." go to line 25e. 5 Did the organization marks any proceeds of tax-exempt bonds beyond a temporary period exception? C Did the organization marks any proceeds of tax-exempt bonds beyond a temporary period exception? C Did the organization marks any proceeds of tax-exempt bonds beyond a temporary period exception? C Did the organization marks any proceeds of tax-exempt bonds beyond a temporary period exception? 24d					
24a Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24th through 24th and complete Schedule K. If "No," go to line 25a Did the organization markstan an escrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds? 24d Did the organization markstan an escrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds? 25a Section 501c(x)3, 501c(x)4, and 501c(x)20 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 Section 501c(x)3, 501c(x)4, and 501c(x)20 organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction with a disqualified person during the year? b is the organization export any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officar, director, trustee, key employee, creator or founder, substantial contributor, or 35% Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officar, director, trustee, key employee, creator or founder, substantial contributor, or 35% Consider the controlled entity or family mamber of any of threes persons? If "Yes," complete Schedule L, Part II 25b X 27 Did the organization provide a grant or other assistance to any current or former officar, director, trustee, key employee, creator or founder, substantial contributor? If "Yes," complete Schedule L, Part IV, instructions for applicable filing threefolds, conditions, and exceptions; a A current or former officer, director, trustee, key employee, creator or founder, substantial contributor? If "Yes," complete Schedule II, Part IV, IP "Yes," complete Schedule I		, · ·	23		Х
Schedule K. If "No." yo to fire 25a	24a				
Schedule K. If "No." yo to fire 25a		last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any taxe-empt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c/3), 501(c/4), and 501(c/20) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part I 25a X b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organizations prior Forms 980 or 990-EZ7 If "Yes," complete Schedule I, Part I 25b X 25b X 27 Did the organization provide a grant or other assistance to any current or former officer, director, fustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 55% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule I, Part II 127 28 Was the organization apporty to a business transaction with one of the following parties? (See the Schedule I, Part II 127 28 Was the organization apporty to a business transaction with one of the following parties? (See the Schedule I, Part II 127 29 Did the organization receive more than \$25,000 in noncest contributions? If "Yes," complete Schedule I, Part II 128 29 Did the organization receive more than \$25,000 in noncest contributions? If "Yes," complete Schedule I, Part II 128 29 Did the organization receive more than \$25,000 in noncest contributions? If "Yes," complete Schedule II 24a II 127 29 Did the organization receive more than \$25,000 in noncest contributions? If "Yes," complete Schedule II 24a II 127 29 Did the organization receive more than \$25,000 in noncest contributions? If "Yes," complete Schedule II 24a II 127 29 Did the organization receive and the summary of the organization conduction or			24a		X
any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 28a Section 501(c/3), 501(c/4), and 501(c/23) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? #1 'Yes," complete Schedule 1, Part I 25a X 25a X 25a	b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 255 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yea," complete Schedule I, Part I 25a	С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I "Yes," complete Schedule L, Part II "Yes," complete Schedule M "Yes," comp					
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule I., Part I			24d		
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization spiror Forms 980 or 990 E27 "Pres," complete Schedule L, Part I 250 bit the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 26	25a				37
that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? // "Yes," complete Schedule L, Part I			25a		<u> </u>
Schedule L, Part I 25b X 26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, futstee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 27 Did the organization provide a grant or other assistance to any current or former officer, director, futstee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, futstee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV, 28b X b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV, 28b X c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV, 28b X 29 Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or the similar assets or, qualified conservation contributions? If "Yes," complete Schedule II, Part II 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule II, Part II 31 Did the organization selic schedule II, Part II III III III III III III III III II	b				
Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, frustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II		, ,	051		v
controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 27 X 26 X 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 X 28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV. instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV. b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV. 28a X 28b X 28a X 28 Y 29a Y 29b Y 29c Yes," complete Schedule L, Part IV. 29c Yes," complete Schedule L, Part IV. 29c Y 29c Y 29c Y 30 Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M. 29c Y 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. 30 Did the organization one collection 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. 31 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1 32 Did the organization have a controlled entity within the meaning of section \$12(b)(13)? If "Yes," complete Schedule R, Part V, Iine 2 32 Did the organization on doubted. R, Part V, Iine 2 33 Did the organization on Part V, Iine 2 34 Did the organization on Part V, Iine 2 35 Did the organization on Part V, Iine 2 36 Section \$01(c	06	, , , , , , , , , , , , , , , , , , ,	250		
controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 26	26				
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entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III. Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable fling thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV. 28a X. b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV. 28b X. c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV. 28c X. 'Yes," complete Schedule M. 30 If the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M. 30 If the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I. 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II. 32 If 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 II, III, or IV, and Part V, Iine 1 33 If the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part III, III, or IV, and Part V, Iine 1 34 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, Iine 2 35 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-					
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Form 990 (2023) TIMELINE THEATRE COMPANY

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

					Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	1				
	filed for the calendar year ending with or within the year covered by this return	2a	80			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retur		•	2b	х	
За	5.11			3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule			3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other a					
	financial account in a foreign country (such as a bank account, securities account, or other financial a		•	4a		Х
b	If "Yes," enter the name of the foreign country		,			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccour	its (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	ction?		5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5с		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the					
	any contributions that were not tax deductible as charitable contributions?			6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ons o	r gifts			
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set	rvices	provided to the payor?	7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	X	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as req	uired			
	to file Form 8282?	 T		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit c		:t?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr			7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by tr	e	_		
_				8		
9	Sponsoring organizations maintaining donor advised funds.			0-		
a b	Did the constraint and in the contract of the			<u>9a</u> 9b		
10	Section 501(c)(7) organizations. Enter:			อม		
а	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:		l			
	Gross income from members or shareholders	11a				
	Gross income from other sources. (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041	?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	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				
С	Enter the amount of reserves on hand	13c				
14a				14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu			14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune					
	excess parachute payment(s) during the year?			15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investmen	t inco	me?	16		X
	If "Yes," complete Form 4720, Schedule O.					
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac					
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17		
	If "Yes," complete Form 6069.					

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Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response

	to mile da, do, di 100 bilon, decembe tilo directinatariose, processes, di dilanges di contende c. coc metroctione.			
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	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 on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 1			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
-	persons other than the governing body?	7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Fight and the other hands and an hand of the annual school of	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	- 00		
3	organization's mailing address? If "Yes." provide the names and addresses on Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	<u> </u>		21
	(This Section B requests information about policies not required by the internal Revenue Code.)		Yes	No
100	Did the organization have local chapters, branches, or affiliates?	10a	163	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	104		
b	and because the second Heritage and Second S	10b		
110	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	па	21	
		400	Х	
12a	, , , , , , , , , , , , , , , , , , , ,	12a 12b	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	120	- 25	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	40-	Х	
40	on Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Λ	
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?	4-	v	
	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	Х	
40	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			v
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
800	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed IL			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s	only)	avaılal	ole
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	finan	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	MICA KAMENSKI - 773-281-8463			
	5539 N BROADWAY ST, STE B, CHICAGO, IL 60640		200	

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

- 1a 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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

- 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. See the instructions for the order in which to list the persons above.

(A) Name and title	(B) Average	(do	not cl	(C Pos	ition		one	(D) Reportable	(E) Reportable	(F) Estimated
	hours per	box	unles cer an	ss per	son is	s both	n an	compensation	compensation	amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer	Key employee	Highest compensated employee		from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)	other compensation from the organization and related organizations
(1) PATRICK J. POWERS	40.00								_	
ARTISTIC DIRECTOR				X				134,008.	0.	11,080.
(2) MICA KAMENSKI	40.00									
EXECUTIVE DIRECTOR				X				126,875.	0.	0.
(3) JOHN STERLING PRESIDENT	5.00	х		х				0.	0.	0.
(4) ANNE VOSHEL	4.00									
VICE PRESIDENT		Х		Х				0.	0.	0.
(5) BRIAN DOUCE	1.50									
TREASURER		Х		Х				0.	0.	0.
(6) KATE ARIAS	1.50									
SECRETARY		Х		Х				0.	0.	0.
(7) DEBORAH COHEN	1.00									
MEMBER		Х						0.	0.	0.
(8) JOANNE DOBRICK	1.00								_	_
MEMBER		Х						0.	0.	0.
(9) LAWRENCE GILL	1.00									_
MEMBER		Х						0.	0.	0.
(10) MICHAEL KENNEDY	1.00									
MEMBER	1	Х						0.	0.	0.
(11) EILEEN LACARIO	1.00								•	•
MEMBER	1 00	Х				_		0.	0.	0.
(12) SHANDA MCFADDEN	1.00	3,7						0.	0.	0
MEMBER	1.00	Х						0.	0.	0.
(13) WILLIAM OBENSHAIN MEMBER	1.00	Х						0.	0.	0.
(14) ROBERT BARR	1.00	Λ						0.	0.	<u> </u>
MEMBER	1.00	Х						0.	0.	0.
(15) MARIDEE QUANBECK	1.00	Λ						0.	0.	0.
MEMBER	1.00	Х						0.	0.	0.
(16) MITCHELL SABSHON	1.00								•	<u>·</u>
MEMBER		Х						0.	0.	0.
(17) SONDRA HEALY	1.00								31	
MEMBER		Х						0.	0.	0.

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FOIII 990 (2023)			. 0 1 1		-1				30 4137	TO / Tage 9
Part VII Section A. Officers, Directors, Trus	tees, Key Emp	loy	ees,	and	l Hig	ghes	t C	ompensated Employee	s (continued)	
(A)	(B)			(0				(D)	(E)	(F)
Name and title	Average hours per week	box	not cl	ss per	more son i	than o s both or/trus	an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(18) AYISHA TAHIR	1.00								_	_
MEMBER		Х						0.	0.	0.
(19) RICHARD WEINBERG MEMBER	1.00	Х						0.	0.	0.
(20) CONSTANCE WILLIAMS	1.00									
MEMBER		Х						0.	0.	0.
(21) MILDRED LANGFORD MEMBER	1.00	Х						0.	0.	0.
(22) THADDEUS MALIK	1.00									
MEMBER		Х						0.	0.	0.
1b Subtotal								260,883.	0.	11,080.
c Total from continuation sheets to Part VI								0.	0.	0.
d Total (add lines 1b and 1c)								260,883.	0.	11,080.
Total number of individuals (including but not not not not not not not not not no										

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

Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

5 X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
BULLEY & ANDREWS, LLC	GENERAL COMBRACHOR	277 526
1755 W. ARMITAGE, CHICAGO , IL 60622 CONCORD THEATRICALS, 250 WEST 57TH STREET,	GENERAL CONTRACTOR	277,526.
6TH FLOOR, NEW YORK , NY 10107	PLAY LICENSOR	240,563.
2 Total number of independent contractors (including but not limited to those lister	d above) who received more than	

Form **990** (2023)

\$100,000 of compensation from the organization

Form 990 (2023) TIMELIN
Part VIII Statement of Revenue

	C) (D) Revenue excluded from tax under sections 512 - 514
function revenue business	revenue from tax under
1 a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributions) 1 a	300010113 3 12 3 14
b Membership dues c Fundraising events d Related organizations e Government grants (contributions) 1a 1b 1c 421,075. 1d 190,000.	
b Membership dues 1b 1c 421,075. c Fundraising events 1d 1d 190,000.	
c Fundraising events	
d Related organizations	
e Government grants (contributions) 1e 190,000	
2/3	
f All other contributions, gifts, grants, and	
similar amounts not included above 1f 12,427,407.	
g Noncash contributions included in lines 1a-1f	
Business Code	
o 2 a ADMISSIONS 711110 2,322,239. 2,322,239.	
ž o b	
o and c	
d d	
b C C C C C C C C C C C C C C C C C C C	
f All other program service revenue	
g Total. Add lines 2a-2f	
3 Investment income (including dividends, interest, and	
other similar amounts) 172,518.	172,518.
4 Income from investment of tax-exempt bond proceeds	
5 Royalties 489.	489.
(i) Real (ii) Personal	
6 a Gross rents 6a	
b Less: rental expenses 6b	
c Rental income or (loss) 6c	
d Net rental income or (loss)	
7 a Gross amount from sales of (i) Securities (ii) Other	
assets other than inventory 7a	
b Less: cost or other basis	
and sales expenses 7b 49. c Gain or (loss) 7c -49. d Net gain or (loss) -49.	
d Net gain or (loss)	-49.
8 a Gross income from fundraising events (not	
including \$ of	
contributions reported on line 1c). See	
Part IV, line 18	
b Less: direct expenses 8b 122,226.	
c Net income or (loss) from fundraising events -122,226.	-122,226.
9 a Gross income from gaming activities. See	
Part IV, line 19 9a	
b Less: direct expenses 9b	
c Net income or (loss) from gaming activities	
10 a Gross sales of inventory, less returns	
and allowances 10a	
b Less: cost of goods sold 10b	
c Net income or (loss) from sales of inventory	
Business Code	
11 a CONCESSIONS 711110 2,367.	2,367.
11 a CONCESSIONS b MISCELLANEOUS 711110 2,367. 900099 2,013.	2,013.
c c c c c c c c c c c c c c c c c c c	
d All other revenue	
e Total. Add lines 11a-11d 4,380.	
12 Total revenue. See instructions 15,415,833. 2,322,239.	0. 55,112.

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Form 990 (2023) TIMELINE THEATRE COMPANY Part IX Statement of Functional Expenses

Do not in 7b, 8b, 3 1 Gra and 2 Gra inco 3 Gra org inco 4 Be 5 Co tru 6 Color per	Check if Schedule O contains a response of the Check if Schedule O contains a response of the Check if Schedule O contains a response of the Check if Schedule O contains a response of the Check if Schedule O contains a response of the Check if Schedule O contains a response of the Check if Schedule O contains a response of the Check if Schedule O contains and other assistance to domestic organizations of the Check if Schedule O contains and other assistance to domestic organizations. See Part IV, line 22 organizations, foreign governments, and foreign organizations, foreign governments, and foreign organizations, foreign governments, and foreign organizations. See Part IV, lines 15 and 16 organization of current officers, directors, organizations	e or note to any line in t (A) Total expenses 264,752.	-	•	(D) Fundraising expenses
7b, 8b, 3 1 Gra and 2 Gra ind 3 Gra org ind 4 Be 5 Co tru 6 Col per	ants and other assistance to domestic organizations of domestic governments. See Part IV, line 21 ants and other assistance to domestic dividuals. See Part IV, line 22 ants and other assistance to foreign ganizations, foreign governments, and foreign dividuals. See Part IV, lines 15 and 16 anefits paid to or for members ampensation of current officers, directors, stees, and key employees answer and to disqualified sons (as defined under section 4958(f)(1)) and sons described in section 4958(c)(3)(B) and the salaries and wages	(A) Total expenses 264,752.	(B) Program service expenses	Management and general expenses	(D) Fundraising expenses
and 2 Graind 3 Graind 4 Be 5 Contru 6 Con	ants and other assistance to domestic dividuals. See Part IV, line 22 ants and other assistance to foreign ganizations, foreign governments, and foreign dividuals. See Part IV, lines 15 and 16 anefits paid to or for members armpensation of current officers, directors, stees, and key employees and key employees and ganization and included above to disqualified sons (as defined under section 4958(f)(1)) and sons described in section 4958(c)(3)(B) and ther salaries and wages				
2 Graince 3 Graince 4 Be 5 Coottru 6 Coo	ants and other assistance to domestic lividuals. See Part IV, line 22 ants and other assistance to foreign ganizations, foreign governments, and foreign lividuals. See Part IV, lines 15 and 16 anefits paid to or for members ampensation of current officers, directors, stees, and key employees ampensation not included above to disqualified sons (as defined under section 4958(f)(1)) and sons described in section 4958(c)(3)(B) and the salaries and wages		150,012.	69,534.	45,206.
 inc 3 Grador org inc 4 Be 5 Coottru 6 Coot per 	ants and other assistance to foreign ganizations, foreign governments, and foreign dividuals. See Part IV, lines 15 and 16		150,012.	69,534.	45,206.
3 Gra org inc 4 Be 5 Co tru 6 Coo	ants and other assistance to foreign ganizations, foreign governments, and foreign lividuals. See Part IV, lines 15 and 16		150,012.	69,534.	45,206.
org inc 4 Be 5 Co tru 6 Con per	ganizations, foreign governments, and foreign lividuals. See Part IV, lines 15 and 16		150,012.	69,534.	45,206.
inc4 Be5 Cootru6 Cootruper	Inviduals. See Part IV, lines 15 and 16		150,012.	69,534.	45,206.
4 Be5 Cotru6 Coper	mefits paid to or for members mpensation of current officers, directors, stees, and key employees mpensation not included above to disqualified sons (as defined under section 4958(f)(1)) and sons described in section 4958(c)(3)(B) her salaries and wages		150,012.	69,534.	45,206.
5 Cotru6 Coper	mpensation of current officers, directors, stees, and key employees mpensation not included above to disqualified sons (as defined under section 4958(f)(1)) and sons described in section 4958(c)(3)(B) her salaries and wages		150,012.	69,534.	45,206.
tru 6 Cor per	stees, and key employees mpensation not included above to disqualified sons (as defined under section 4958(f)(1)) and sons described in section 4958(c)(3)(B) her salaries and wages		150,012.	69,534.	45,206.
6 Corper	mpensation not included above to disqualified sons (as defined under section 4958(f)(1)) and sons described in section 4958(c)(3)(B)		150,012.	69,534.	45,206.
per	sons (as defined under section 4958(f)(1)) and sons described in section 4958(c)(3)(B)	1 415 501			
-	sons described in section 4958(c)(3)(B) her salaries and wages	1 415 501			
nαr	her salaries and wages	1 415 501	I		
	ı			254 525	0.44 54.0
	nsion plan accruals and contributions (include	1,415,581.	802,086.	371,785.	241,710.
		40 101	00 000	0 406	F 488
	etion 401(k) and 403(b) employer contributions)	42,131.	28,228.	8,426.	5,477. 22,640.
	her employee benefits	163,157.	108,377.	32,140.	22,640.
	yroll taxes	161,247.	100,875.	36,386.	23,986.
	es for services (nonemployees):				
	anagement	200.		200	
	gal	200.		200.	
	counting				
	bbying				
	offessional fundraising services. See Part IV, line 17				
	restment management fees				
_	her. (If line 11g amount exceeds 10% of line 25,	629,645.	416,060.	194,477.	19,108.
	umn (A), amount, list line 11g expenses on Sch 0.)	188,146.	188,146.	171,111	17,100.
	vertising and promotion	64,712.	22,420.	39,285.	3,007.
	fice expenses	20,725.	5,868.	8,200.	6,657.
	ormation technology	20,725.	3,000.	0,2001	0,037
	yalties	470,882.	357,411.	99,571.	13,900.
	cupancyavel	72,657.	55,515.	17,142.	13,300•
	yments of travel or entertainment expenses	7270371	33,3131	17/1124	
	any federal, state, or local public officials				
	inferences, conventions, and meetings	1,350.	875.	475.	
	erest	245.	245.	2,34	
	yments to affiliates				
	preciation, depletion, and amortization	8,763.		8,763.	
	surance	37,392.	12,377.	25,015.	
24 Oth	ner expenses. Itemize expenses not covered ove. (List miscellaneous expenses on line 24e. If a 24e amount exceeds 10% of line 25, column (A), ount, list line 24e expenses on Schedule 0.)	·			
	RODUCTION EXPENSES	530,522.	527,634.	251.	2,637.
	RINTING	92,735.	84,020.	15.	8,700.
	OSTAGE	22,532.	21,459.	508.	565.
	QUIPMENT RENTAL	15,144.	==,===	14,685.	459.
	other expenses	23,172.	11,237.	11,218.	717.
	ral functional expenses. Add lines 1 through 24e	4,225,690.	2,892,845.	938,076.	394,769.
	nt costs. Complete this line only if the organization	, , , , , , , ,	. ,	,	<u> </u>
	orted in column (B) joint costs from a combined				
	icational campaign and fundraising solicitation.				
	eck here if following SOP 98-2 (ASC 958-720)				

Form 990 (2023)
Part X | Balance Sheet

4 5 6 7 8 9 0a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D Less: accumulated depreciation Investments - publicly traded securities Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11 Intangible assets	ormer contial contial content person ed person	officer, director, ntributor, or 35% as cons (as defined on 4958(c)(3)(B) 9,431,366. 288,529.	(A) Beginning of year 3,913,152. 1,450,129. 1,447,827. 4,052. 78,811.	1 2 3 4 5 6 7 8 9	(B) End of year 2,414,601. 13,207,889. 1,936,490. 8,195. 83,525.
2 3 4 5 6 7 8 9 0 a b 1 2 3 4	Savings and temporary cash investments Pledges and grants receivable, net Accounts receivable, net Loans and other receivables from any current or fitrustee, key employee, creator or founder, substaticontrolled entity or family member of any of these Loans and other receivables from other disqualified under section 4958(f)(1)), and persons described in Notes and loans receivable, net Inventories for sale or use Prepaid expenses and deferred charges Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D Less: accumulated depreciation Investments - publicly traded securities Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11 Intangible assets	ormer contial contial contial continued person ed person in section 10a 10b	officer, director, ntributor, or 35% ns ons (as defined on 4958(c)(3)(B) 9,431,366.	Beginning of year 3,913,152. 1,450,129. 1,447,827. 4,052.	2 3 4 5 6 7 8 9	End of year 2,414,601. 13,207,889. 1,936,490. 8,195.
2 3 4 5 6 7 8 9 0 a b 1 2 3 4	Savings and temporary cash investments Pledges and grants receivable, net Accounts receivable, net Loans and other receivables from any current or fitrustee, key employee, creator or founder, substaticontrolled entity or family member of any of these Loans and other receivables from other disqualified under section 4958(f)(1)), and persons described in Notes and loans receivable, net Inventories for sale or use Prepaid expenses and deferred charges Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D Less: accumulated depreciation Investments - publicly traded securities Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11 Intangible assets	ormer contial contial contial continued person ed person in section 10a 10b	officer, director, ntributor, or 35% ns ons (as defined on 4958(c)(3)(B) 9,431,366.	1,450,129. 1,447,827. 4,052.	2 3 4 5 6 7 8 9	13,207,889. 1,936,490. 8,195.
3 4 5 6 7 8 9 0a b 1 2 3 4	Savings and temporary cash investments Pledges and grants receivable, net Accounts receivable, net Loans and other receivables from any current or fitrustee, key employee, creator or founder, substaticontrolled entity or family member of any of these Loans and other receivables from other disqualified under section 4958(f)(1)), and persons described in Notes and loans receivable, net Inventories for sale or use Prepaid expenses and deferred charges Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D Less: accumulated depreciation Investments - publicly traded securities Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11 Intangible assets	ormer contial contial contial continued person ed person in section 10a 10b	officer, director, ntributor, or 35% ns ons (as defined on 4958(c)(3)(B) 9,431,366.	1,447,827. 4,052. 78,811.	3 4 5 6 7 8 9	1,936,490. 8,195. 83,525.
4 5 6 7 8 9 0a b 1 2 3 4	Accounts receivable, net Loans and other receivables from any current or fi trustee, key employee, creator or founder, substate controlled entity or family member of any of these Loans and other receivables from other disqualified under section 4958(f)(1)), and persons described it Notes and loans receivable, net Inventories for sale or use Prepaid expenses and deferred charges Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D Less: accumulated depreciation Investments - publicly traded securities Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11 Intangible assets	ntial control	officer, director, ntributor, or 35% as ons (as defined on 4958(c)(3)(B) 9,431,366. 288,529.	78,811.	5 6 7 8 9	83,525.
4 5 6 7 8 9 0a b 1 2 3 4	Accounts receivable, net Loans and other receivables from any current or fi trustee, key employee, creator or founder, substate controlled entity or family member of any of these Loans and other receivables from other disqualified under section 4958(f)(1)), and persons described it Notes and loans receivable, net Inventories for sale or use Prepaid expenses and deferred charges Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D Less: accumulated depreciation Investments - publicly traded securities Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11 Intangible assets	ntial control	officer, director, ntributor, or 35% as ons (as defined on 4958(c)(3)(B) 9,431,366. 288,529.	78,811.	5 6 7 8 9	83,525.
5 6 7 8 9 0a b 1 2 3 4	Loans and other receivables from any current or fitrustee, key employee, creator or founder, substate controlled entity or family member of any of these Loans and other receivables from other disqualified under section 4958(f)(1)), and persons described it Notes and loans receivable, net Inventories for sale or use Prepaid expenses and deferred charges Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D Less: accumulated depreciation Investments - publicly traded securities Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11 Intangible assets	ormer contial contial contial contial contial continuation of the person of the continuation of the contin	9,431,366. 288,529.		6 7 8 9 10c 11	
7 8 9 0a b 1 2 3	controlled entity or family member of any of these Loans and other receivables from other disqualified under section 4958(f)(1)), and persons described in Notes and loans receivable, net Inventories for sale or use Prepaid expenses and deferred charges Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D Less: accumulated depreciation Investments - publicly traded securities Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11 Intangible assets	e personed personed personed person section se	9 , 431 , 366 . 288 , 529 .		6 7 8 9 10c 11	
7 8 9 0a b 1 2 3	Loans and other receivables from other disqualified under section 4958(f)(1)), and persons described in Notes and loans receivable, net Inventories for sale or use Prepaid expenses and deferred charges Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D Less: accumulated depreciation Investments - publicly traded securities Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11 Intangible assets	10a 10b	9 , 431 , 366 . 288 , 529 .		6 7 8 9 10c 11	
7 8 9 0a b 1 2 3	under section 4958(f)(1)), and persons described in Notes and loans receivable, net Inventories for sale or use Prepaid expenses and deferred charges Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D Less: accumulated depreciation Investments - publicly traded securities Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11 Intangible assets	10a 10b	9 , 431 , 366 . 288 , 529 .		7 8 9 10c 11	
8 9 0a b 1 2 3	Notes and loans receivable, net Inventories for sale or use Prepaid expenses and deferred charges Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D Less: accumulated depreciation Investments - publicly traded securities Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11 Intangible assets	10a 10b	9,431,366.		7 8 9 10c 11	
8 9 0a b 1 2 3	Inventories for sale or use Prepaid expenses and deferred charges Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D Less: accumulated depreciation Investments - publicly traded securities Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11 Intangible assets	10a 10b	9,431,366. 288,529.		8 9 10c 11	
9 0a b 1 2 3	Prepaid expenses and deferred charges Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D Less: accumulated depreciation Investments - publicly traded securities Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11 Intangible assets	10a 10b	9,431,366.		9 10c 11	
0a b 1 2 3	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D Less: accumulated depreciation Investments - publicly traded securities Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11 Intangible assets	10a 10b	9,431,366.		10c	
b 1 2 3	basis. Complete Part VI of Schedule D Less: accumulated depreciation Investments - publicly traded securities Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11 Intangible assets	10 b	288,529.	8,769,692.	11	9,142,837.
1 2 3 4	Less: accumulated depreciation Investments - publicly traded securities Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11 Intangible assets	10 b	288,529.	8,769,692.	11	9,142,837.
1 2 3 4	Investments - publicly traded securities Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11 Intangible assets	 1		8,769,692.	11	9,142,837.
2 3 4	Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11 Intangible assets	1 1				
3 4	Investments - program-related. See Part IV, line 11 Intangible assets	1			ا مد ا	
4	Intangible assets				12	
					13	
5	Other seeds Cas Dort IV line 11			144 4-4	14	
	Other assets. See Part IV, line 11		<u> </u>	166,678.	15	240,181.
6	Total assets. Add lines 1 through 15 (must equal			15,830,341.	16	27,033,718.
7	Accounts payable and accrued expenses			267,095.	17	149,887.
8	Grants payable			000 000	18	100 055
9	Deferred revenue			228,807.	19	129,057.
20					20	
					21	
2						
_						
3	. ,					
4					24	
5						
	·	-	·	157 224	۱ ۵۰	387,734.
						666,678.
.0				033,120.	26	000,070.
		k nere				
7	• • • • • •			1 816 497.	27	1,481,527.
						24,885,513.
.0				20/000/1201	20	21/000/0101
		0, 01100				
9	•				29	
.o						
:1				15,177,215.		26,367,040.
1 2					33	27,033,718.
21 22 23 24 25 26 27 88	3 4 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	Escrow or custodial account liability. Complete P. Loans and other payables to any current or forme trustee, key employee, creator or founder, substate controlled entity or family member of any of these Secured mortgages and notes payable to unrelated Unsecured notes and loans payable to unrelated Other liabilities (including federal income tax, payaparties, and other liabilities not included on lines of Schedule D Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check and complete lines 27, 28, 32, and 33. Net assets without donor restrictions Net assets with donor restrictions Organizations that do not follow FASB ASC 95 and complete lines 29 through 33. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equal Retained earnings, endowment, accumulated incomplete lines assets or fund balances	Escrow or custodial account liability. Complete Part IV of Loans and other payables to any current or former office trustee, key employee, creator or founder, substantial co controlled entity or family member of any of these persor Secured mortgages and notes payable to unrelated third Unsecured notes and loans payable to unrelated third pa Other liabilities (including federal income tax, payables to parties, and other liabilities not included on lines 17-24). Of Schedule D Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. Net assets without donor restrictions Organizations that do not follow FASB ASC 958, check and complete lines 29 through 33. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment Retained earnings, endowment, accumulated income, or Total net assets or fund balances	Escrow or custodial account liability. Complete Part IV of Schedule D Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties 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 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. Net assets without donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances	Escrow or custodial account liability. Complete Part IV of Schedule D Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties 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 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. Net assets without donor restrictions Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances 15, 177, 215.	Escrow or custodial account liability. Complete Part IV of Schedule D Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties 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 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. Net assets without donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances

Par	T 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		<u>,41</u>		
2	2 Total expenses (must equal Part IX, column (A), line 25)			,22		
3	Revenue less expenses. Subtract line 2 from line 1	3		,19		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	<u> 15</u>	,17	7,2	<u> 15.</u>
5	Net unrealized gains (losses) on investments	5			-1	20.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8			-1	98.
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	26	,36	7,0	40.
Pai	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>			X
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.					
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?					X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a					
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both:		l			
	X Separate basis Consolidated basis Both consolidated and separate basis		l			
С	c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,					
	review, or compilation of its financial statements and selection of an independent accountant?				Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the		l			
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required		•			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		
				Form	990	(2023)

332012 12-21-23

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number

TIMELINE THEATRE COMPANY 36-4197407 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 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X 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.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions))

Schedule A (Form 990) 2023 TIMELINE THEATRE COMPANY 36-4197

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.)

Sec	ction A. Public Support		<u>·</u>				
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and	. ,		• •			
	membership fees received. (Do not						
	include any "unusual grants.")	3901186.	3540268.	6078524.	6082029.	13038482.	32640489.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	3901186.	3540268.	6078524.	6082029.	13038482.	32640489.
	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,						
	calumn (f)						8617606.
6	Public support. Subtract line 5 from line 4.						24022883.
	etion B. Total Support						24022003.
		(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	ndar year (or fiscal year beginning in)	3901186.	3540268.	6078524.	6082022	13038482	(f) Total 32640489.
	Amounts from line 4	3301100.	33402000	00705246	0002025	13030402.	52040407.
0	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	5,069.	1,396.	2,901.	11 009	173,007.	193,381.
_	and income from similar sources	3,009.	1,390.	2,901.	11,000.	1/3,00/.	193,301.
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	2 400	640	04 000	2 510	4 200	106 024
	assets (Explain in Part VI.)	3,422.	642.	94,280.	3,510.	4,380.	106,234.
	Total support. Add lines 7 through 10						32940104.
	Gross receipts from related activities,	•	,				,775,656.
13	First 5 years. If the Form 990 is for the	-	st, second, third, f	ourth, or fifth tax y	ear as a section 5	01(c)(3)	
<u> </u>	organization, check this box and stop						
	ction C. Computation of Publi						
	Public support percentage for 2023 (li					14	72.93 %
	Public support percentage from 2022					15	82.52 %
16a	Sa 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and						
	stop here. The organization qualifies as a publicly supported organization						
b	33 1/3% support test - 2022. If the o	•		•		•	
	and stop here. The organization qual	ifies as a publicly s	upported organiza	ition			
17a	10% -facts-and-circumstances test	- 2023. If the orga	anization did not c	heck a box on line	13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the fact	s-and-circumstance	es test, check this	box and stop her	r e. Explain in Part	VI how the organia	zation
	meets the facts-and-circumstances te	st. The organizatio	n qualifies as a pu	blicly supported or	rganization		
b	10% -facts-and-circumstances test	- 2022. If the orga	anization did not c	heck a box on line	13, 16a, 16b, or 1	17a, and line 15 is	10% or
	more, and if the organization meets the	ne facts-and-circum	stances test, chec	ck this box and st	op here. Explain i	n Part VI how the	
	organization meets the facts-and-circu	ımstances test. Th	e organization qua	lifies as a publicly	supported organiz	zation	
18	Private foundation. If the organizatio	n did not check a l	oox on line 13, 16a	a, 16b, 17a, or 17b	, check this box a	nd see instruction	s
						Schedule A	(Form 990) 2023

332022 12-21-23

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

(Complete only if you checked the box on line 10 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.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
78	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						
8	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support	Т	T	T	1	T	1
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6						
10a	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						
11	Net income from unrelated business activities not included on line 10b,						
	whether or not the business is						
10	regularly carried on Other income. Do not include gain						
12	or loss from the sale of capital						
40	assets (Explain in Part VI.)				-		
	Total support. (Add lines 9, 10c, 11, and 12.)				<u> </u>	04(-)(0) - : ::	
14	First 5 years. If the Form 990 is for the	•		•	•		
Se	check this box and stop here ction C. Computation of Publi						
	Public support percentage for 2023 (I			column (fl)		15	%
	Public support percentage from 2022	, (,,	,			16	<u>%</u> %
	ction D. Computation of Inves					, 10	70
	Investment income percentage for 20			ne 13. column (f))		17	%
	Investment income percentage from					18	<u> </u>
	33 1/3% support tests - 2023. If the						
	more than 33 1/3%, check this box ar						
b	33 1/3% support tests - 2022. If the						
	line 18 is not more than 33 1/3%, che						
20	Private foundation If the organization						

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Schedule A (Form 990) 2023

Т..

Part IV | Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	NO
	1		
	2		
	За		
	3b		
	3с		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	7		
	8		
	J		
	9a		
	Ju		
	9b		
	9с		
	10a		
	10b		
_		~ 000)	

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Par	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's offic directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)	ers,		
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one support	ted		
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	пе		
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	_		
800	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
Sec	the supported organization(s). tion D. All Type III Supporting Organizations	1		
	tion 217th Type in capporting organizations		Vaa	No
4	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		Yes	No
1	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	•		
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a	_		
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sect	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instru	ctions).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity	(see instruction	1 <u>s).</u>	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		_
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
h	Did the organization evergise a substantial degree of direction over the policies, programs, and activities of each			

of its supported organizations? *If* "Yes," *describe in* **Part VI** *the role played by the organization in this regard.*332025 12-21-23

Schedule A (Form 990) 2023

Pa	t V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on N	ov. 20, 1970 (explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu		•	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	ally integrated	Type III supporting orga	nization (see
	instructions).	. •		•

Schedule A (Form 990) 2023

Pa	rt V Type III Non-Functionally Integrated 509((a)(3) Supporting Orga	nizations (continu	ued)	. age .
	ion D - Distributions		•		Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported				
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	3	
4	Amounts paid to acquire exempt-use assets			4	
_5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
_6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
		(i)	(ii)		(iii)
Sect	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistribution Pre-2023	ns	Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
a	From 2018				
b	From 2019				
с	From 2020				
d	From 2021				
е	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
<u>h</u>	Applied to 2023 distributable amount				
<u>i_</u>	Carryover from 2018 not applied (see instructions)				
i_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2023 distributable amount				
c	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
	Excess from 2022				
<u> </u>	Excess from 2023				

Schedule A (Form 990) 2023

332028 12-21-23 Schedule A (Form 990) 2023

Schedule A

Identification of Excess Contributions Included on Part II, Line 5

2023

** Do Not File **

*** Not Open to Public Inspection ***

Contributor's Name	Total Contributions	Excess Contributions
KAREN AND JIM FRANK	4,100,000.	3,441,198.
SONIA T. MARSCHAK	2,250,000.	1,591,198.
HELEN AND TIM MEIER	1,000,000.	341,198.
PETER AND ALICIA POND	2,063,679.	1,404,877.
KENNETH JENSEN	2,060,455.	1,401,653.
JUDY AND AL SIMON	930,000.	271,198.
JANICE FEINBERG	825,086.	166,284.
Total Excess Contributions to Schedule A, Part II, Line 5		8,617,606.

Schedule B

(Form 990)

Schedule of Contributors

OMB No. 1545-0047

2023

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

-

TIMELINE THEATRE COMPANY

Employer identification number

36-4197407

Organization type (check one): Filers of: Section: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule ☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Schedule B (Form 990) (2023) Page **2**

Name of organization

Employer identification number

TIMELINE THEATRE COMPANY

36-4197407

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	KAREN AND JIM FRANK 1200 HAMPTONDALE AVE WINNETKA, IL 60093	\$4,100,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	SONIA T. MARSCHAK 2801 OLD GLENVIEW RD APT 462 WILMETTE, IL 60091	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	HELEN AND TIM MEIER 915 LINDEN AVENUE WILMETTE, IL 60091	\$1,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	PETER AND ALICIA POND 2920 N COMMONWEALTH AVE UNIT 8A CHICAGO, IL 60657	\$510,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5_	KENNETH JENSEN 3116 HERITAGE OAKS CIR OAK BROOK, IL 60523	\$\$05,151.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	JUDY AND AL SIMON 843 BLUFF STREET GLENCOE, IL 60022	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

TIMELINE THEATRE COMPANY

36-4197407

(a) No. from Part I (a) No. from Description of noncash property given See instructions.) (b) Comparison of noncash property given See instructions.) (c) FMV (or estimate) (See instructions.) (d) Date received See instructions.) (a) No. from Description of noncash property given See instructions.) (a) No. from Description of noncash property given See instructions.) (a) No. from Description of noncash property given See instructions.)	ved
(a) No. from Part I (b) FMV (or estimate) (See instructions.) (c) FMV (or estimate) (See instructions.) (d) Date receing the second	
No. from Part I (a) No. (b) FMV (or estimate) (See instructions.) (a) No. (b) FMV (or estimate) (See instructions.) (b) FMV (or estimate) (See instructions.) (c) FMV (or estimate) (See instructions.) (d) Date receing the property given (See instructions.)	
(a) No. (b) from Description of noncash property given (c) FMV (or estimate) (See instructions) Date recei	ved
No. (b) FMV (or estimate) (d) From Description of noncash property given (See instructions)	
	ved
(a) No. from Part I (b) FMV (or estimate) (See instructions.) (d) Date recei	ved
(a) No. from Part I (b) See instructions.) (c) FMV (or estimate) (See instructions.) Date recei	ved
(a) No. from Part I (b) FMV (or estimate) (See instructions.) (d) Date recei	
	ved

Schedule B (Form 990) (2023) Page 4 Name of organization **Employer identification number** TIMELINE THEATRE COMPANY 36-4197407 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

(c) Use of gift

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from

Part I

(a) No. from Part I (b) Purpose of gift

(d) Description of how gift is held

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements
Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Inspection

Name of the organization

TIMELINE THEATRE COMPANY

Employer identification number 36-4197407

Pai	Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the								
	organization answered "Yes" on Form 990, Part IV, lir	(a) Donor advised funds	(b) Funds and other accounts						
1	Total number at and of year	(a) Bonor advised funds	(b) i dilas ana otner accounts						
2	Total number at end of year								
3	Aggregate value of grants from (during year)								
4	Aggregate value at end of year								
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advi	sed funds						
_	are the organization's property, subject to the organization's	-							
6	Did the organization inform all grantees, donors, and donor a								
	for charitable purposes and not for the benefit of the donor of								
	impermissible private benefit?		Yes No						
Par	t II Conservation Easements. Complete if the or	ganization answered "Yes" on Form 990,	Part IV, line 7.						
1	Purpose(s) of conservation easements held by the organizati	on (check all that apply).							
	Preservation of land for public use (for example, recrea	ation or education) Preservation o	f a historically important land area						
	Protection of natural habitat Preservation of a certified historic structure								
	Preservation of open space								
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form							
	day of the tax year.		Held at the End of the Tax Year						
а	Total number of conservation easements		2a						
	Number of conservation easements on a certified historic str		2c						
d	Number of conservation easements included on line 2c acqu								
_	on a historic structure listed in the National Register								
3	Number of conservation easements modified, transferred, re-	leased, extinguished, or terminated by the	e organization during the tax						
	year	and the land of							
4	Number of states where property subject to conservation eas	•							
5	Does the organization have a written policy regarding the per violations, and enforcement of the conservation easements in								
6	Staff and volunteer hours devoted to monitoring, inspecting,								
Ū	ctan and relations made develop to memoring, inspecting,	Thanking or violations, and officioning con-	oor valien eacomonic daring the year						
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserva	ation easements during the year						
	3, 1, 3,	3	3						
8	Does each conservation easement reported on line 2d above	e satisfy the requirements of section 170(l	n)(4)(B)(i)						
	and section 170(h)(4)(B)(ii)?		Yes No						
9	In Part XIII, describe how the organization reports conservati	on easements in its revenue and expense	e statement and						
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial statem	ents that describes the						
	organization's accounting for conservation easements.								
Par	t III Organizations Maintaining Collections of		ther Similar Assets.						
	Complete if the organization answered "Yes" on Form	n 990, Part IV, line 8.							
1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its revenue statement	and balance sheet works						
	of art, historical treasures, or other similar assets held for pul	blic exhibition, education, or research in f	urtherance of public						
	service, provide in Part XIII the text of the footnote to its final	ncial statements that describes these iter	ns.						
b	If the organization elected, as permitted under FASB ASC 95	•							
	art, historical treasures, or other similar assets held for public	e exhibition, education, or research in furt	herance of public service,						
	provide the following amounts relating to these items.								
	(i) Revenue included on Form 990, Part VIII, line 1								
2	If the organization received or held works of art, historical tre		al gain, provide						
	the following amounts required to be reported under FASB A		•						
	Revenue included on Form 990, Part VIII, line 1								
	Assets included in Form 990, Part X								
LHA	For Paperwork Reduction Act Notice, see the Instructions	5 IUI FUIII 99U.	Schedule D (Form 990) 2023						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Par	t III Organizations Maintaining C	collections of Ar	t, Hist	orical Tre	asures, o	r Other	Similar	Assets	(contin	ued)	
3	Using the organization's acquisition, accessi	on, and other record	s, check	any of the f	ollowing that	make sig	gnificant u	se of its			
	collection items (check all that apply).										
а	Public exhibition	c	ı 🗌	Loan or excl	nange progra	am					
b	Scholarly research	e	•	Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explain	n how th	ey further th	e organizatio	n's exem	pt purpos	e in Part	XIII.		
5	During the year, did the organization solicit of	r receive donations	of art, his	storical treas	ures, or othe	er similar a	assets				
	to be sold to raise funds rather than to be ma								Yes		No
Par	t IV Escrow and Custodial Arran		te if the	organization	answered "	Yes" on F	orm 990,	Part IV, li	ne 9, or		
	reported an amount on Form 990, Pa										
1a	Is the organization an agent, trustee, custodi	ian, or other intermed	diary for	contribution	s or other as	sets not i	ncluded	_	_		
	on Form 990, Part X?							L	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	llowing t	able:							
									Amount		
	Beginning balance										
	Additions during the year										
е	Distributions during the year										
f	Ending balance								7		
	Did the organization include an amount on F						:y?	L	Yes		No
Par	If "Yes," explain the arrangement in Part XIII.										
rai	t V Endowment Funds Complete if	(a) Current year			(c) Two year		o. (d) Three ye	nare back	(a) Four	voore h	
4.	Danisaria a afronsa habana	(a) Current year	(D) F	Prior year	(C) Two year	IS DACK ((a) Three ye	ais Dack	(e) Four	years L	iaun_
	Beginning of year balance					+					
b	Contributions					+					
C	Net investment earnings, gains, and losses					+					
	Grants or scholarships					+					
е	Other expenditures for facilities										
	and programs					+					
	Administrative expenses										
g	End of year balance		- /!: 4		\						
2	Provide the estimated percentage of the curr	•	•	g, column (a)) neid as:						
a	Board designated or quasi-endowment		_%								
b	Permanent endowment	%									
С		%									
2-	The percentages on lines 2a, 2b, and 2c sho	•	tion the	t ara bald an	d administa	ad for the					
3a	Are there endowment funds not in the posse	ession of the organiza	ation tha	it are neid an	u auminister	ed for the	2		Г	Yes	No
	organization by: (i) Unrelated organizations?								3a(i)		
	(1)								3a(ii)	_	
h	If "Yes" on line 3a(ii), are the related organiza	ntions listed as requir							3b	-	
<i>1</i>	Describe in Part XIII the intended uses of the								SU		
Par	t VI Land, Buildings, and Equipm		WITHELLE	urius.							
	Complete if the organization answere), Part IV	/, line 11a. S	ee Form 990	, Part X, I	ine 10.				
	Description of property	(a) Cost or o		(b) Cost			cumulated	а	(d) Bool	c value	
	2000plion of proporty	basis (investr		basis (reciation	-	,_, 500		
	Land	<u> </u>	•		9,203.				1,209	9,20	3.
	Buildings				0,535.				7,91		
	Leasehold improvements				5,217.	2	14,24			97	
	Equipment				3,209.		61,08			2,12	8.
	Other				3,202.		13,20			•	0.
	. Add lines 1a through 1e. (Column (d) must e		X. line 1						9,142	2 <u>,</u> 83	7.

Schedule D (Form 990) 2023

Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))		
Part VIII Investments - Program Related.		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		

Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B)) Part IX Other Assets

(7)(8) (9)

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(9)	

Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))

Other Liabilities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) OPERATING LEASE LIABILITY	187,734.
(3) REFUNDABLE ADVANCE	200,000.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	387,734.

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2023

Schedule D (Form 990) 2023

SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization Employer identification number 36-4197407 TIMELINE THEATRE COMPANY Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. а Mail solicitations е Solicitation of non-government grants b Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events С g d In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) Yes No Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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Schedule G (Form 990) 2023

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000

		of fundraising event contributions and gro	oss income on Form 990	-EZ, lines 1 and 6b. List e	vents with gross receipt	s greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			STEP INTO	LEHMAN		(add col. (a) through
			TIME	TRILOGY OPEN	6	·
			(event type)	(event type)	(total number)	col. (c))
Revenue						
š	1	Gross receipts	421,075.			421,075.
Ä	_	G. 655 7655 p. 6	, -			,
	2	Less: Contributions	421,075.			421,075.
	_	2000. 0011111111111111111111111111111111				
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
	•	Guar p.1255				
	5	Noncash prizes				
တ္သ	_	Trondair prizes				
nse	6	Rent/facility costs	70,336.	6,076.	16,548.	92,960.
ф	U	Tient/lacinty costs	70,330.	0,010.	10,540.	32,300.
Direct Expenses	7	Food and haverages				
iec	′	Food and beverages				
Ω	۰	Entortainment				
		Entertainment	29,266.			29,266.
		Other direct expenses	- · · · · · ·			122,226.
		Direct expense summary. Add lines 4 through	. ,			-122,226.
Pa	rt I	Net income summary. Subtract line 10 from line II Gaming. Complete if the organization a		900 Part IV line 19 or r		122,220.
		\$15,000 on Form 990-EZ, line 6a.	answered res on rom	1 330, 1 att 10, iiile 13, 01 1	eported more triair	
		φ10,000 011 0111 000 E2, inic oa.		(b) Pull tabs/instant		(d) Total gaming (add
ne			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
Revenue				zgo, progressive zgo		
Вe	_	0				
	_1	Gross revenue				
	_	Cook prizos				
ses		Cash prizes				
Direct Expenses	2	Nonagah prizas				
Ä	3	Noncash prizes				
š	4	Rent/facility costs				
Ö	4	Rent/facility costs				
	_	Other direct expenses				
	3	Other direct expenses	Yes %	Yes %	Yes %	
		Volunteer labor				
	О	Volunteer labor	L No	No	No	
	_	Direct evenes cummen, Add lines 2 through	E in column (d)			
	′	Direct expense summary. Add lines 2 through	i 5 in column (a)			
		Not coming income cummany Cultivact line 7	from line 1 column (d)			
	0	Net gaming income summary. Subtract line 7	rom line 1, column (a)			<u> </u>
c	Ent	ter the state(s) in which the organization condu	cts gaming activities:			
						Yes No
		the organization licensed to conduct gaming ac				res No
Ю	II "	No," explain:				
	-					
10-	\\/.	are any of the organization's demine licenses	wokod guanandad a::±=	rminated during the torre	oar?	Yes No
		ere any of the organization's gaming licenses re	· · · · · · · · · · · · · · · · · · ·			res NO
D	11	Yes," explain:				
	_					

Schedule G (Form 990) 2023

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Sch	edule G (Form 990) 2023 TIMELINE THEATRE COMPANY 50-4	±19/4	: 0 /	Page 3
11	Does the organization conduct gaming activities with nonmembers?	Y	'es	No No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?	Y	'es	☐ No
13	Indicate the percentage of gaming activity conducted in:			
а	The organization's facility	13a		<u>%</u>
	An outside facility	13b		<u>%</u>
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	 Y	'es	☐ No
b	If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount			
	of gaming revenue retained by the third party \$			
С	If "Yes," enter name and address of the third party:			
	Name			
	Name			
	Address			
16	Gaming manager information:			
	Name			
	Gaming manager compensation \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
	Mandatory distributions: Is the organization required under state law to make charitable distributions from the gaming proceeds to			
а	retain the state gaming license?		'es	☐ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	. — -	-	
_	organization's own exempt activities during the tax year \$			
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Pa	rt III, line:	s 9, 9	b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			
				-

Schedule G	(Form 990)	TIMELINE	THEATRE	COMPANY	36-4197407	Page 4
Part IV	G (Form 990) Supplemental Infor	mation (continue	nd)			
		(continue	:u)			
-						
-						
1						

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

2023
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

TIMELINE THEATRE COMPANY

Employer identification number 36-4197407

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

SOCIAL AND POLITICAL ISSUES. OUR COLLABORATIVE ORGANIZATION PRODUCES

PROVOCATIVE THEATRE AND EDUCATION PROGRAMS THAT ENGAGE, ENTERTAIN, AND
ENLIGHTEN.

PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: FORM 990 TIMELINE HAS BEEN AWARDED 60 JEFF AWARDS, HONORING EXCELLENCE IN CHICAGO THEATRE, INCLUDING 11 FOR OUTSTANDING PRODUCTION, AND RECEIVED THE PRESTIGIOUS 2016 MACARTHUR AWARD FOR CREATIVE AND EFFECTIVE INSTITUTIONS, WHICH "RECOGNIZES EXCEPTIONAL NONPROFIT ORGANIZATIONS THAT HAVE DEMONSTRATED CREASTIVITY AND IMPACT, AND INVESTS IN THEIR LONG-TERM SUSTAINABILITY." TIMELINE WAS ALSO NAMED "ONE OF THE NATION'S TOP 10 MOST PROMISING EMERGING PROFESSIONAL THEATRES" IN 2011 BY THE AMERICAN THEATRE WIND, FOUNDER OF THE TONY AWARDS. LOCALLY, TIMELINE CONTINUES TO EMERGE AS A PROMINENT VOICE IN CHICAGO'S VIBRANT ARTS COMMUNITY, LAUDED BY THE CHICAGO TRIBUNE AS A "SAVVY AND GROWING COMPANY, WHERE MORE AND MORE CHICAGOANS HAVE COME, WITH REASON, TRUTH AND INTEGRITY OF THE WORK." THE COMPANY TRUST THE POWER CURRENTLY SERVES APPROXIMATELY 20,000 AUDIENCE MEMBERS ANNUALLY.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

BALANCE AND WELLNESS, AND DEVISING. TIMELINE SOUTH CELEBRATE ITS SIXTH

YEAR WITH AN ARTS PARTNERSHIP AT THE LOGAN CENTER AT THE UNIVERSITY OF

CHICAGO, AND PRESENTED TWO FREE PERFORMANCES OF THE WORLD PREMIERE

PIECE, THE BEREAVED.

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Schedule O (Form 990) 2023

Schedule O (Form 990) 2023 Page 2

Name of the organization

TIMELINE THEATRE COMPANY

Employer identification number 36-4197407

FORM 990, PART VI, SECTION A, LINE 6:

THE CORPORATION SHALL HAVE ONE CLASS OF MEMBERS, WHICH SHALL CONSIST SOLELY
OF PARTICIPANTS IN THE CORPORATION'S COMPANY. THE NUMBER OF ACTIVE MEMBERS
SHALL BE NO LESS THAN FIVE. THE MEMBERS VOTE ON ANY DECISION TO HIRE OR
DISCHARGE THE MANAGING DIRECTOR OR THE ARTISTIC DIRECTOR.

FORM 990, PART VI, SECTION A, LINE 7A:

ANY DECISION TO HIRE OR DISCHARGE THE MANAGING DIRECTOR OR THE ARTISTIC

DIRECTOR SHALL REQUIRE THE SEPERATE AFFIRMATIVE APPROVAL OF A MAJORITY OF

BOTH THE BOARD OF DIRECTORS AND THE ACTIVE MEMBERS.

FORM 990, PART VI, SECTION A, LINE 7B:

MEMBERS ARE RESPONSIBLE FOR SELECTING, STAFFING, AND BUDGETING THE ARTISTIC

PROGRAMMING OF THE CORPORATION. IN ADDITION, THE MEMBERS ARE RESPONSIBLE

FOR THE EDUCATIONAL AND COMMUNITY OUTREACH PROGRAMS OF THE CORPORATION.

FORM 990, PART VI, SECTION B, LINE 11B:

THE ORGANIZATION PROVIDES A DRAFT OF THE 990 TO THE BOARD PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

BOARD OF DIRECTORS ARE REQUIRED TO DECLARE ANY CONFLICTS OF INTEREST AND RE-AFFIRM THE DECLARATION ANNUALLY.

FORM 990, PART VI, SECTION B, LINE 15:

ANNUALLY, THE EXECUTIVE COMMITTEE DETERMINES COMPENSATION LEVELS OF THE TOP

MANAGEMENT OFFICIALS. THE COMMITTEE USES COMPARABILITY DATA TO DETERMINE

COMPETITIVE COMPENSATION AND DOCUMENTS THE COMPENSATION DECISION MAKING

222212 11 14 22

PROCESS AND CONCLUSIONS.

Schedule O (Form 990) 2023	Page 2
Name of the organization TIMELINE THEATRE COMPANY	Employer identification number 36-4197407
	_
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INT	TEREST POLICY, AND
FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST.	
FORM 990, PART IX, LINE 11G, OTHER FEES:	
CONTRACT SERVICES: OTHER :	
PROGRAM SERVICE EXPENSES	124,640.
MANAGEMENT AND GENERAL EXPENSES	194,477.
FUNDRAISING EXPENSES	19,108.
TOTAL EXPENSES	338,225.
	_
CONTRACT SERVICES: DESIGNERS AND DRAMATURGS :	
PROGRAM SERVICE EXPENSES	112,755.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	112,755.
CONTRACT SERVICES: SET CONSTRUCTION:	
PROGRAM SERVICE EXPENSES	42,868.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	42,868.
CONTRACT SERVICES: DIRECTORS AND CHOREOGRAPHERS :	_
PROGRAM SERVICE EXPENSES	41,939.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
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Schedule O (Form 990) 2023	Page
Name of the organization TIMELINE THEATRE COMPANY	Employer identification number 36-4197407
TOTAL EXPENSES	41,939.
CONTRACT SERVICES: SCENIC PAINTERS :	
PROGRAM SERVICE EXPENSES	27,311.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	27,311.
CONTRACT SERVICES: AEA ACTORS:	
PROGRAM SERVICE EXPENSES	20,689.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	20,689.
CONTRACT SERVICES: ASSISTANCE DESIGNERS AND DRAMATURGS:	
PROGRAM SERVICE EXPENSES	20,938.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	20,938.
CONTRACT SERVICES: TECHNICAL STAFF:	
PROGRAM SERVICE EXPENSES	24,920.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	24,920.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	629,645.
FORM 990, PART XII, LINE 2C:	
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Sche	edule O (Form 99	90) 20:	23						Page 2
Nam	ne of the organiza	ation	TIMELINE	THEAT:	RE C	OMPANY		Employer identific	ation number
<u>NO</u>	CHANGES	IN	PROCESSES	FROM	THE	PRIOR	YEAR.		