2022 Filing Instructions MICHIGAN SHAKESPEARE FESTIVAL INC Tax year ending 09-30-2023

Form filed:

Form 990 and supplemental forms and schedules

Filing method:

The return will be e-filed once the signed and dated Form 8879-TE has been received by this office. Do not mail the return to the IRS.

Due date:

08-15-2024

The return reflects neither a refund nor a balance due.

Please note:

The Taxpayer First Act requires tax-exempt organizations to electronically file all information returns in the 990 series and related forms for tax years beginning after July 1, 2019. Mailing these returns is no longer allowed.

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

Open to Public

Department of the Treasury

Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Internal Revenue Service For the 2022 calendar year, or tax year beginning , 2022, and ending 10-01 09-30 , 20 23 В MICHIGAN SHAKESPEARE FESTIVAL INC Check if applicable: C Name of organization D Employer identification number Address change 38-3263395 Room/suite E Telephone number Name change Number and street (or P.O. box if mail is not delivered to street address) Initial return 650 CHURCH STREET 208A (517)998-3673 Final return/terminated City or town, state or province, country, and ZIP or foreign postal code G Gross receipts Amended return PLYMOUTH, MI 48170 385.694 Application pending Name and address of principal officer: JILL BLIXT H(a) Is this a group return for subordinates? SAME AS C ABOVE H(b) Are all subordinates included? X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527 If "No," attach a list. See instructions Tax-exempt status: WWW.MICHIGANSHAKESPEAREFESTIVAL.COM Website: H(c) Group exemption number X Corporation Trust Association Year of formation: M State of legal domicile: Part I Summary Briefly describe the organization's mission or most significant activities: THE MICHIGAN SHAKESPEARE FESTIVAL PRESENTS THE TIMELESS THEMES AND GLORIOUS LANGUAGE OF WILLIAM SHAKESPEARE, BRINGING THEATRICAL Activities & Governance ENTERTAINMENT TO PEOPLE OF MICHIGAN AND SURROUNDING STATES Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 3 10 Number of independent voting members of the governing body (Part VI, line 1b) 10 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 6 25 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 0 Prior Year **Current Year** Contributions and grants (Part VIII, line 1h) 166,054 243,614 Program service revenue (Part VIII, line 2g) 80,960 142,080 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 0 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 247,014 385,694 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 Benefits paid to or for members (Part IX, column (A), line 4) 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 121,733 111,340 Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 224,330 287,551 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 335,670 409,284 19 Revenue less expenses. Subtract line 18 from line 12 (88,656 (23,590)Net Assets or fund Balances **Beginning of Current Year** End of Year Total assets (Part X, line 16) (6,674)(6,445)21 Total liabilities (Part X, line 26) 144,274 168,093 Net assets or fund balances. Subtract line 21 from line 20 (150.948)(174,538)Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge JILL BLIXT Sign Here JILL BLIXT, PRESIDENT Type or print name and title Print/Type preparer's name Preparer's signature Date PTIN Check Paid 12-06-2023 JACLYNN CHERRY self-employed P01361518 **Preparer** Firm's name JACLYNN CHERRY CPA LLC Firm's EIN **Use Only** Firm's address 863 LION STREET Phone no. ROCHESTER HILLS MI 48307

May the IRS discuss this return with the preparer shown above? See instructions

2) MICHIGAN SHAKESPEARE FESTIVAL INC Checklist of Required Schedules Part IV

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
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		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	l _		
•	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
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			
7	·	6		Х
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		
8	the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>	-		Х
0	complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	۰		
5	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		х
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		х
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, Part VI	11a	x	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
	reported in Part X, line 16? 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	· · · · · · · · · · · · · · · · · · ·			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
_	Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
40	"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		Х
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		v
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	140		Х
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			Λ
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? 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 1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19	<u> </u>	х
20 a		20a		х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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

Form 990 (2022) MICHIGAN SHAKESPEARE FESTIVAL INC
Part IV Checklist of Required Schedules (continued)

22 Ib the coganization report more than \$5.000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2° If "Yes," complete Schedule (P arts 1 and IV) and the organization aware from the organization area and former offices, directors, tustees, key employees, and highest componented employees? If "Yes," complete Schedule II, and the second of the last day of the year, that was issued after December 31, 2002? If "Yes," answer fixes 246 through? 246 and complete Schedule K If "Yes," go to line 256 through? 246 and complete Schedule K If "Yes," go to line 256 through? 246 and complete Schedule K If "Yes," go to line 256 through? 246 and complete Schedule K If "Yes," go to line 256 through? 246 and complete Schedule K If "Yes," go to line 256 through? 246 and complete Schedule K If "Yes," go to line 256 through 246 and complete Schedule K If "Yes," go to line 256 through 246 and complete Schedule K If "Yes," go to line 256 through 246 and complete Schedule K If "Yes," go to line 256 through 246 and complete Schedule K If "Yes," go to line 256 through 246 and complete Schedule K If "Yes," go to line 256 through 246 and complete Schedule K If "Yes," go to line 256 through 246 and complete Schedule K If "Yes," go to line 256 through 246 and complete Schedule K If "Yes," go to line 256 through 246 and ching the year? 246 to line 256 section 361 (16), 356 (16), 361 (16), 461 and 361 (16), 361 (16), 461 (16), 361 (16), 461 (16), 361 (16), 461 (16), 361 (16), 461 (16), 361 (16), 461 (16), 361 (16), 461 (16), 361 (16), 461 (16), 361 (16), 461 (16), 361				Yes	No
Part IX. column (A.) line 2º II. "Vest." complete Schedule I. Prant I and III organization answer "Few Part IVI. Section A. Inic 3.4, or 5 about compensation of the upgraization's current and former officers, directors, flustens, by supplyoes, and highest compensated amployees 2º Vest." complete Schedule J. 2 x x 3 x 3 x 3 x 3 x 3 x 3 x 3 x 3 x 3	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
organization's current and former officers, fusiclosis, busileos, key employees, and highest componessibly of "Yes," complete Schedule / a solution of the componessibly of the cognization have a tax-essempt bond sizes with an outstanding principal amount of more than \$100,000 as of the last day of the year. But was less than 3,000 per solution of the solution of the last day of the year. But was less and all the Docember 3,000 per solution of the solution of		Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
and protoposes 2 if "Yes", complete Schedule J. 23 x. 24 All bill the organization have at sex 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? If "Yes," answer times 24b through 24d and complete Schedule K. If "Yes", "po to line 25a. 25b. 25b. 25b. 25b. 25b. 25b. 25b. 25b	23				
24a Did the organization have a lax-exempt bord issue with an outstanding principal amount of more than \$100.000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No." go to line 25s Did the organization invest any proceeds of fax-exempt bonds beyond a temporary period exception? 24d Did the organization invest any proceeds of fax-exempt bonds beyond a temporary period exception? 24d Did the organization and as an in one-brial off issuer for bonds outstanding at any time during the year? 24d Did the organization and as an in one-brial off issuer for bonds outstanding at any time during the year? 24d Did the organization and as an in one-brial off issuer for bonds outstanding at any time during the year? 24d Did the organization and the sam one-brial present of the day of the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported or any of the organization with a disqualified person in a prior year. And that the transaction has not been reported on any of the organization with a disqualified person in a prior year. And that the transaction has not been reported on any of the organization with a disqualified person in a prior year. And that the transaction has not been reported on any of the organization with a disqualified person in a prior year. And that the transaction has not been reported on any of the organization provide 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 for former officer, director, trustee, key employee, creator for organization organization organization and the standard organization o		organization's current and former officers, directors, trustees, key employees, and highest compensated			
s 100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer innex 24b through 24d and conquises Schedule K. If "No.", pos his 9258 to be 10 the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24d bld bld the organization calls an "on behalf of" issuer for bonds outstanding at any time during the year? 24d bld bld the organization and a sin and 501(x)20 organizations. Did the organization are some that the singularition was the tax in tengaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L. Part I 25b Section 501(c)(5), 501(c)(4), 601(c)(4), 6		employees? If "Yes," complete Schedule J	23		x
through 24th and complete Schedule I. If "No." got in the 25a year of the Complete Schedule I. If "No." got in the 25a year of the Complete Schedule I. I and the Complete Schedule I. I and I seemed to the Complete Schedule I. I and I seemed to the Complete Schedule I. I and I seemed to Historical Health I	24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
b Did the organization mirest any proceeds of fax-exempt bonds beyond a temporary period exception? 24b Children or programmation maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24d Children organization and the programmation of the programmation of the organization and the programmation and the programmation with a disqualified person during the year? If "Yes," complete Schedule L. Part I 25a X 25a X 25a		\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defense any tix-exempt broads? 246 d) Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 258 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? If "ves," complete Schedule L. Part I 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 from 590 or 900-EC? If "ves," complete Schedule L. Part I D) 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, trustee, key employee, creator or founder, substantial contributor, or 35% D) 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 between, a grant selection committee member, or to a 35% controlled entity (including an 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 II Was the organization aprevial to a business transaction with one of the following parties (see the Schedule L. Part IV "8. A 35% controlled schedule for any individual described in line 28a? If "Yes," complete Schedule L. Part IV "28a X A 35% controlled schedule for any individual described in line 28a? If "Yes," complete Schedule L. Part IV "28b X A 35% controlled schedule L. Part IV "8. 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 A 35% controlled entity of one or more individuals and/or organizations described in line 28a or		through 24d and complete Schedule K. If "No," go to line 25a	24a		Х
to defease any tax-exempt bonds? 24d 24	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? 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? "I" **Section 501(c)3, 501(c)4), and 501(c)(29) organization specific transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization from Forms 990 or 909-EZ? If "Yes," complete Schedule I, Part I	С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
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 L, Part I 25a x 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-E27 If "Yes," complete 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, trustee, key employee, creator or former officer, director, trustee, key employee, creator or former officer, director, trustee, key employee, creator or former officer, director, trustee, with the property of the organization provide a grant or other assistance to any current or former officer, director, trustee, with the property of the separation of the separation of the separation of the following parties (see the Schedule L, Part III 4). 28 Was the organization aparty 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 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 II, Part IV 28b X 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule II, Part IV 28b X 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule II, Part II 31 X 20 Did the organization ordition of the Assetting of the parties of the parties of the par			24c		
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-E27 # "Yes," complete Schedule L, Part I	d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	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's prior Forms 990 or 990-E27 If "Yes," Complete Schedule I, Part I 28b 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, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member or any of these persons? If "Yes," Complete Schedule I, Part II 26	25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E2? If "Yes," complete Schedule L, Part I		transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
### *Ves." completes Schedule L. Part II #Yes." complete Schedule L. Part IV #Yes. *Yes." complete Schedule L. Part IV #Yes. *Yes. *	b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
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, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member or any of these persons? If I'Ves," complete Schedule L, Part II . 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, a grant selection committee member, or to a 35% controlled entity (including an employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof, a grant selection committee member, or to a 35% controlled entity of circlor, trustee, key employee, creator of founder, or substantial contributor? If "Yes," complete Schedule L, Part IV . 28					
or former officer, director, frustee, key employee, creator or founder, substantial contributor, or 35%. 27 Did the organization provide a grant or other assistance to any current or former officer, director, frustee, 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), 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 and a current or former officer, director, frustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV as A current or former officer, director, frustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV as A six controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV as Six controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV as Six controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV as Six complete Schedule II and II a		·	25b		Х
controlled entity or family member or any of these persons? If "Yes," complete Schedule L, Part II 28	26				
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, or 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 II					
employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a \$5% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part II . 27			26		Х
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 II	27				
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 filing thresholds, conditions, and exceptions): a A current of former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV					
Part IV, instructions, for applicable filling 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 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 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 31 Did the organization on 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 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, line 1 32 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X 35b If "Yes," to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b Variable organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule, R, Part V I 25c Section 501(c)(3) organizations complete Schedule O and provide explanations on Schedule O for Part VI, IIne 1 36c		·	27		X
A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV A Samily member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 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	28				
"Yes," complete Schedule L, Part IV 28b X A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28b X A 55% 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 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? 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 31 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1 33 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 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a Did the organization in the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Iine 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization. Did the organization make any transfers to an exempt non-charitable related organization complete Schedule R, Part V, Iine 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization organization complete Schedule C, Part V, Iine 2 37 Did the organization organization complete Schedule C organization son Schedule O for Part VI, Iines 11b and 19?					
b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 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	а				
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 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I 30 Did the organization liquidate, terminate, or dissolve and cease operations? 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 31 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 32 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 33 L X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35c Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O 38 Did the organization complete Schedule O contains a response or note to any line in thi		· · · · · · · · · · · · · · · · · · ·			
"Yes," complete Schedule L, Part IV 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 X 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 A X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35 Boction 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O 29 Check if Schedule O contains a response or note to any line in this Part V 4 Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 4 Se No 4 Did the organization comply with backup withh			28b		X
Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M conservation contributions? If "Yes," complete Schedule M 30 x 31 Did the organization receive contributions? If "Yes," complete Schedule M 30 x 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 x 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32 x 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 32 x 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 x 34 x 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a	С				
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 x 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 x 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 x 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-37 If "Yes," complete Schedule R, Part I 33 x 34 x 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1		· · · · · · · · · · · · · · · · · · ·	+		
conservation contributions? If "Yes," complete Schedule M			29		<u> </u>
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 X 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 35b Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 X 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O 38 X Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 4 Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 5 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 5 Did the organization comply with backup withholding rules for reportable payments to vendors and	30				
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	0.4		+		
complete Schedule N, Part II 32			31		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	32				
sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	22	·	32		_X_
Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	33		22		
or IV, and Part V, line 1	24	,	33		X
Did the organization have a controlled entity within the meaning of section 512(b)(13)? b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V! 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O 38 X Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V \$\frac{\text{Yes}}{\text{bulked}}\$ No \$\frac{\text{In}}{\text{bulked}}\$ Do \$\	34	· · · · · · · · · · · · · · · · · · ·	24		77
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O 38 X Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and	250				
controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O 38 X Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and			JJa		
Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	b		35h		
related organization? If "Yes," complete Schedule R, Part V, line 2	36		335		
Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37	50		36		v
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37				
Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	0,		37		v
19? Note: All Form 990 filers are required to complete Schedule O	38		<u> </u>		
Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	30		38	v	
Check if Schedule O contains a response or note to any line in this Part V	Par		- 50		
Ta Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	ı aı				П
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 22 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and			· · ·	Yes	Nο
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1 a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		.03	110
c Did the organization comply with backup withholding rules for reportable payments to vendors and	_				
	•	reportable gaming (gambling) winnings to prize winners?	1c	х	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued) Yes No Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b х 3a х 3a 3b At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? Х **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 Accounts (FBAR). 5a 5a Х Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? х If "Yes" to line 5a or 5b, did the organization file Form 8886-T? С 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6a Х If "Yes," did the organization include with every solicitation an express statement that such contributions or 6b 7 Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods 7a X If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was С 7с d Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7е е Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b b 10 Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 10a а b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: а b Gross income from other sources (Do not net amounts due or paid to other sources 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 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 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. 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 Enter the amount of reserves on hand С 13c Did the organization receive any payments for indoor tanning services during the tax year? х 14a 14a b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 15 If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 Х If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, or any any disqualified or other person engage in any activities 17 that would result in the imposition of an excise tax under section 4951, 4952 or 4953? 17 If "Yes," complete Form 6069.

Page 5

Pa	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "l	No"		
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			
60	Check if Schedule O contains a response or note to any line in this Part VI		• • •	x
Se	ction A. Governing Body and Management	—		
4.			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 in line 1a, above, who are independent 1b 10			
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	<u> </u>
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		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
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		X
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	L
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	r		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	<u> </u>
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	х	<u> </u>
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13		х
14	Did the organization have a written document retention and destruction policy?	14		х
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?			
а	The organization's CEO, Executive Director, or top management official	15a		х
b	Other officers or key employees of the organization	15b		х
	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 taxable entity during the year?	16a		х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Sec	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed Michigan			
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) available for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website 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 financial 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.			

orm	990	(2022)

Page 7

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

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

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

- **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 employees."
- 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.
- 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 instructions for the order in which to list the persons above.

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

		(C)								
(A)	(B)	Position				(D)	(E)	(F)		
Name and title	Average	٠,				nan one		Reportable	Reportable	Estimated amount
Name and the	hours					s both ar /trustee)		compensation	compensation	of other
	per week	00	0. 0			,,		from the	from related	compensation
	(list any	0 =	=	0	$\overline{\lambda}$	οт	П	organization (W-2/ 1099-MISC/	organizations (W-2/ 1099-MISC/	from the organization and
	hours for	ndivi	nstitu	Officer	еу е	ighe mplo	Former	1099-NEC)	1099-MISC/ 1099-NEC)	related organizations
	related organizations	Individual trustee or director	Institutional trustee	_	Key employee	Highest compensated employee	er	•		
	below	trus	al tr		уее	ompe				
	dotted line)	lee	stee			ensa				
						ted				
(1) SEANAN FORBES	1.00									
BOARD MEMBER	=-00	х						0	0	0
(2) 1555 5663 - 22552	1.00							0	•	
(2) MELISSA DAUB BOARD MEMBER	=-00	х						0	0	0
(3) MELANIE GOLDBERG	1.00							0	0	
		х						0	0	0
BOARD MEMBER	4 00							0	0	<u> </u>
(4) AMY SMITTER	4.00									
BOARD MEMBER		Х						0	0	0
(5) KASEY KOHN	1.00							_	_	_
BOARD MEMBER		х						0	0	0
(6) ANN CASSIDY	4.00									
SECRETARY				х				0	0	0
(7) JILL BLIXT	20.00									
PRESIDENT				Х				0	0	0
(8) GAIL GREIGER	1.00									
VICE PRESIDENT				Х				0	0	0
(9) ALEXANDRA LACOMBE	1.00									
TREASURER				х				0	0	0
(10)										
(11)										
<u>(12)</u>										
<u>(13)</u>										_
<u>(14)</u>										

EEA Form **990** (2022)

38-3263395	Page

(A) Name and title	(B) Average hours per week (list any	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/	(E) Reporta compensa from rela organization			(F) ated amount of other apensation om the	nount r tion	
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	1099-MISC/ 1099-NEC)	1099-MI 1099-NE		-	nization and organization		
<u>(15)</u>														
<u>(16)</u>														
<u>(17)</u>													_	
<u>(18)</u>													_	
<u>(19)</u>														
<u>(20)</u>														
<u>(21)</u>													_	
(22)														
(23)														
<u>(24)</u>													_	
(25)														
1b Subtotal													_	
d Total (add lines 1b and 1c)								0		0		(0	
Total number of individuals (including but not limite reportable compensation from the organization	ed to those iis	sted ab	ove)	wnc	rec	eivea	more	e tnan \$100,000 of					0	
Did the organization list any former officer, director	or trustee ke	v emnl	ovee	or	hiah	est co	mne	insated				Yes N	0	
employee on line 1a? If "Yes," complete Schedule	J for such in	dividua	a/								3	х	<u> </u>	
4 For any individual listed on line 1a, is the sum of ronganization and related organizations greater that	-	•												
individual					• •	• • •					4	х	<u> </u>	
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If "Yes,			-			_					5		,	
Section B. Independent Contractors	complete 30	Jileaule	<i>3</i> 0 10	n su	спρ	erson			· · · · ·	· · · ·	3	X	<u> </u>	
1 Complete this table for your five highest compens														
compensation from the organization. Report comp	ensation for	tne cai	enaa	ar ye	ar er	naing (vitn	or within the organi (B)	zation's tax	k year.	(C)		—	
Name and business addre	ss							Description of service	es		Compens	ation	_	
													—	
													_	
													_	
2 Total number of independent contractors (including received more than \$100,000 of compensation from the contractors).	-		hose	liste	ed at	oove) v	who							

		Check if Schedule O co	ntains a response	or no	te to any line in this	Part VIII			<u> [</u>
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under
Ce Contributions, Gifts, Grants and Other Similar Amounts	l	THEATRICAL PRODUC	ibutions)	1a 1b 1c 1d 1e 1f	Business Code 711110	243,614	107,220	business revenue	rom tax under sections 512–514
Program Service Revenue	c d e f		evenue	_	711110	142,080	34,860		
Other Revenue	4 5 6a b c d 7a b	Investment income (includiother similar amounts) Income from investment of Royalties Gross rents Less: rental expenses Rental income or (loss) Net rental income or (loss) Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses Gain or (loss) Net gain or (loss) Set gain or (loss) Gross income from fundraise events (not including	tax-exempt bond (i) Real 6a 6b 6c (i) Securities 7a 7b 7c	proce	eds				
	c 9a b c 10a	of contributions reported or 1c). See Part IV, line 18 Less: direct expenses Net income or (loss) from for Gross income from gaming activities, See Part IV, line Less: direct expenses Net income or (loss) from gross sales of inventory, le returns and allowances Less: cost of goods sold Net income or (loss) from seem of the same	undraising events 19 gaming activities ss	9a 9b 10a 10b					
Miscellanous Revenue	11a b c d			_ _ 	Business Code	205 504	142.000		
	14	rotal revenue. See instruc	aions			385,694	142,080	0	0

38-3263395

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check if Schedule O contains a response or note to a				
Do r	not include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
8b, 9	9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	92,015	92,015		
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	21,901	21,901		
10	Payroll taxes	7,817	7,752	65	
11	Fees for services (nonemployees):				
a	Management	1,750		1,750	
b	Legal · · · · · · · · · · · · · · · · · · ·				
C	Accounting	1,300		1,300	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column	140 100			
40	(A) amount, list line 11g expenses on Schedule O.)	140,180	140,180		
12	Advertising and promotion	44,890	44,890	T 000	
13	Information technology	7,909	450	7,909	
14 15	Royalties	472	472		
16	Occupancy	54,926	F2 276	1 (50	
17	Travel	34,920	53,276	1,650	
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	733		733	
20	Interest	2,010		2,010	
21	Payments to affiliates	2,010		2,010	
22	Depreciation, depletion, and amortization				
23	Insurance	4,449		4,449	
24	Other expenses. Itemize expenses not covered	=,===		-,	
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A), amount, list line 24e expenses on Schedule O.)				
а	PRODUCTION EXPENSES	20,728	20,728		
b	STORAGE	7,665	7,665		
С	BANK FEES	539		539	
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	409,284	388,879	20,405	0
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation. Check here if				
	following SOP 98-2 (ASC 958-720)				

Balance Sheet

Part X

EEA

38-3263395

MICHIGAN SHAKESPEARE FESTIVAL INC

Check if Schedule O contains a response or note to any line in this Part X (B) (A) Beginning of year End of year 1 Cash - non-interest-bearing (8,736 (22,877)2 2 13,995 3 Pledges and grants receivable, net 2,062 3 2,437 4 4 5 Loans and other receivables from 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 5 Loans and other receivables from other disqualified persons (as defined 6 under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 7 7 Inventories for sale or use 8 9 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a b 10b 92,960 10c 11 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 14 14 15 15 16 Total assets. Add lines 1 through 15 (must equal line 33) 16 (6,674 (6,445)17 17 60,570 132,691 18 18 19 Deferred revenue 11,693 19 13,995 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to any current or former officer, director, -iabilities trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 45,000 22 23 Secured mortgages and notes payable to unrelated third parties 23 27,011 21,407 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 25 26 **Total liabilities.** Add lines 17 through 25 26 144,274 168,093 Organizations that follow FASB ASC 958, check here $|\mathbf{x}|$ and complete lines 27, 28, 32, and 33. Net Assets or Fund Balances 27 Net assets without donor restrictions (150,948 27 (174,538)28 28 Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 29 30 Paid-in or capital surplus, or land, building, or equipment fund 30 31 Retained earnings, endowment, accumulated income, or other funds 31 32 (150,948 32 (174,538)33 Total liabilities and net assets/fund balances 33 (6**,**445) (6,674)

Form 990 (2022)

Both consolidated and separate basis

2c

За

Х

separate basis, consolidated basis, or both:

Consolidated basis

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?

If the organization changed either its oversight process or selection process during the tax year, explain on

Uniform Guidance, 2 C.F.R. Part 200, Subpart F?

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the

Separate basis

Schedule O.

SCHEDULE A (Form 990)

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.

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

1IC	HIG	AN SHAKESPEARE FESTIVAL					38-326339	5					
Pa	rt I	Reason for Public Cha	rity Status. (Al	l organizations mus	t comple	ete this p	art.) See instructio	ns.					
The	orga	nization is not a private foundation be	cause it is: (For line	es 1 through 12, check or	nly one box	(.)							
1		A church, convention of churches, c	r association of chι	urches described in secti	on 170(b)(1)(A)(i).							
2		A school described in section 170(I	o)(1)(A)(ii). (Attach	Schedule E (Form 990).)									
3		A hospital or a cooperative hospital	service organizatio	n described in section 17	70(b)(1)(A)	(iii).							
4		A medical research organization op	erated in conjunctio	n with a hospital describe	ed in sectio	on 170(b)(1)(A)(iii). Enter the						
		hospital's name, city, and state:											
5		An organization operated for the be	nefit of a college or	university owned or oper	ated by a g	governmen	tal unit described in						
		section 170(b)(1)(A)(iv). (Complete Part II.)											
6		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).											
7		An organization that normally receiv	es a substantial pa	rt of its support from a go	vernmenta	ıl unit or fro	om the general public						
		described in section 170(b)(1)(A)(v	i). (Complete Part I	l.)									
8		A community trust described in sect	tion 170(b)(1)(A)(vi	i). (Complete Part II.)									
9		An agricultural research organizatio	n described in sect	ion 170(b)(1)(A)(ix) oper	ated in cor	ijunction w	ith a land-grant college						
		or university or a non-land-grant col	lege of agriculture (see instructions). Enter the	he name, c	ity, and sta	ate of the college or						
		university:											
10	x	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	닏	An organization organized and oper	•	•									
12	L	An organization organized and oper											
	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												
					nty or the d	illectors or	trustees of the						
	h	supporting organization. You m	•		th ita ayana	orted organ	vization(a) by baying						
	b	Type II. A supporting organizati	•										
		control or management of the s			ersons mai	CONTROLO	manage the supported						
	_	organization(s). You must com			nootion wit	h and fun	otionally intograted with						
	С	its supported organization(s) (se		·									
	d	Type III non-functionally integ	,	•				-1					
	u	that is not functionally integrated						•					
		requirement (see instructions).	•	• •		•	m and an attentiveness	,					
	е	Check this box if the organization	•				Type II Type III						
		functionally integrated, or Type				io a Typo i,	, 1)po						
1	f F	Enter the number of supported organi	•										
		Provide the following information abou		anization(s).									
		lame of supported organization	(ii) EIN	(iii) Type of organization	(iv) Is the o	rganization	(v) Amount of monetary	(vi) Amount of					
	• • •	0	, ,	(described on lines 1-10	listed in you		support (see	other support (see					
				above (see instructions))	docum	ient?	instructions)	instructions)					
					Yes	No							
A \													
A)													
B)													
C)													
D)													
رد													
E)													
-, Tota													
							i .	i					

Schedule A (Form 990) 2022 MICHIGAN SHAKESPEARE FESTIVAL INC 38-3263395 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (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.)

Jecu	on A. Fublic Support						
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4 .						
	on B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties, and income from						
	similar sources						
9	Net income from unrelated business						
	activities, whether or not the business						
	is regularly carried on						
10	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc.	•	•			12	
13	First 5 years. If the Form 990 is for the or						
	organization, check this box and stop her	e					
	on C. Computation of Public Suppo						
14	Public support percentage for 2022 (line 6		•			14	%
15	Public support percentage from 2021 Sch					15	%
16a	33 1/3% support test - 2022. If the organ						
	box and stop here . The organization qual	•		•			_
b	33 1/3% support test - 2021. If the organi						
47-	this box and stop here . The organization		•	-			_
17a	10%-facts-and-circumstances test - 202	_					
	10% or more, and if the organization meet					•	
	Part VI how the organization meets the fa			-	=		_
	organization						_
b	10%-facts-and-circumstances test - 202	•					
	15 is 10% or more, and if the organization					•	•
	in Part VI how the organization meets the			-	· ·		oported
40	organization						· · · · · · · ·
18	Private foundation. If the organization di						
	instructions						

38-3263395

(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.)

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")	112,694	314,883	23,888	155,163	243,614	850,242
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose	131,860	8,292		80,960	142,080	363,192
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5	244,554	323,175	23,888	236,123	385,694	1,213,434
7a	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						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						1,213,434
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6	244,554	323,175	23,888	236,123	385,694	1,213,434
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						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included on line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)	192	3,799	11,000	10,890		25,881
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	244,746	326,974	34,888	247,013	385,694	1,239,315
14	First 5 years. If the Form 990 is for the or	ganization's fir	st, second, thir	d, fourth, or fift	h tax year as a	section 501(c))(3)
	organization, check this box and stop her						
Secti	on C. Computation of Public Suppor	rt Percentag	е				
15	Public support percentage for 2022 (line 8	, column (f), di	vided by line 1	3, column (f))		15	97.91 %
16	Public support percentage from 2021 Scho	edule A, Part II	I, line 15 .			16	98.32 %
Secti	on D. Computation of Investment Inc	come Percer	ntage				
17	Investment income percentage for 2022 (li	ne 10c, colum	n (f), divided by	y line 13, colun	nn (f))	17	0.00 %
18	Investment income percentage from 2021					18	0.00 %
19a	33 1/3% support tests - 2022. If the organ			on line 14, an	d line 15 is mo	re than 33 1/39	
	17 is not more than 33 1/3%, check this bo						
b	33 1/3% support tests - 2021. If the organization						
	line 18 is not more than 33 1/3%, check this box						
20	Private foundation. If the organization did					-	ons

EEA Schedule A (Form 990) 2022

No

Yes

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 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*.
- 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 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.)

	1		
	-		
	2		
	3a		
	Ja		
	3b		
)			
	3с		
	4a		
	-tu		
	4b		
	4c		
	.0		
	_		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	9a		
	7 0.		
	9b		
	9с		
	10a		
	10b		
du	le A (Fo	orm 99	0) 2022

EEA Schedule A (Form 990) 2022

Supporting Organizations (continued)

Part IV

EEA

Page 5

3b

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Schedul	e A (Form 990) 2022 MICHIGAN SHAKESPEARE FESTIVAL INC		38-32633	395	Page 6
Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	gani	izations		
1	Check here if the organization satisfied the Integral Part Test as a qualifying	trus	t on Nov. 20, 1970 <i>(explain</i>	in Part VI)	. See
	instructions. All other Type III non-functionally integrated supporting organization	zatio	ons must complete Sections	A through	E.
Section A - Adjusted Net Income			(A) Prior Year	(B) Current Year	
			(A) FIIOI feai	(optio	onal)
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			
Sooti	on B - Minimum Asset Amount		(A) Prior Voor	(B) Curre	ent Year
Secu	on B - Minimum Asset Amount		(A) Prior Year	(optio	onal)
1	Aggregate fair market value of all non-exempt-use assets (see				
	instructions for short tax year or assets held for part of year):				
а	Average monthly value of securities	1a			
b	Average monthly cash balances	1b			
С	Fair market value of other non-exempt-use assets	1c			
d	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			
Secti	on C - Distributable Amount			Curren	t 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				

Schedule A (Form 990) 2022 EEA

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization

emergency temporary reduction (see instructions).

(see instructions).

	e A (Form 990) 2022 MICHIGAN SHAKESPEARE FEST				age 7
Part	V Type III Non-Functionally Integrated 509(a)(3	B) Supporting Organi	izations (continued))	
Secti	on D - Distributions			Current Year	
1	Amounts paid to supported organizations to accomplish ex	xempt purposes	1		
2	Amounts paid to perform activity that directly furthers exen	npt purposes of supporte	ed		
	organizations, in excess of income from activity		2	2	
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organi	izations 3	3	
4	Amounts paid to acquire exempt-use assets		4	1	
5	Qualified set-aside amounts (prior IRS approval required)	- provide details in Part	<i>VI</i>) 5	5	
6	Other distributions (describe in Part VI). See instructions.		6	6	
7	Total annual distributions. Add lines 1 through 6.		7	7	
8	Distributions to attentive supported organizations to which	the organization is resp	onsive		
	(provide details in Part VI). See instructions.		8	3	
9	Distributable amount for 2022 from Section C, line 6		9	•	
10	Line 8 amount divided by line 9 amount		10	0	
	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 20	
1_	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022				
	(reasonable cause required - explain in Part VI). See				
	instructions.				
3	Excess distributions carryover, if any, to 2022				
a	From 2017				
b	From 2018				
c	From 2019				
d	From 2020				
e	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
	Applied to 2022 distributable amount				
<u>_i</u>	Carryover from 2017 not applied (see instructions)				
<u>j</u> _	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from				
	Section D, line 7: \$				
	Applied to underdistributions of prior years				
b	Applied to 2022 distributable amount				
<u>c</u>	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, 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 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j and 4c.				
	Breakdown of line 7:				
o	F f 0040				
a	F f 0040				
	F f 0000				
d	Excess from 2020 Excess from 2021				
e	Excess from 2022				
-	EXCOSCI HOLLE COLL COLL				

Schedule A (Form 990) 2022 EEA

Part VI
Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)					

Schedule B (Form 990)

Schedule of Contributors

OMB No. 1545-0047

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990 or Form 990-PF.

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

2022

MICHIGAN SHAKESPEARE FESTIVAL INC 38-3263395 Organization type (check one): Filers of: Section: **X** 501(c)(**3** Form 990 or 990-EZ) (enter number) organization 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 X 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 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).

Name of organization **Employer identification number**

MICHIGAN SHAKESPEARE FESTIVAL INC 38-3263395

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
1	MICHIGAN COUNCIL OF ARTS & CULTURAL 3000 N. WASHINGTON SQUARE LANSING MI 48913	\$16,250	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	SIRIUS COACHING & CONSULTING 650 CHURCH ST STE 208A PLYMOUTH MI 48170	\$55,000	Person X Payroll			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
3	DON & COLLEEN SOENAN 650 CHURCH STREET PLYMOUTH MI 48170	\$50,000	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	AL & JILL BLIXT 650 CHURCH STREET PLYMOUTH MI 48170	\$ 27,580	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			
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash Complete Part II for noncash contributions.)			

SCHEDULE D (Form 990)

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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection Employer identification number

MICH	GAN SHAKESPEARE FESTIVAL INC		38-3263395			
Pa	rt I Organizations Maintaining Donor Advised F	Funds or Other Similar Funds or Acco	ounts.			
	Complete if the organization answered "Yes" of	on Form 990, Part IV, line 6.				
		(a) Donor advised funds	(b) Funds and other accounts			
1	Total number at end of year	, ,				
2	Aggregate value of contributions to (during 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 advised				
•	funds are the organization's property, subject to the organization	-				
6	Did the organization inform all grantees, donors, and donor a	ŭ				
·	only for charitable purposes and not for the benefit of the don		4			
	conferring impermissible private benefit?					
Par						
· u.	Complete if the organization answered "Yes" of	on Form 990 Part IV line 7				
1	Purpose(s) of conservation easements held by the organization					
•	Preservation of land for public use (for example, recreation	· · · · · · · · · · · · · · · · · · ·	nistorically important land area			
	Protection of natural habitat	· <u> </u>	certified historic structure			
	Preservation of open space	i reservation of a c	sertified Historic structure			
2	Complete lines 2a through 2d if the organization held a qualif	ind consequation contribution in the form of a	consequation			
_	easement on the last day of the tax year.	led conservation contribution in the form of a	Held at the End of the Tax Year			
2	Total number of conservation easements					
a	Total acreage restricted by conservation easements					
b	Number of conservation easements on a certified historic stru					
c d	Number of conservation easements included in (c) acquired		20			
u	historic structure listed in the National Register		2d			
3	Number of conservation easements modified, transferred, rel		<u> </u>			
3		eased, extinguished, or terminated by the org	ganization during the			
4	tax year Number of states where property subject to conservation eas	coment is located				
5	Does the organization have a written policy regarding the per					
3	violations, and enforcement of the conservation easements it					
6	Staff and volunteer hours devoted to monitoring, inspecting, I					
Ū	otali and volunteer hours devoted to morntoning, inspecting, i	landing of violations, and emoraling conscive	ation casements during the year			
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conservation	easements during the year			
•	,a e. e.,perieceea ea	g or recausine, and orneroning conservation	caccinicinic dailing and year			
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(h)(4)(B)(i)			
9	In Part XIII, describe how the organization reports conservati	on easements in its revenue and expense sta	atement and			
	balance sheet, and include, if applicable, the text of the footn					
	organization's accounting for conservation easements.	3				
Par	_ <u> </u>	of Art, Historical Treasures, or O	Other Similar Assets.			
	Complete if the organization answered "Yes" of					
1a	If the organization elected, as permitted under FASB ASC 95		palance sheet works			
	of art, historical treasures, or other similar assets held for pub	olic exhibition, education, or research in furthe	erance of public			
	service, provide in Part XIII the text of the footnote to its finan	cial statements that describes these items.				
b						
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furthera	nce of public service,			
	provide the following amounts relating to these items:					
	(i) Revenue included on Form 990, Part VIII, line 1		\$			
	(ii) Assets included in Form 990, Part X					
2	If the organization received or held works of art, historical trea					
	following amounts required to be reported under FASB ASC s	_				
а	Revenue included on Form 990, Part VIII, line 1		\$			
b	Assets included in Form 990, Part X					

Par	Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)									
3	Using the organization's acquisition, accession	on, and other records	s, check any	of the fol	lowing that m	ake signi	ificant use of its			
	collection items (check all that apply):									
а	Public exhibition		d [Loan or	exchange pr	ogram				
b	Scholarly research		е Г	Other	0.	Ü				
С	Preservation for future generations		_	•						•
4	Provide a description of the organization's co	llections and explain	how they fu	rther the	organization's	s exempt	purpose in Part			
•	XIII.				o.gaa	. o.cp.	. pa. pood a			
5	During the year, did the organization solicit or	r receive donations o	fart historio	al treasu	res or others	similar				
•	assets to be sold to raise funds rather than to		-					. Ye	. 「	No
Par	rt IV Escrow and Custodial Arra		art or the org	unization	15 conconorr:					,
	Complete if the organization a	•	on Form	990 P	art IV line	9 or re	enorted an an	nount on	Form	1
	990, Part X, line 21.	anoworda 100	01111	000,	a ,o	0, 0	portou arran	ilouile oil	. 0	•
1a	Is the organization an agent, trustee, custodia	an or other intermedi	ary for contr	ihutione d	or other accet	e not				
Ia								Ye	. г	No
h								· · □ ie:	• ∟	NO
b	If "Yes," explain the arrangement in Part XIII	and complete the lon	owing table.				1	ma a un t		
	Deginning belongs					40	A	mount		
C	Beginning balance									
a										
е	Distributions during the year									
f	Ending balance									1
2a	Did the organization include an amount on Fo					-			=	No
b	, , ,	Check here if the ex	planation ha	ıs been p	rovided on Pa	art XIII				
Par		on a	an Farma	000 D	amt I\/ lima	10				
	Complete if the organization a									
_		(a) Current year	(b) Prior	year	(c) Two years	back	(d) Three years back	k (e) Fou	years b	oack
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and									
	losses									
d	Grants or scholarships									
е	Other expenditures for facilities and									
	programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curre	ent year end balance	e (line 1g, co	lumn (a))	held as:					
а	Board designated or quasi-endowment	%								
b	Permanent endowment%									
С	Term endowment%									
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.								
3a	Are there endowment funds not in the posses	ssion of the organizat	tion that are	held and	administered	for the				
	organization by:								Yes	No
	(i) Unrelated organizations							. 3a(i)		
	(ii) Related organizations							. 3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiza	ations listed as requir	ed on Sched	dule R?				. 3b		
4	Describe in Part XIII the intended uses of the	organization's endo	wment funds	S.						•
Par	rt VI Land, Buildings, and Equip	ment.								
	Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.									
	Description of property	(a) Cost or other	er basis	(b) Cost or	r other basis	(c) A	Accumulated	(d) Boo	k value	
		(investme	ent)	(0	other)	de	preciation			
1a	Land									
b	Buildings									
С	Leasehold improvements									
d	Equipment									
е	Other				92,960		92,960			
	Add lines 1a through 1e. (Column (d) must equ		, column (B)	, line 10c						

Schedule D (Fo		RE FESTIVA	L INC	38	-3263395	Page \$
Part VII	Investments - Other Securities.					
	Complete if the organization answered "	Yes" on Forr	n 990, Part IV, li	ne 11b. See Forn	n 990, Part X, lir	ne 12.
	(a) Description of security or category (including name of security)		(b) Book value	1 ' '	Method of valuation: nd-of-year market value	
(1) Financial	derivatives					
(2) Closely-h	eld equity interests	[
(3) Other						
(A)						
(B)						
(C)						
(D)						
(E)						
(F)						
(G)						
(H)						
Part VIII	Investments - Program Related. Complete if the organization answered "	Yes" on Forr	n 990, Part IV, li	ne 11c. See Form	n 990, Part X, Iir	ie 13.
	(a) Description of investment		(b) Book value		Method of valuation: nd-of-year market value	
(1)					·	
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
Part IX	Other Assets. Complete if the organization answered "	Yes" on Forr	n 990, Part IV, li	ne 11d. See Forn	n 990, Part X, Iir	ne 15.
	(a) Descr	ription			(b) Book va	ılue
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
Part X	Other Liabilities. Complete if the organization answered " line 25.	Yes" on Forr	n 990, Part IV, li	ne 11e or 11f. Se	e Form 990, Pa	rt X,
1.	(a) Description of liability	(b) Book v	alue			
	income taxes	(-,				
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 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

(8) (9)

Part	Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.				
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	_			
1	Total revenue, gains, and other support per audited financial statements	1			
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments				
b	Donated services and use of facilities				
С	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)				
е	Add lines 2a through 2d	2e			
3	Subtract line 2e from line 1	3			
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a				
b	Other (Describe in Part XIII.)				
С	Add lines 4a and 4b	4c			
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5			
Part			turn.		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	•			
1	Total expenses and losses per audited financial statements	1			
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities				
b	Prior year adjustments				
C	Other losses				
d	Other (Describe in Part XIII.)				
e	Add lines 2a through 2d	2e			
3	Subtract line 2e from line 1	3			
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a				
b	Other (Describe in Part XIII.)				
С	Add lines 4a and 4b	4c			
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5			
Part		'	•		
Provide	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, I	ine 4; Part X, li	ne		
	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.				
		·			
_					

Schedule D (Form 990) 2022

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.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number Name of the organization MICHIGAN SHAKESPEARE FESTIVAL INC 38-3263395 01. Officer, directors, etc. family relationship (Part VI, line 2) ORGANIZATION PRESIDENT IS THE MOTHER-IN-LAW OF A KEY EMPLOYEE (ARTISTIC DIRECTOR) 02. Form 990 governing body review (Part VI, line 11) ORGANIZATION'S PROCESS TO REVIEW 990: BOARD OF DIRECTORS IS PROVIDED A COPY FOR REVIEW PRIOR TO FILING. 03. Conflict of interest policy compliance (Part VI, line 12c) ENFORCEMENT OF CONFLIC OF INTEREST POLICY: EXECUTIVE COMMITTEE REVIEWS ANNUAL DISCLOSURE FORMS AND ENFORCES THE POLICIES. 04. Governing documents, etc, available to public (Part VI, line 19) DOCUMENTS AVAILABLE UPON REQUEST 05. List of other fees for services expenses (Part IX, line 11g) INDEPENDENT CONTRACTORS AND ARTISTS FOR THE SUMMER SEASON AND EDUCATIONAL TOUR