** Return of Organization Exempt From Income Tax **

Form 990

** PUBLIC DISCLOSURE COPY **

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.

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

A For the 2020 calendar year, or tax year beginning and ending

<table>
<thead>
<tr>
<th>B Check if applicable:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address change</td>
</tr>
<tr>
<td>Name change</td>
</tr>
<tr>
<td>Initial return</td>
</tr>
<tr>
<td>Final return</td>
</tr>
<tr>
<td>Terminated Amended return</td>
</tr>
<tr>
<td>Application pending</td>
</tr>
</tbody>
</table>

C Name of organization

<table>
<thead>
<tr>
<th>OLD GLOBE THEATRE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Doing business as THE OLD GLOBE</td>
</tr>
<tr>
<td>Number and street (or P.O. box if mail is not delivered to street address)</td>
</tr>
<tr>
<td>P.O. BOX 122171</td>
</tr>
<tr>
<td>City or town, state or province, country, and ZIP or foreign postal code</td>
</tr>
<tr>
<td>SAN DIEGO, CA 92112-2171</td>
</tr>
</tbody>
</table>

D Employer identification number

| 95-1543396 |

E Telephone number

| 619-231-1941 |

F Name and address of principal officer: MICHÉLLE L. YEAGER

| SAME AS C ABOVE |

I Tax-exempt status: 501(c)(3), 501(c)( )

| (insert no.) 4947(a)(1) or 527 |

J Website: WWW.THEOLDGLOBE.ORG

K Form of organization: Corporation

L Year of formation: 1937

M State of legal domicile: CA

** Part I **

<table>
<thead>
<tr>
<th>Summary</th>
</tr>
</thead>
<tbody>
<tr>
<td>THEATRE IS ONE OF THE LARGEST THEATRES IN THE COUNTRY AND SAN</td>
</tr>
</tbody>
</table>

1 Briefly describe the organization's mission or most significant activities: THE TONY AWARD-WINNING OLD GLOBE

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a) 53

4 Number of independent voting members of the governing body (Part VI, line 1b) 53

7a Total unrelated business revenue from Part VIII, column (C), line 12 -26,766.

7b Net unrelated business taxable income from Form 990-T, Part I, line 11 0.

8 Contributions and grants (Part VIII, line 1h) 76,381,618. 13,981,436.

9 Program service revenue (Part VIII, line 2g) 18,576,181. 2,214,280.

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 379,381. 288,396.

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 218,122. -10,342.

12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A) 12) 95,555,302. 16,473,770.

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 30,188,500. 274,866.

14 Benefits paid to or for members (Part IX, column (A), line 4) 0.

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 17,715,532. 9,493,376.

16a Professional fundraising fees (Part IX, column (A), line 11e) 0.

16b Total fundraising expenses (Part IX, column (D), line 25) 1,748,736.

17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 12,944,635. 6,179,809.

18 Total expenses. Add lines 13-17 (must equal Part IX, column (A) 25) 60,848,667. 15,948,051.

19 Revenue less expenses. Subtract line 18 from line 12 34,706,635. 525,719.

** 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.

<table>
<thead>
<tr>
<th>Sign Here</th>
</tr>
</thead>
<tbody>
<tr>
<td>Signature of officer</td>
</tr>
<tr>
<td>MICHELLE L. YEAGER, DIRECTOR OF FINANCE</td>
</tr>
<tr>
<td>Date</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Paid</th>
</tr>
</thead>
<tbody>
<tr>
<td>Print/Type preparer's name</td>
</tr>
<tr>
<td>JANE COLEMAN</td>
</tr>
<tr>
<td>Preparer's signature</td>
</tr>
<tr>
<td>Date</td>
</tr>
<tr>
<td>Check if self-employed</td>
</tr>
<tr>
<td>PTIN P01391236</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Preparer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Firm's name MOSS ADAMS LLP</td>
</tr>
<tr>
<td>Firm's EIN 91-0189318</td>
</tr>
<tr>
<td>Firm's address 4747 EXECUTIVE DR SUITE 1300</td>
</tr>
<tr>
<td>Phone no. 858-627-1400</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Use Only</th>
</tr>
</thead>
<tbody>
<tr>
<td>Firm's address SAN DIEGO, CA 92121</td>
</tr>
</tbody>
</table>

May the IRS discuss this return with the preparer shown above? See instructions Yes X No

** See Schedule O for Organization Mission Statement Continuation **
Part III  Statement of Program Service Accomplishments

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

1 Briefly describe the organization’s mission:
THE MISSION OF THE OLD GLOBE IS TO PRESERVE, STRENGTHEN AND ADVANCE AMERICAN THEATRE BY: CREATING THEATRICAL EXPERIENCES OF THE HIGHEST PROFESSIONAL STANDARDS; PRODUCING AND PRESENTING WORKS OF EXCEPTIONAL MERIT, DESIGNED TO REACH CURRENT AND FUTURE AUDIENCES; ENSURING...

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes  X  No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes  X  No
If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:________) (Expenses $ 10,802,399. including grants of $122,666. ) (Revenue $ 2,213,606. ) THE OLD GLOBE IS AT THE FOREFRONT OF THE NATION’S THEATRICAL PERFORMING ARTS ORGANIZATIONS, SETTING A STANDARD FOR EXCELLENCE IN AMERICAN THEATER BY PRODUCING 14 OR MORE HIGH-QUALITY PROFESSIONAL PRODUCTIONS IN A NORMAL SEASON: INCLUDING WORLD PREMIERES, MODERN CLASSICS, NEW MUSICALS, BROADWAY-BOUND PRODUCTIONS, AND AN OUTDOOR SUMMER SHAKESPEARE FESTIVAL.

4b (Code:________) (Expenses $ 162,200. including grants of $162,200. ) (Revenue $ ) A JOINT VENTURE OF THE OLD GLOBE AND THE UNIVERSITY OF SAN DIEGO, THE MASTER OF FINE ARTS IN ACTING PROGRAM NATIONALLY RECRUITS SEVEN STUDENTS EACH YEAR TO PARTICIPATE IN AN INTENSIVE TWO-YEAR, YEAR-ROUND COURSE OF GRADUATE STUDY IN CLASSICAL THEATRE. GRANTS ARE GIVEN TO THE STUDENTS TO COVER A SMALL PORTION OF MONTHLY LIVING EXPENSES.

4c (Code:________) (Expenses $ including grants of $ ) (Revenue $ )

4d Other program services (Describe on Schedule O.)
(Expenses $ including grants of $ ) (Revenue $ )

4e Total program service expenses $10,964,599.

See Schedule O for continuation(s)
<table>
<thead>
<tr>
<th></th>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Is the organization required to complete Schedule B, Schedule of Contributors?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td><strong>Section 501(c)(3) organizations.</strong> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>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?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Did the organization maintain collections of works of art, historical treasures, or other similar assets?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Did the organization report an amount on Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>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.</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>11a</td>
<td>a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>11b</td>
<td>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?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>11c</td>
<td>c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>11d</td>
<td>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?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>11e</td>
<td>e Did the organization report an amount for other liabilities in Part X, line 25?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>11f</td>
<td>f Did the organization’s separate or consolidated financial statements for the tax year include a footnote that addresses the organization’s liability for uncertain tax positions under FIN 48 (ASC 740)?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>12a</td>
<td>g Did the organization obtain separate, independent audited financial statements for the tax year?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>12b</td>
<td>h Was the organization included in consolidated, independent audited financial statements for the tax year?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Is the organization a school described in section 170(b)(1)(A)(ii)?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>14a</td>
<td>Did the organization maintain an office, employees, or agents outside of the United States?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>14b</td>
<td>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?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>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?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>20a</td>
<td>Did the organization operate one or more hospital facilities?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>20b</td>
<td>b If “Yes,” to line 20a, did the organization attach a copy of its audited financial statements to this return?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>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?</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>
Part IV Checklist of Required Schedules

22 Did the organization 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 I, Parts I and III

23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I

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 of any of these persons? If "Yes," complete Schedule L, Part II

27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III

28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):

a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV

b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV

c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV

29 Did the organization receive more than $25,000 in non-cash contributions? If "Yes," complete Schedule M

30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M

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

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

35a 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

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 in Schedule O for Part VI, lines 11b and 19?

Note: All Form 990 filers are required to complete Schedule O

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

1b 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 reportable gaming (gambling) winnings to prize winners?
### Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>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</td>
<td>395</td>
<td>X</td>
</tr>
</tbody>
</table>

**Note:** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did the organization have unrelated business gross income of $1,000 or more during the year?</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

**Note:** To line 3b, provide an explanation on Schedule O

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>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)?</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>If &quot;Yes,&quot; enter the name of the foreign country.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>


<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>If &quot;Yes&quot; to line 5a or 5b, did the organization file Form 8886-T?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>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?</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>If &quot;Yes,&quot; did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Organizations that may receive deductible contributions under section 170(c).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>b Did the organization notify the donor of the value of the goods or services provided?</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>c If &quot;Yes&quot; to line 7a or 7b, did the organization file Form 8282?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>If &quot;Yes,&quot; indicate the number of Forms 8282 filed during the year</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>If &quot;Yes,&quot; did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did the organization receive a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>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?</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b If &quot;Yes,&quot; enter the amount of tax-exempt interest received or accrued during the year</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>c Enter the amount of reserves on hand</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did the organization receive any payments for indoor tanning services during the tax year?</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>b If &quot;Yes,&quot; has it filed a Form 720 to report these payments? If &quot;No,&quot; provide an explanation on Schedule O</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>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?</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>If &quot;Yes,&quot; see instructions and file Form 4720, Schedule N.</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is the organization an educational institution subject to the section 4968 excise tax on net investment income?</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>If &quot;Yes,&quot; complete Form 4720, Schedule O.</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>
**Section A. Governing Body and Management**

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.  

<table>
<thead>
<tr>
<th>1a</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>53</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1b. Enter the number of voting members included on line 1a, above, who are independent.  

<table>
<thead>
<tr>
<th>1b</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>53</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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?  

<table>
<thead>
<tr>
<th>2</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>x</td>
<td></td>
</tr>
</tbody>
</table>

3. Did the organization delegate control over management duties customarily performed by or under the direct supervision of directors, trustees, or key employees to a management company or other person?  

<table>
<thead>
<tr>
<th>3</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>x</td>
<td></td>
</tr>
</tbody>
</table>

4. Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?  

<table>
<thead>
<tr>
<th>4</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>x</td>
<td></td>
</tr>
</tbody>
</table>

5. Did the organization become aware during the year of a significant diversion of the organization’s assets?  

<table>
<thead>
<tr>
<th>5</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>x</td>
<td></td>
</tr>
</tbody>
</table>

6. Did the organization have members or stockholders?  

<table>
<thead>
<tr>
<th>6</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>x</td>
<td></td>
</tr>
</tbody>
</table>

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?  

<table>
<thead>
<tr>
<th>7a</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>x</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

7b. Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?  

<table>
<thead>
<tr>
<th>7b</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>x</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

8. Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:  

<table>
<thead>
<tr>
<th>8</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>a The governing body:</td>
<td>x</td>
<td></td>
</tr>
<tr>
<td>b Each committee with authority to act on behalf of the governing body:</td>
<td>x</td>
<td></td>
</tr>
</tbody>
</table>

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.  

<table>
<thead>
<tr>
<th>9</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>x</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

10a. Did the organization have local chapters, branches, or affiliates?  

<table>
<thead>
<tr>
<th>10a</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>x</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

10b. 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?  

<table>
<thead>
<tr>
<th>10b</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>x</td>
<td></td>
</tr>
</tbody>
</table>

11a. Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  

<table>
<thead>
<tr>
<th>11a</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>x</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

12a. Did the organization have a written conflict of interest policy? If “No,” go to line 13  

<table>
<thead>
<tr>
<th>12a</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>x</td>
<td></td>
</tr>
</tbody>
</table>

12b. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  

<table>
<thead>
<tr>
<th>12b</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>x</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

12c. Did the organization regularly and consistently monitor and enforce compliance with the policy? If “Yes,” describe in Schedule O how this was done  

<table>
<thead>
<tr>
<th>12c</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>x</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

13. Did the organization have a written whistleblower policy?  

<table>
<thead>
<tr>
<th>13</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>x</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

14. Did the organization have a written document retention and destruction policy?  

<table>
<thead>
<tr>
<th>14</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>x</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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?  

<table>
<thead>
<tr>
<th>15</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>a The organization’s CEO, Executive Director, or top management official</td>
<td>x</td>
<td></td>
</tr>
<tr>
<td>b Other officers or key employees of the organization</td>
<td>x</td>
<td></td>
</tr>
</tbody>
</table>

15a. If “Yes” to line 15a or 15b, describe the process in Schedule O (see instructions).  

<table>
<thead>
<tr>
<th>15a</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>x</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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?  

<table>
<thead>
<tr>
<th>16a</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>x</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

16b. 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?  

<table>
<thead>
<tr>
<th>16b</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>x</td>
<td></td>
</tr>
</tbody>
</table>

**Section C. Disclosure**

17. List the states with which a copy of this Form 990 is required to be filed  

<table>
<thead>
<tr>
<th></th>
<th>CA</th>
</tr>
</thead>
</table>

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.  

<table>
<thead>
<tr>
<th></th>
<th>Own website</th>
<th>Another’s website</th>
<th>Upon request</th>
<th>Other (explain on Schedule O)</th>
</tr>
</thead>
<tbody>
<tr>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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.  

<p>| |</p>
<table>
<thead>
<tr>
<th></th>
</tr>
</thead>
</table>

20. State the name, address, and telephone number of the person who possesses the organization’s books and records  

<table>
<thead>
<tr>
<th></th>
<th>MICHELE L. YEAGER – 619-231-1941</th>
<th>1363 OLD GLOBE WAY, SAN DIEGO, CA 92101</th>
</tr>
</thead>
</table>

Form 990 (2020)
## Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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 **key employee**.
- List all of the organization’s five highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations.
- List all of the organization’s **director or trustee** 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.

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week</th>
<th>(C) Position</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 TIMOTHY SHIELDS</td>
<td>40.00</td>
<td>X</td>
<td>457,145.</td>
<td>0.</td>
<td>29,881.</td>
</tr>
<tr>
<td>MANAGING DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 BARRY EDELESTEIN</td>
<td>40.00</td>
<td>X</td>
<td>443,702.</td>
<td>0.</td>
<td>38,566.</td>
</tr>
<tr>
<td>ARTISTIC DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 LLEWELLYN CRAIN</td>
<td>40.00</td>
<td>X</td>
<td>202,102.</td>
<td>0.</td>
<td>35,803.</td>
</tr>
<tr>
<td>DIRECTOR OF PHILANTHROPY</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 DAVID HENSON, SECRETARY</td>
<td>40.00</td>
<td>X</td>
<td>186,543.</td>
<td>0.</td>
<td>5,651.</td>
</tr>
<tr>
<td>DIRECTOR OF MARKETING</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 ROBERT DRAKE</td>
<td>40.00</td>
<td>X</td>
<td>150,270.</td>
<td>0.</td>
<td>16,669.</td>
</tr>
<tr>
<td>SENIOR PRODUCER</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 MICHELLE YEAGER</td>
<td>40.00</td>
<td>X</td>
<td>151,785.</td>
<td>0.</td>
<td>14,911.</td>
</tr>
<tr>
<td>DIRECTOR OF FINANCE</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 MICHAEL PAGE</td>
<td>40.00</td>
<td>X</td>
<td>145,080.</td>
<td>0.</td>
<td>6,139.</td>
</tr>
<tr>
<td>GENERAL MANAGER</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 BENJAMIN THORON</td>
<td>40.00</td>
<td>X</td>
<td>122,276.</td>
<td>0.</td>
<td>13,474.</td>
</tr>
<tr>
<td>PRODUCTION MANAGER</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 DEAN THORON</td>
<td>40.00</td>
<td>X</td>
<td>119,531.</td>
<td>0.</td>
<td>15,209.</td>
</tr>
<tr>
<td>INFORMATION TECHNOLOGY DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 STACY SUTTON</td>
<td>40.00</td>
<td>X</td>
<td>104,648.</td>
<td>0.</td>
<td>13,075.</td>
</tr>
<tr>
<td>COSTUMES DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 KRISTINA KEELER</td>
<td>40.00</td>
<td>X</td>
<td>102,610.</td>
<td>0.</td>
<td>12,271.</td>
</tr>
<tr>
<td>DEPUTY DIRECTOR OF PHILANTHROPY</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 ANN DAVIES</td>
<td>15.00</td>
<td>X X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>BOARD CHAIR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 ANTHONY S. THORNLEY</td>
<td>8.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>BOARD TREASURER</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14 CHRISTINE TRIMBLE</td>
<td>4.00</td>
<td></td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>BOARD MEMBER</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15 DAPHNE H. JAMESON</td>
<td>4.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>BOARD MEMBER</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16 DAVID JAY OHANIAN</td>
<td>4.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>BOARD MEMBER</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17 DEBRA TURNER</td>
<td>4.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>BOARD MEMBER</td>
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</table>
### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

<table>
<thead>
<tr>
<th>Name and title</th>
<th>Average hours per week</th>
<th>Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(18) DEIRDA PRICE, PH.D. BOARD MEMBER</td>
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<tr>
<td>(19) DIRK HARRIS BOARD MEMBER</td>
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<td>(20) DONALD L. CORN BOARD PAST CHAIR, EX-OFFICIO</td>
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<tr>
<td>(21) ELAINE BENNETT DARWIN BOARD PAST CHAIR, EX-OFFICIO</td>
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<tr>
<td>(22) ELEANOR Y. CHARLTON BOARD MEMBER</td>
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<tr>
<td>(23) ELLISE COIT BOARD MEMBER</td>
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<tr>
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<tr>
<td>(25) EVELYN OLSON LAMDEN BOARD VICE CHAIR NOMINATING</td>
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<td>0.</td>
</tr>
</tbody>
</table>

| 1b Subtotal                      | 2,185,692.              | 0.                                                                                          | 201,649.                                                        |
| 1c Total from continuation sheets to Part VII, Section A | 0.                   | 0.                                                                                          | 0.                                                               |
| 1d Total (add lines 1b and 1c)   | 2,185,692.              | 0.                                                                                          | 201,649.                                                        |

| Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization | 12 |

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

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

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

### Section B. Independent Contractors

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

<table>
<thead>
<tr>
<th>Name and business address</th>
<th>Description of services</th>
<th>Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
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<td></td>
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</tr>
<tr>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization | 0 |
### Part VII

#### Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week (list any hours for related organizations below line)</th>
<th>(C) Position (check all that apply)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(27) GEORGE S. DAVIS BOARD MEMBER</td>
<td>4.00</td>
<td>0.50 X</td>
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<td>0.</td>
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<tr>
<td>(28) HAROLD W. FUSON, JR. BOARD PAST CHAIR, EX-OFFICIO</td>
<td>6.00</td>
<td>0.50 X</td>
<td>0.</td>
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<tr>
<td>(29) JACK GALLOWAY BOARD MEMBER (THRU 08/20)</td>
<td>4.00</td>
<td>X</td>
<td>0.</td>
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<tr>
<td>(30) JAQUELINE LEWIS BOARD MEMBER (THRU 01/20)</td>
<td>4.00</td>
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<tr>
<td>(31) JEAN SHEKHTER BOARD MEMBER</td>
<td>6.00</td>
<td>X</td>
<td>0.</td>
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<tr>
<td>(32) JENNIFER GREENFIELD BOARD MEMBER</td>
<td>4.00</td>
<td>X</td>
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<tr>
<td>(33) JO ANN KILTY BOARD MEMBER</td>
<td>4.00</td>
<td>X</td>
<td>0.</td>
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<td>0.</td>
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<tr>
<td>(34) JORDINE VON WANTOCH BOARD MEMBER (THRU 06/20)</td>
<td>4.00</td>
<td>X</td>
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<tr>
<td>(35) JULIS ARTHUR BOARD MEMBER</td>
<td>4.00</td>
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<tr>
<td>(36) KARIN L. SEDGWICK BOARD MEMBER, AUDIT CHAIR</td>
<td>8.00</td>
<td>X</td>
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<tr>
<td>(37) KAREN TANZ BOARD MEMBER</td>
<td>6.00</td>
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<tr>
<td>(38) KARIN WINNER BOARD MEMBER</td>
<td>4.00</td>
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<tr>
<td>(39) KEVEN LIPPERT BOARD MEMBER</td>
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<tr>
<td>(40) LYNNE WHEELER BOARD MEMBER</td>
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<tr>
<td>(41) MARGARITA WILKINSON BOARD MEMBER</td>
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<tr>
<td>(42) MARK DELFINO BOARD MEMBER</td>
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<tr>
<td>(43) MARY BETH ADDERLEY BOARD MEMBER</td>
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<tr>
<td>(44) MICHAEL TAYLOR BOARD MEMBER</td>
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<tr>
<td>(45) MUFFY WALKER BOARD MEMBER</td>
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<tr>
<td>(46) NICOLE A. CLAY BOARD IMMEDIATE PAST CHAIR</td>
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Total to Part VII, Section A, line 1c
### Part VII

#### Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week (list any hours for related organizations below line)</th>
<th>(C) Position (check all that apply)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
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<tbody>
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<td>(47) NISHMA HELD</td>
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<tr>
<td>(48) NOELLE NORTON, PH.D.</td>
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<tr>
<td>(49) PAM WAGNER</td>
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<tr>
<td>(50) PAMELA A. FARR</td>
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<td>(51) PAMELA MAUDSLEY-MERRILL</td>
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<td>(52) PAULA POWERS</td>
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<tr>
<td>BOARD SECRETARY, VICE CHAIR PHILANT</td>
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<td>(53) PETER J. COOPER</td>
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<td>(55) RHONA THOMPSON</td>
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<td>(56) RICHARD ESGATE</td>
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<td>(57) ROBERT FOXWORTH</td>
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<td>(58) RUBEN ISLAS</td>
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<tr>
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<tr>
<td>(59) SANDRA REDMAN</td>
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<tr>
<td>(60) SCOTT W. SCHMID</td>
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<td>(61) SEAN T. ANTHONY</td>
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<td>(62) SHEILA LIPINSKY</td>
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<td></td>
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<td></td>
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<tr>
<td>(63) SHERYL WHITE</td>
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<tr>
<td>BOARD PAST CHAIR, EX-OFFICIO</td>
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<tr>
<td>(64) SILVIJA DEVINE</td>
<td>4.00</td>
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<td>BOARD MEMBER</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>(65) STELLA LARSEN</td>
<td>4.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>BOARD MEMBER (THRU 08/20)</td>
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<tr>
<td>(66) STEPHANIE R. BULGER, PH.D.</td>
<td>6.00</td>
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<td>0.</td>
<td>0.</td>
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<tr>
<td>BOARD MEMBER</td>
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</table>

**Total to Part VII, Section A, line 1c**
### Part VII

#### Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

<table>
<thead>
<tr>
<th>Position</th>
<th>(A) Name and title</th>
<th>(B) Average hours per week</th>
<th>(C) Position (check all that apply)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(67) SUE SANDERSON</td>
<td>BOARD MEMBER, FINANCE CHAIR</td>
<td>8.00</td>
<td>0.50</td>
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<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>(68) SUSAN HOEHN</td>
<td>BOARD MEMBER</td>
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<td></td>
<td></td>
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<td>0.</td>
</tr>
<tr>
<td>(69) TERRY ATKINSON</td>
<td>BOARD MEMBER</td>
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<td>0.</td>
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<tr>
<td>(70) THOMAS MELODY</td>
<td>BOARD MEMBER (THRU 11/20)</td>
<td>4.00</td>
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<td></td>
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<td>0.</td>
</tr>
<tr>
<td>(71) VICKI L. ZEIGER</td>
<td>BOARD PAST CHAIR, EX-OFFICIO</td>
<td>6.00</td>
<td></td>
<td>X</td>
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</tr>
</tbody>
</table>

Total to Part VII, Section A, line 1c

---

**Notes:**

- (A) Name and title
- (B) Average hours per week (list any hours for related organizations below line)
- (C) Position (check all that apply: Individual trustee or director, Institutional trustee, Officer, Key employee, Highest compensated employee, Former)
- (D) Reportable compensation from the organization (W-2/1099-MISC)
- (E) Reportable compensation from related organizations (W-2/1099-MISC)
- (F) Estimated amount of other compensation from the organization and related organizations
### Part VIII: Statement of Revenue

**Check if Schedule O contains a response or note to any line in this Part VIII:**

<table>
<thead>
<tr>
<th>Contributions, Gifts, Grants and Other Similar Amounts</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512 - 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 a Federated campaigns</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 b Membership dues</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 c Fundraising events</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 d Related organizations</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 e Government grants (contributions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 f All other contributions, gifts, grants, and similar amounts not included above</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 g Noncash contributions included in lines 1a-1f</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>h Total, Add lines 1a-1f</td>
<td>$13,981,436.</td>
<td></td>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>Program Service Revenue</th>
<th>Business Code</th>
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</thead>
<tbody>
<tr>
<td>2 a ADMISSIONS</td>
<td>900099</td>
</tr>
<tr>
<td>2 b EDUCATIONAL PROGRAMS</td>
<td>611600</td>
</tr>
<tr>
<td>2 c</td>
<td></td>
</tr>
<tr>
<td>2 d</td>
<td></td>
</tr>
<tr>
<td>2 e</td>
<td></td>
</tr>
<tr>
<td>2 f All other program service revenue</td>
<td>900099</td>
</tr>
<tr>
<td>g Total, Add lines 2a-2f</td>
<td>$2,214,280.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Other Revenue</th>
<th>(i) Real</th>
<th>(ii) Personal</th>
</tr>
</thead>
<tbody>
<tr>
<td>3 Investment income (including dividends, interest, and other similar amounts)</td>
<td>$288,396.</td>
<td></td>
</tr>
<tr>
<td>4 Income from investment of tax-exempt bond proceeds</td>
<td>$4,093.</td>
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</tr>
<tr>
<td>6 a Gross rents</td>
<td>$7,805.</td>
<td></td>
</tr>
<tr>
<td>6 b Less: rental expenses</td>
<td>$52,779.</td>
<td>0.</td>
</tr>
<tr>
<td>6 c Rental income or (loss)</td>
<td>$-52,779.</td>
<td>$7,805.</td>
</tr>
<tr>
<td>6 d Net rental income or (loss)</td>
<td>$-44,974.</td>
<td>$-26,766.</td>
</tr>
<tr>
<td>7 a Gross amount from sales of assets other than inventory</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 a (i) Securities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 a (ii) Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 b Less: cost or other basis and sales expenses</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 c Gain or (loss)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 d Net gain or (loss)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Other Revenue</th>
<th>(i) Securities</th>
<th>(ii) Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>8 a Gross income from fundraising events (not including $554,958 of contributions reported on line 1c). See Part IV, line 18</td>
<td>$0.</td>
<td>$-9,394.</td>
</tr>
<tr>
<td>8 b Less: direct expenses</td>
<td>$-9,394.</td>
<td>$-9,394.</td>
</tr>
<tr>
<td>8 c Net income or (loss) from fundraising events</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Other Revenue</th>
<th>(i) Securities</th>
<th>(ii) Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>9 a Gross income from gaming activities. See Part IV, line 19</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 b Less: direct expenses</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 c Net income or (loss) from gaming activities</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Other Revenue</th>
<th>(i) Securities</th>
<th>(ii) Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>10 a Gross sales of inventory, less returns and allowances</td>
<td>$80,351.</td>
<td>$39,933.</td>
</tr>
<tr>
<td>10 b Less: cost of goods sold</td>
<td>$40,418.</td>
<td></td>
</tr>
<tr>
<td>10 c Net income or (loss) from sales of inventory</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Miscellaneous Revenue</th>
<th>Business Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>11 a</td>
<td></td>
</tr>
<tr>
<td>11 b</td>
<td></td>
</tr>
<tr>
<td>11 c</td>
<td></td>
</tr>
<tr>
<td>11 d All other revenue</td>
<td></td>
</tr>
<tr>
<td>e Total, Add lines 11a-11d</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Total revenue. See instructions</th>
<th></th>
</tr>
</thead>
</table>
## 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).

<table>
<thead>
<tr>
<th></th>
<th>(A) Total expenses</th>
<th>(B) Program service expenses</th>
<th>(C) Management and general expenses</th>
<th>(D) Fundraising expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21</td>
<td>122,666</td>
<td>122,666</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Grants and other assistance to domestic individuals. See Part IV, line 22</td>
<td>152,200</td>
<td>152,200</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Benefits paid to or for members</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Compensation of current officers, directors, trustees, and key employees</td>
<td>1,733,028</td>
<td>682,253</td>
<td>493,003</td>
</tr>
<tr>
<td>6</td>
<td>Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Other salaries and wages</td>
<td>6,231,305</td>
<td>4,592,235</td>
<td>900,035</td>
</tr>
<tr>
<td>8</td>
<td>Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)</td>
<td>222,567</td>
<td>198,084</td>
<td>10,875</td>
</tr>
<tr>
<td>9</td>
<td>Other employee benefits</td>
<td>697,619</td>
<td>573,659</td>
<td>67,194</td>
</tr>
<tr>
<td>10</td>
<td>Payroll taxes</td>
<td>608,857</td>
<td>436,921</td>
<td>89,096</td>
</tr>
<tr>
<td>11</td>
<td>Fees for services (nonemployees):</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Management</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Legal</td>
<td>16,525</td>
<td>9,502</td>
<td>7,023</td>
</tr>
<tr>
<td>c</td>
<td>Accounting</td>
<td>188,430</td>
<td>188,430</td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Lobbying</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Professional fundraising services. See Part IV, line 17</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f</td>
<td>Investment management fees</td>
<td>18,811</td>
<td>18,811</td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)</td>
<td>701,743</td>
<td>579,071</td>
<td>72,239</td>
</tr>
<tr>
<td>12</td>
<td>Advertising and promotion</td>
<td>244,053</td>
<td>237,388</td>
<td>978</td>
</tr>
<tr>
<td>13</td>
<td>Office expenses</td>
<td>295,330</td>
<td>162,998</td>
<td>109,720</td>
</tr>
<tr>
<td>14</td>
<td>Information technology</td>
<td>353,058</td>
<td>15,048</td>
<td>338,010</td>
</tr>
<tr>
<td>15</td>
<td>Royalties</td>
<td>515,573</td>
<td>515,573</td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Occupancy</td>
<td>297,484</td>
<td>254,503</td>
<td>42,981</td>
</tr>
<tr>
<td>17</td>
<td>Travel</td>
<td>88,721</td>
<td>84,168</td>
<td>3,000</td>
</tr>
<tr>
<td>18</td>
<td>Payments of travel or entertainment expenses for any federal, state, or local public officials</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Conferences, conventions, and meetings</td>
<td>9,949</td>
<td>3,678</td>
<td>4,731</td>
</tr>
<tr>
<td>20</td>
<td>Interest</td>
<td>91,871</td>
<td>74,307</td>
<td>17,564</td>
</tr>
<tr>
<td>21</td>
<td>Payments to affiliates</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Depreciation, depletion, and amortization</td>
<td>1,657,974</td>
<td>1,334,386</td>
<td>323,588</td>
</tr>
<tr>
<td>23</td>
<td>Insurance</td>
<td>429,118</td>
<td>251,303</td>
<td>164,466</td>
</tr>
<tr>
<td>24</td>
<td>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.)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Production</td>
<td>458,527</td>
<td>458,527</td>
<td>0</td>
</tr>
<tr>
<td>b</td>
<td>Maintenance</td>
<td>205,711</td>
<td>162,998</td>
<td>38,033</td>
</tr>
<tr>
<td>c</td>
<td>Bank charges</td>
<td>144,400</td>
<td>0</td>
<td>142,260</td>
</tr>
<tr>
<td>d</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>All other expenses</td>
<td>462,531</td>
<td>58,451</td>
<td>202,679</td>
</tr>
<tr>
<td>25</td>
<td>Total functional expenses. Add lines 1 through 24e</td>
<td>15,948,051</td>
<td>10,964,599</td>
<td>3,234,716</td>
</tr>
</tbody>
</table>

**Check if Schedule O contains a response or note to any line in this Part IX:**

- [ ]

**Check here if following SOP 98-2 (ASC 958-720):**

- [ ]

---

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Form 990 (2020) 032010 12-23-20

09441110 146892 33759 2020.05000 OLD GLOBE THEATRE 33759__1
### Form 990 (2020) | OLD GLOBE THEATRE 95-1543396 Page 11

**Part X | Balance Sheet**

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

<table>
<thead>
<tr>
<th></th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1,134,242.</td>
<td>155,589.</td>
</tr>
<tr>
<td>1</td>
<td>11,715,186.</td>
<td>5,391,418.</td>
</tr>
<tr>
<td>2</td>
<td>7,940,018.</td>
<td>7,881,294.</td>
</tr>
<tr>
<td>3</td>
<td>149,229.</td>
<td>49,161.</td>
</tr>
<tr>
<td>4</td>
<td>138,263.</td>
<td>144,704.</td>
</tr>
<tr>
<td>5</td>
<td>1,107,762.</td>
<td>145,057.</td>
</tr>
<tr>
<td>6</td>
<td>29,849,709.</td>
<td>29,693,775.</td>
</tr>
<tr>
<td>7</td>
<td>76,909,174.</td>
<td>79,168,056.</td>
</tr>
<tr>
<td>8</td>
<td>2,667,846.</td>
<td>1,148,904.</td>
</tr>
<tr>
<td>10</td>
<td>2,328,309.</td>
<td>2,149,701.</td>
</tr>
<tr>
<td>11</td>
<td>7,981,740.</td>
<td>9,387,316.</td>
</tr>
</tbody>
</table>

**Assets**

1. Cash - non-interest-bearing
2. Savings and temporary cash investments
3. Pledges and grants receivable, net
4. Accounts receivable, net
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
6. Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)
7. Notes and loans receivable, net
8. Inventories for sale or use
9. Prepaid expenses and deferred charges
10. Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D
11. Investments - publicly traded securities
12. Investments - other securities. See Part IV, line 11
13. Investments - program-related. See Part IV, line 11
14. Intangible assets
15. Other assets. See Part IV, line 11
16. **Total assets.** Add lines 1 through 15 (must equal line 33)

**Liabilities**

17. Accounts payable and accrued expenses
18. Grants payable
19. Deferred revenue
20. Tax-exempt bond liabilities
21. Escrow or custodial account liability. Complete Part IV of Schedule D
22. Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons
23. Secured mortgages and notes payable to unrelated third parties
24. Unsecured notes and loans payable to unrelated third parties
25. Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D
26. **Total liabilities.** Add lines 17 through 25

**Net Assets or Fund Balances**

27. Net assets without donor restrictions
28. Net assets with donor restrictions
29. Capital stock or trust principal, or current funds
30. Paid-in or capital surplus, or land, building, or equipment fund
31. Retained earnings, endowment, accumulated income, or other funds
32. Total net assets or fund balances
33. Total liabilities and net assets/fund balances

---

Form 990 (2020)
### Part XI | Reconciliation of Net Assets

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

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue (must equal Part VIII, column (A), line 12)</td>
<td>16,473,770.</td>
</tr>
<tr>
<td>2</td>
<td>Total expenses (must equal Part IX, column (A), line 25)</td>
<td>15,948,051.</td>
</tr>
<tr>
<td>3</td>
<td>Revenue less expenses. Subtract line 2 from line 1</td>
<td>525,719.</td>
</tr>
<tr>
<td>4</td>
<td>Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))</td>
<td>68,927,434.</td>
</tr>
<tr>
<td>5</td>
<td>Net unrealized gains (losses) on investments</td>
<td>327,587.</td>
</tr>
<tr>
<td>6</td>
<td>Donated services and use of facilities</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Investment expenses</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Prior period adjustments</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Other changes in net assets or fund balances (explain on Schedule O)</td>
<td>0.</td>
</tr>
<tr>
<td>10</td>
<td>Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))</td>
<td>69,780,740.</td>
</tr>
</tbody>
</table>

### Part XII | Financial Statements and Reporting

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

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Accounting method used to prepare the Form 990:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>☐ Cash ☒ Accrual ☐ Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2a</td>
<td>Were the organization's financial statements compiled or reviewed by an independent accountant?</td>
<td>☒</td>
<td></td>
</tr>
<tr>
<td></td>
<td>If &quot;Yes,&quot; check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2b</td>
<td>Were the organization's financial statements audited by an independent accountant?</td>
<td>☒</td>
<td></td>
</tr>
<tr>
<td></td>
<td>If &quot;Yes,&quot; check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2c</td>
<td>If &quot;Yes&quot; 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?</td>
<td>☒</td>
<td></td>
</tr>
<tr>
<td></td>
<td>If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3a</td>
<td>As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?</td>
<td>☒</td>
<td></td>
</tr>
<tr>
<td>3b</td>
<td>If &quot;Yes,&quot; did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Form 990 (2020)
## SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>OLD GLOBE THEATRE</td>
<td>95-1543396</td>
</tr>
</tbody>
</table>

### Part I

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

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

1. A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2. A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)
3. A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4. A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital’s name, city, and state:
5. An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
6. A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7. An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
8. A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
9. An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 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.)

- **a** Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.
- **b** Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.
- **c** Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.
- **d** Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.
- **e** Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- **f** Enter the number of supported organizations
- **g** Provide the following information about the supported organization(s).

<table>
<thead>
<tr>
<th>(i) Name of supported organization</th>
<th>(ii) EIN</th>
<th>(iii) Type of organization described on lines 1-10 above (see instructions)</th>
<th>(iv) Is the organization listed in your governing document?</th>
<th>(v) Amount of monetary support (see instructions)</th>
<th>(vi) Amount of other support (see instructions)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Yes</td>
<td>No</td>
<td></td>
</tr>
</tbody>
</table>

### Total

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
### Part II
**Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

#### Section A. Public Support

**Calendar year (or fiscal year beginning in)**

<table>
<thead>
<tr>
<th></th>
<th>(a) 2016</th>
<th>(b) 2017</th>
<th>(c) 2018</th>
<th>(d) 2019</th>
<th>(e) 2020</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Gifts, grants, contributions, and membership fees received. (Do not include any &quot;unusual grants.&quot;)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Tax revenues levied for the organization’s benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td><strong>Total. Add lines 1 through 3</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>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)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td><strong>Public support. Subtract line 5 from line 4.</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section B. Total Support

**Calendar year (or fiscal year beginning in)**

<table>
<thead>
<tr>
<th></th>
<th>(a) 2016</th>
<th>(b) 2017</th>
<th>(c) 2018</th>
<th>(d) 2019</th>
<th>(e) 2020</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>Amounts from line 4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Net income from unrelated business activities, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td><strong>Total support. Add lines 7 through 10</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Gross receipts from related activities, etc. (see instructions)</td>
<td>12</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td><strong>First 5 years. If the Form 990 is for the organization’s first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section C. Computation of Public Support Percentage

<table>
<thead>
<tr>
<th></th>
<th>14</th>
<th>15</th>
<th>16a</th>
<th>16b</th>
<th>17a</th>
<th>17b</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f))</td>
<td>14</td>
<td>15</td>
<td>16a</td>
<td>16b</td>
<td>17a</td>
</tr>
<tr>
<td></td>
<td>Public support percentage from 2019 Schedule A, Part II, line 14</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>33 1/3% support test - 2020.</strong> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>b 33 1/3% support test - 2019.</strong> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>10% -facts-and-circumstances test - 2020.</strong> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>b 10% -facts-and-circumstances test - 2019.</strong> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Private foundation.</strong> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Part III  Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization failed to qualify under the tests listed below, please complete Part II.)

### Section A. Public Support

**Calendar year (or fiscal year beginning in) →**

<table>
<thead>
<tr>
<th></th>
<th>(a) 2016</th>
<th>(b) 2017</th>
<th>(c) 2018</th>
<th>(d) 2019</th>
<th>(e) 2020</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>13416751.0</td>
<td>10050651.0</td>
<td>8761167.0</td>
<td>10409125.0</td>
<td>10481436.0</td>
<td>53119130.0</td>
</tr>
<tr>
<td>2</td>
<td>14650624.0</td>
<td>13802207.0</td>
<td>17139693.0</td>
<td>18767171.0</td>
<td>2218002.0</td>
<td>66577697.0</td>
</tr>
</tbody>
</table>

### Section B. Total Support

**Calendar year (or fiscal year beginning in) →**

<table>
<thead>
<tr>
<th></th>
<th>(a) 2016</th>
<th>(b) 2017</th>
<th>(c) 2018</th>
<th>(d) 2019</th>
<th>(e) 2020</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9</td>
<td>28067375.0</td>
<td>23852858.0</td>
<td>25900860.0</td>
<td>29176296.0</td>
<td>12699438.0</td>
<td>119696827.0</td>
</tr>
</tbody>
</table>

**Total. Add lines 1 through 5**

|   | 28067375.0 | 23852858.0 | 25900860.0 | 29176296.0 | 12699438.0 | 119696827.0 |

### Section C. Computation of Public Support Percentage

<table>
<thead>
<tr>
<th></th>
<th>(a) 2016</th>
<th>(b) 2017</th>
<th>(c) 2018</th>
<th>(d) 2019</th>
<th>(e) 2020</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td>28067375.0</td>
<td>23852858.0</td>
<td>25900860.0</td>
<td>29176296.0</td>
<td>12699438.0</td>
<td>119696827.0</td>
</tr>
</tbody>
</table>

**Public support. Subtract line 7c from line 6**

|   | 97561440.0 |

### Section D. Computation of Investment Income Percentage

<table>
<thead>
<tr>
<th></th>
<th>(a) 2016</th>
<th>(b) 2017</th>
<th>(c) 2018</th>
<th>(d) 2019</th>
<th>(e) 2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>17</td>
<td>572,298.0</td>
<td>634,937.0</td>
<td>733,329.0</td>
<td>685,401.0</td>
<td>76,629.0</td>
</tr>
<tr>
<td>18</td>
<td>28932240.0</td>
<td>24736775.0</td>
<td>26826994.0</td>
<td>30274149.0</td>
<td>13076361.0</td>
</tr>
</tbody>
</table>

**Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f))**

**Investment income percentage from 2019 Schedule A, Part III, line 17**

<table>
<thead>
<tr>
<th></th>
<th>(a) 2016</th>
<th>(b) 2017</th>
<th>(c) 2018</th>
<th>(d) 2019</th>
<th>(e) 2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>19</td>
<td>1.17 %</td>
<td>1.05 %</td>
<td>0.78 %</td>
<td>0.77 %</td>
<td>0.33 %</td>
</tr>
</tbody>
</table>

**33 1/3% support tests - 2020.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, the organization qualifies as a publicly supported organization.

**33 1/3% support tests - 2019.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.

**Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.
### Part IV  
**Supporting Organizations**

(Complete only if you checked a box in line 12 on 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

<table>
<thead>
<tr>
<th>Line</th>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Are all of the organization’s supported organizations listed by name in the organization’s governing documents? If &quot;No,&quot; 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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If &quot;Yes,&quot; explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3a</td>
<td>Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If &quot;Yes,&quot; answer lines 3b and 3c below.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>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 &quot;Yes,&quot; describe in Part VI when and how the organization made the determination.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If &quot;Yes,&quot; explain in Part VI what controls the organization put in place to ensure such use.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4a</td>
<td>Was any supported organization not organized in the United States (&quot;foreign supported organization&quot;)? If &quot;Yes,&quot; and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If &quot;Yes,&quot; 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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>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 &quot;Yes,&quot; 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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5a</td>
<td>Did the organization add, substitute, or remove any supported organizations during the tax year? If &quot;Yes,&quot; 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).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5b</td>
<td>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?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5c</td>
<td>Substitutions only. Was the substitution the result of an event beyond the organization’s control?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>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 &quot;Yes,&quot; provide detail in Part VI.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>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 &quot;Yes,&quot; complete Part I of Schedule L (Form 990 or 990-EZ).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If &quot;Yes,&quot; complete Part I of Schedule L (Form 990 or 990-EZ).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9a</td>
<td>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 &quot;Yes,&quot; provide detail in Part VI.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If &quot;Yes,&quot; provide detail in Part VI.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If &quot;Yes,&quot; provide detail in Part VI.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a</td>
<td>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 &quot;Yes,&quot; answer line 10b below.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>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.)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

Schedule A (Form 990 or 990-EZ) 2020  
OLD GLOBE THEATRE  
95-1543396  
Page 4

19

032024 01-25-21

09441110 146892 33759  
2020.05000 OLD GLOBE THEATRE  
33759__1
Part IV  Supporting Organizations  (continued)

11  Has the organization accepted a gift or contribution from any of the following persons?
   a  A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?
   b  A family member of a person described in line 11a above?
   c  A 35% controlled entity of a person described in line 11a or 11b above?  If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.

Section B.  Type I Supporting Organizations

1  Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization’s officers, directors, or trustees at all times during the tax year?  If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization’s activities.  If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
   Yes  No

2  Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization?  If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.
   Yes  No

Section C.  Type II Supporting Organizations

1  Were a majority of the organization’s directors or trustees during the tax year also a majority of the directors or trustees of each of the organization’s supported organization(s)?  If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).
   Yes  No

Section D.  All Type III Supporting Organizations

1  Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization’s tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization’s governing documents in effect on the date of notification, to the extent not previously provided?
   Yes  No

2  Were any of the organization’s officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization?  If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).
   Yes  No

3  By reason of the relationship described in line 2, above, did the organization’s supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization’s income or assets at all times during the tax year?  If "Yes," describe in Part VI the role the organization’s supported organizations played in this regard.
   Yes  No

Section E.  Type III Functionally Integrated Supporting Organizations

1  Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
   a  The organization satisfied the Activities Test.  Complete line 2 below.
   b  The organization is the parent of each of its supported organizations.  Complete line 3 below.
   c  The organization supported a governmental entity.  Describe in Part VI how you supported a governmental entity (see instructions).
   Yes  No

2  Activities Test.  Answer lines 2a and 2b below.
   a  Did substantially all of the organization’s activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive?  If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
   b  Did the activities described in line 2a, above, constitute activities that, but for the organization’s involvement, one or more of the organization’s supported organization(s) would have been engaged in?  If "Yes," explain in Part VI the reasons for the organization’s position that its supported organization(s) would have engaged in these activities but for the organization’s involvement.
   Yes  No

3  Parent of Supported Organizations.  Answer lines 3a and 3b below.
   a  Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations?  If "Yes" or "No" provide details in Part VI.
   b  Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations?  If "Yes," describe in Part VI the role played by the organization in this regard.
   Yes  No
### Part VI

See instructions.

### Section A - Adjusted Net Income

<table>
<thead>
<tr>
<th></th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Net short-term capital gain</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Recoveries of prior-year distributions</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Other gross income (see instructions)</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Add lines 1 through 3.</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Depreciation and depletion</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>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)</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Other expenses (see instructions)</td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td><strong>Adjusted Net Income</strong> (subtract lines 5, 6, and 7 from line 4)</td>
<td>8</td>
</tr>
</tbody>
</table>

### Section B - Minimum Asset Amount

<table>
<thead>
<tr>
<th></th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Average monthly value of securities</td>
<td>1a</td>
</tr>
<tr>
<td>b</td>
<td>Average monthly cash balances</td>
<td>1b</td>
</tr>
<tr>
<td>c</td>
<td>Fair market value of other non-exempt-use assets</td>
<td>1c</td>
</tr>
<tr>
<td>d</td>
<td><strong>Total</strong> (add lines 1a, 1b, and 1c)</td>
<td>1d</td>
</tr>
<tr>
<td>e</td>
<td><strong>Discount</strong> claimed for blockage or other factors (explain in detail in Part VI):</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Acquisition indebtedness applicable to non-exempt-use assets</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2 from line 1d.</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Net value of non-exempt-use assets (subtract line 4 from line 3)</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>Multiply line 5 by 0.035.</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Recoveries of prior-year distributions</td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td><strong>Minimum Asset Amount</strong> (add line 7 to line 6)</td>
<td>8</td>
</tr>
</tbody>
</table>

### Section C - Distributable Amount

<table>
<thead>
<tr>
<th></th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Adjusted net income for prior year (from Section A, line 8, column A)</td>
</tr>
<tr>
<td>2</td>
<td>Enter 0.85 of line 1.</td>
</tr>
<tr>
<td>3</td>
<td>Minimum asset amount for prior year (from Section B, line 8, column A)</td>
</tr>
<tr>
<td>4</td>
<td>Enter greater of line 2 or line 3.</td>
</tr>
<tr>
<td>5</td>
<td>Income tax imposed in prior year</td>
</tr>
<tr>
<td>6</td>
<td><strong>Distributable Amount.</strong> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).</td>
</tr>
</tbody>
</table>

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).
### Section D - Distributions

<table>
<thead>
<tr>
<th></th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Amounts paid to supported organizations to accomplish exempt purposes</td>
</tr>
<tr>
<td>2</td>
<td>Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity</td>
</tr>
<tr>
<td>3</td>
<td>Administrative expenses paid to accomplish exempt purposes of supported organizations</td>
</tr>
<tr>
<td>4</td>
<td>Amounts paid to acquire exempt-use assets</td>
</tr>
<tr>
<td>5</td>
<td>Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)</td>
</tr>
<tr>
<td>6</td>
<td>Other distributions (describe in Part VI). See instructions.</td>
</tr>
<tr>
<td>7</td>
<td><strong>Total annual distributions.</strong> Add lines 1 through 6.</td>
</tr>
<tr>
<td>8</td>
<td>Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.</td>
</tr>
<tr>
<td>9</td>
<td>Distributable amount for 2020 from Section C, line 6</td>
</tr>
<tr>
<td>10</td>
<td>Line 8 amount divided by line 9 amount</td>
</tr>
</tbody>
</table>

### Section E - Distribution Allocations (see instructions)

<table>
<thead>
<tr>
<th></th>
<th>(i) Excess Distributions</th>
<th>(ii) Underdistributions Pre-2020</th>
<th>(iii) Distributable Amount for 2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Distributable amount for 2020 from Section C, line 6</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>2</td>
<td>Underdistributions, if any, for years prior to 2020 (reasonable cause required - explain in Part VI). See instructions.</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>3</td>
<td>Excess distributions carryover, if any, to 2020</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>a</td>
<td>From 2015</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>b</td>
<td>From 2016</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>c</td>
<td>From 2017</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>d</td>
<td>From 2018</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>e</td>
<td>From 2019</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>f</td>
<td><strong>Total</strong> of lines 3a through 3e</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>g</td>
<td>Applied to underdistributions of prior years</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>h</td>
<td>Applied to 2020 distributable amount</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>i</td>
<td>Carryover from 2015 not applied (see instructions)</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>j</td>
<td>Remainder. Subtract lines 3g, 3h, and 3i from line 3f.</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>4</td>
<td>Distributions for 2020 from Section D, line 7:</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>a</td>
<td>Applied to underdistributions of prior years</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>b</td>
<td>Applied to 2020 distributable amount</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>c</td>
<td>Remainder. Subtract lines 4a and 4b from line 4.</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>5</td>
<td>Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>6</td>
<td>Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>7</td>
<td><strong>Excess distributions carryover to 2021.</strong> Add lines 3j and 4c.</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>8</td>
<td>Breakdown of line 7:</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>a</td>
<td>Excess from 2016</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>b</td>
<td>Excess from 2017</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>c</td>
<td>Excess from 2018</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>d</td>
<td>Excess from 2019</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>e</td>
<td>Excess from 2020</td>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>

Schedule A (Form 990 or 990-EZ) 2020
SCHEDULE A, PART III, LINE 12, EXPLANATION FOR OTHER INCOME:

OTHER INCOME

2016 AMOUNT: $572,298.

2017 AMOUNT: $634,937.

2018 AMOUNT: $733,329.


2020 AMOUNT: $76,629.

SCHEDULE A, LIST OF UNUSUAL GRANTS RECEIVED:

DESCRIPTION: UNUSUAL GRANT

DATE: 12/31/19      AMOUNT: 65955451.

DESCRIPTION: UNUSUAL GRANT

DATE: 12/31/20      AMOUNT: 3500000.
** PUBLIC DISCLOSURE COPY **

### Schedule B

(Form 990, 990-EZ, or 990-PF)

<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>OLD GLOBE THEATRE</td>
<td>95–1543396</td>
</tr>
</tbody>
</table>

#### Organization type (check one):

- [X] Form 990 or 990-EZ
- [ ] Form 990-PF

#### Filers of:

- [X] 501(c)(3) (enter number) organization
- [ ] 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- [ ] 527 political organization
- [ ] 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 or 990-EZ), 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, 990-EZ, or 990-PF), 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, 990-EZ, or 990-PF).
### Part I: Contributors
(see instructions). Use duplicate copies of Part I if additional space is needed.

<table>
<thead>
<tr>
<th>(a) No.</th>
<th>(b) Name, address, and ZIP + 4</th>
<th>(c) Total contributions</th>
<th>(d) Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td>$50,000.</td>
<td>Person</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
<tr>
<td>(Complete Part II for noncash contributions.)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td>$10,000.</td>
<td>Person</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
<tr>
<td>(Complete Part II for noncash contributions.)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td>$45,000.</td>
<td>Person</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
<tr>
<td>(Complete Part II for noncash contributions.)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
<td>$401,602.</td>
<td>Person</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
<tr>
<td>(Complete Part II for noncash contributions.)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td>$13,000.</td>
<td>Person</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
<tr>
<td>(Complete Part II for noncash contributions.)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td>$6,000.</td>
<td>Person</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
<tr>
<td>(Complete Part II for noncash contributions.)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Part I  Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td></td>
<td>$ 5,000.</td>
<td>Person X Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
</tbody>
</table>

(Complete Part II for noncash contributions.)

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td></td>
<td>$ 10,000.</td>
<td>Person X Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
</tbody>
</table>

(Complete Part II for noncash contributions.)

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>9</td>
<td></td>
<td>$ 25,000.</td>
<td>Person X Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
</tbody>
</table>

(Complete Part II for noncash contributions.)

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>10</td>
<td></td>
<td>$ 6,588.</td>
<td>Person X Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
</tbody>
</table>

(Complete Part II for noncash contributions.)

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>11</td>
<td></td>
<td>$ 10,000.</td>
<td>Person X Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
</tbody>
</table>

(Complete Part II for noncash contributions.)

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>12</td>
<td></td>
<td>$ 5,000.</td>
<td>Person X Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
</tbody>
</table>

(Complete Part II for noncash contributions.)
### Part I

**Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>13</td>
<td></td>
<td>$7,210.</td>
<td>Payroll</td>
</tr>
<tr>
<td>14</td>
<td></td>
<td>$50,000.</td>
<td>Payroll</td>
</tr>
<tr>
<td>15</td>
<td></td>
<td>$1,000,000.</td>
<td>Payroll</td>
</tr>
<tr>
<td>16</td>
<td></td>
<td>$14,000.</td>
<td>Payroll</td>
</tr>
<tr>
<td>17</td>
<td></td>
<td>$115,000.</td>
<td>Payroll</td>
</tr>
<tr>
<td>18</td>
<td></td>
<td>$50,000.</td>
<td>Payroll</td>
</tr>
</tbody>
</table>

(Complete Part II for noncash contributions.)
**Old Globe Theatre**

**Employer identification number**

95-1543396

### Part I

**Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>19</td>
<td></td>
<td>$15,663.</td>
<td>[X] Noncash</td>
</tr>
<tr>
<td>20</td>
<td></td>
<td>$130,000.</td>
<td>[X] Payroll</td>
</tr>
<tr>
<td>21</td>
<td></td>
<td>$7,500.</td>
<td>[X] Person</td>
</tr>
<tr>
<td>22</td>
<td></td>
<td>$5,000.</td>
<td>[X] Payroll</td>
</tr>
<tr>
<td>23</td>
<td></td>
<td>$5,500.</td>
<td>[X] Person</td>
</tr>
<tr>
<td>24</td>
<td></td>
<td>$6,000.</td>
<td>[X] Payroll</td>
</tr>
</tbody>
</table>
### Part I

**Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>25</td>
<td></td>
<td>$10,175.</td>
<td>Payroll</td>
</tr>
<tr>
<td>26</td>
<td></td>
<td>$5,175.</td>
<td>Payroll</td>
</tr>
<tr>
<td>27</td>
<td></td>
<td>$7,000.</td>
<td>Payroll</td>
</tr>
<tr>
<td>28</td>
<td></td>
<td>$5,000.</td>
<td>Payroll</td>
</tr>
<tr>
<td>29</td>
<td></td>
<td>$6,000.</td>
<td>Payroll</td>
</tr>
<tr>
<td>30</td>
<td></td>
<td>$90,933.</td>
<td>Payroll</td>
</tr>
</tbody>
</table>

(Complete Part II for noncash contributions.)
### Part I  Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>31</td>
<td></td>
<td>$30,000.00</td>
<td>Person X, Payroll</td>
</tr>
<tr>
<td>32</td>
<td></td>
<td>$20,000.00</td>
<td>Person X, Payroll</td>
</tr>
<tr>
<td>33</td>
<td></td>
<td>$9,000.00</td>
<td>Person X, Payroll</td>
</tr>
<tr>
<td>34</td>
<td></td>
<td>$5,000.00</td>
<td>Person X, Payroll</td>
</tr>
<tr>
<td>35</td>
<td></td>
<td>$25,000.00</td>
<td>Person X, Payroll</td>
</tr>
<tr>
<td>36</td>
<td></td>
<td>$5,000.00</td>
<td>Person X, Payroll</td>
</tr>
</tbody>
</table>
## Part I  Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

<table>
<thead>
<tr>
<th>(a) No.</th>
<th>(b) Name, address, and ZIP + 4</th>
<th>(c) Total contributions</th>
<th>(d) Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>37</td>
<td></td>
<td>$ 25,000.</td>
<td>Person X, Payroll</td>
</tr>
<tr>
<td>38</td>
<td></td>
<td>$ 25,000.</td>
<td>Person X, Payroll</td>
</tr>
<tr>
<td>39</td>
<td></td>
<td>$ 40,000.</td>
<td>Person X, Payroll</td>
</tr>
<tr>
<td>40</td>
<td></td>
<td>$ 345,232.</td>
<td>Person X, Payroll</td>
</tr>
<tr>
<td>41</td>
<td></td>
<td>$ 45,000.</td>
<td>Person X, Payroll</td>
</tr>
<tr>
<td>42</td>
<td></td>
<td>$ 145,000.</td>
<td>Person X, Payroll</td>
</tr>
</tbody>
</table>
### Part I  Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

<table>
<thead>
<tr>
<th>(a) No.</th>
<th>(b) Name, address, and ZIP + 4</th>
<th>(c) Total contributions</th>
<th>(d) Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>43</td>
<td></td>
<td>$ 60,000.</td>
<td>Person ☒ Payroll ☐ Noncash ☐</td>
</tr>
<tr>
<td>44</td>
<td></td>
<td>$ 75,000.</td>
<td>Person ☒ Payroll ☐ Noncash ☐</td>
</tr>
<tr>
<td>45</td>
<td></td>
<td>$ 50,000.</td>
<td>Person ☒ Payroll ☐ Noncash ☐</td>
</tr>
<tr>
<td>46</td>
<td></td>
<td>$ 7,500.</td>
<td>Person ☒ Payroll ☐ Noncash ☐</td>
</tr>
<tr>
<td>47</td>
<td></td>
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### Old Globe Theatre

**Employer identification number**

95-1543396

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(Complete Part II for noncash contributions.)
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(Complete Part II for noncash contributions.)

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(Complete Part II for noncash contributions.)

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<td>$597,795.</td>
<td>Person</td>
<td>Payroll</td>
</tr>
<tr>
<td>216</td>
<td>$25,000.</td>
<td>Person</td>
<td>Payroll</td>
</tr>
</tbody>
</table>
**Part I  Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>217</td>
<td></td>
<td>$25,000.</td>
<td>Person ☒, Payroll ☐, Noncash ☐</td>
</tr>
<tr>
<td>218</td>
<td></td>
<td>$26,000.</td>
<td>Person ☒, Payroll ☐, Noncash ☐</td>
</tr>
<tr>
<td>219</td>
<td></td>
<td>$35,000.</td>
<td>Person ☒, Payroll ☐, Noncash ☐</td>
</tr>
<tr>
<td>220</td>
<td></td>
<td>$10,000.</td>
<td>Person ☒, Payroll ☐, Noncash ☐</td>
</tr>
<tr>
<td>221</td>
<td></td>
<td>$27,000.</td>
<td>Person ☒, Payroll ☐, Noncash ☐</td>
</tr>
<tr>
<td>222</td>
<td></td>
<td>$35,000.</td>
<td>Person ☒, Payroll ☐, Noncash ☐</td>
</tr>
</tbody>
</table>
## Part I  Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>223</td>
<td></td>
<td>$5,000.</td>
<td>Person X Payroll</td>
</tr>
<tr>
<td>224</td>
<td></td>
<td>$5,000.</td>
<td>Person X Payroll</td>
</tr>
<tr>
<td>225</td>
<td></td>
<td>$281,106.</td>
<td>Person X Noncash</td>
</tr>
<tr>
<td>226</td>
<td></td>
<td>$5,500.</td>
<td>Person Noncash</td>
</tr>
<tr>
<td>227</td>
<td></td>
<td>$11,537.</td>
<td>Person Noncash</td>
</tr>
<tr>
<td>228</td>
<td></td>
<td>$50,200.</td>
<td>Person Noncash</td>
</tr>
<tr>
<td>No. from Part I</td>
<td>Description of noncash property given</td>
<td>FMV (or estimate)</td>
<td>Date received</td>
</tr>
<tr>
<td>----------------</td>
<td>---------------------------------------</td>
<td>-------------------</td>
<td>--------------</td>
</tr>
<tr>
<td>4</td>
<td>STOCK 3355 SHARES OF GILEAD SCIENCES SYMBOL GILD</td>
<td>$201,602.</td>
<td>12/14/20</td>
</tr>
<tr>
<td>19</td>
<td>STOCK 36 SHARES OF PAYCOM SYMBOL PAYC</td>
<td>$15,663.</td>
<td>12/04/20</td>
</tr>
<tr>
<td>58</td>
<td>500 SHARES OF GENERAL ELECTRIC SYMBOL GE</td>
<td>$5,328.</td>
<td>12/29/20</td>
</tr>
<tr>
<td>59</td>
<td>38 SHARES OF DEERE AND COMPANY SYMBOL DE</td>
<td>$9,065.</td>
<td>10/23/20</td>
</tr>
<tr>
<td>79</td>
<td>50 SHARES OF JACOBS ENGINEERING GROUP SYMBOL J</td>
<td>$5,107.</td>
<td>02/24/20</td>
</tr>
<tr>
<td>101</td>
<td>25 SHARES OF TESLA SYMBOL TSLA</td>
<td>$23,480.</td>
<td>06/09/20</td>
</tr>
</tbody>
</table>
## Part II Noncash Property

<table>
<thead>
<tr>
<th>No. from Part I</th>
<th>Description of noncash property given</th>
<th>FMV (or estimate) (See instructions.)</th>
<th>Date received</th>
</tr>
</thead>
<tbody>
<tr>
<td>148</td>
<td>14 SHARES OF COSTCO SYMBOL COST</td>
<td>$5,230.</td>
<td>12/04/20</td>
</tr>
<tr>
<td>149</td>
<td>80 SHARES OF QUALCOMM SYMBOL QCOM</td>
<td>$10,123.</td>
<td>10/26/20</td>
</tr>
<tr>
<td>192</td>
<td>1936 SHARES OF DFA EMERGING MARKETS CORE EQUITY PORTFOLIO INSTITUTIONAL CLASS SYMBOL DFCEX</td>
<td>$32,505.</td>
<td>05/06/20</td>
</tr>
<tr>
<td>204</td>
<td>197 SHARES OF MICROSOFT; 32 SHARES OF CINTAS CORP; 48 SHARES OF MICROSOFT</td>
<td>$51,019.</td>
<td>12/17/20</td>
</tr>
<tr>
<td>226</td>
<td>FOOD AND BEVERAGE</td>
<td>$5,500.</td>
<td>12/31/20</td>
</tr>
<tr>
<td>227</td>
<td>BOOKS AND PUBLICATIONS</td>
<td>$11,537.</td>
<td>12/31/20</td>
</tr>
</tbody>
</table>
### Part II  Noncash Property

<table>
<thead>
<tr>
<th>No. from Part I</th>
<th>Description of noncash property given</th>
<th>FMV (or estimate)</th>
<th>Date received</th>
</tr>
</thead>
<tbody>
<tr>
<td>228</td>
<td>FOOD AND BEVERAGE</td>
<td>$ 50,200.</td>
<td>12/31/20</td>
</tr>
<tr>
<td></td>
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</tr>
</tbody>
</table>
Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of $1,000 or less for the year. (Enter this info. once.) ▶ $ 

<table>
<thead>
<tr>
<th>No. from Part I</th>
<th>Purpose of gift</th>
<th>Use of gift</th>
<th>Description of how gift is held</th>
<th>Transferee's name, address, and ZIP + 4</th>
<th>Relationship of transferor to transferee</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

Use duplicate copies of Part III if additional space is needed.
### Part I  Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

<table>
<thead>
<tr>
<th></th>
<th>(a) Donor advised funds</th>
<th>(b) Funds and other accounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total number at end of year</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Aggregate value of contributions to (during year)</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Aggregate value of grants from (during year)</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Aggregate value at end of year</td>
<td></td>
</tr>
</tbody>
</table>

#### Purpose(s) of conservation easements held by the organization (check all that apply).
- Preservation of land for public use (for example, recreation or education)
- Preservation of a historically important land area
- Protection of natural habitat
- Preservation of a certified historic structure
- Preservation of open space

#### Conservation Easements.

2. Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

<table>
<thead>
<tr>
<th></th>
<th>Held at the End of the Tax Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
<td>Total number of conservation easements</td>
</tr>
<tr>
<td>2b</td>
<td>Total acreage restricted by conservation easements</td>
</tr>
<tr>
<td>2c</td>
<td>Number of conservation easements on a certified historic structure included in (a)</td>
</tr>
<tr>
<td>2d</td>
<td>Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register</td>
</tr>
</tbody>
</table>

3. Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year.

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

5. Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 

6. Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year.

7. Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year.

8. Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

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

### Part III  Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a. If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

1b. If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

   (i) 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 treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

   (a) Revenue included on Form 990, Part VIII, line 1
   (b) Assets included in Form 990, Part X

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part III: Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3. Using the organization’s acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):

- Public exhibition
- Scholarly research
- Preservation for future generations
- Loan or exchange program
- Other

4. Provide a description of the organization’s collections and explain how they further the organization’s exempt purpose in Part XIII.

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

### Part IV: Escrow and Custodial Arrangements.

Complete if the organization answered “Yes” on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

- Yes
- No

b. If “Yes,” explain the arrangement in Part XIII and complete the following table:

<table>
<thead>
<tr>
<th>Description of Property</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Loan or exchange program</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
</tr>
</tbody>
</table>

2a. Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

- Yes
- No

b. If “Yes,” explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII.

### Part V: Endowment Funds.

Complete if the organization answered “Yes” on Form 990, Part IV, line 10.

1a. Beginning of year balance

<table>
<thead>
<tr>
<th>(a) Current year</th>
<th>(b) Prior year</th>
<th>(c) Two years back</th>
<th>(d) Three years back</th>
<th>(e) Four years back</th>
</tr>
</thead>
<tbody>
<tr>
<td>835,282</td>
<td>705,094</td>
<td>641,228</td>
<td>572,448</td>
<td>438,797</td>
</tr>
</tbody>
</table>

b. Contributions

<table>
<thead>
<tr>
<th>(a) Cost or other basis (investment)</th>
<th>(b) Cost or other basis (other)</th>
<th>(c) Accumulated depreciation</th>
<th>(d) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1,750,000</td>
<td>1,750,000</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5,444,980</td>
<td>3,102,243</td>
<td>2,342,737</td>
<td></td>
</tr>
<tr>
<td>34,714,524</td>
<td>18,846,128</td>
<td>15,868,396</td>
<td></td>
</tr>
<tr>
<td>6,529,378</td>
<td>5,175,272</td>
<td>1,354,106</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>21,315,239</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Part VI: Land, Buildings, and Equipment.

Complete if the organization answered “Yes” on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

<table>
<thead>
<tr>
<th>Description of Property</th>
<th>(a) Cost or other basis (investment)</th>
<th>(b) Cost or other basis (other)</th>
<th>(c) Accumulated depreciation</th>
<th>(d) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Land</td>
<td>1,750,000</td>
<td>1,750,000</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Buildings</td>
<td>5,444,980</td>
<td>3,102,243</td>
<td>2,342,737</td>
<td></td>
</tr>
<tr>
<td>Leasehold improvements</td>
<td>34,714,524</td>
<td>18,846,128</td>
<td>15,868,396</td>
<td></td>
</tr>
<tr>
<td>Equipment</td>
<td>6,529,378</td>
<td>5,175,272</td>
<td>1,354,106</td>
<td></td>
</tr>
</tbody>
</table>

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)
**Part VII** Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

<table>
<thead>
<tr>
<th>(a) Description of security or category (including name of security)</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Financial derivatives</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Closely held equity interests</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(A)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(B)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(C)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(D)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(E)</td>
<td></td>
<td></td>
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<tr>
<td>(F)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(G)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(H)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)

<table>
<thead>
<tr>
<th>Part VIII</th>
<th>Investments - Program Related.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Complete if the organization answered &quot;Yes&quot; on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.</td>
</tr>
<tr>
<td>(a) Description of investment</td>
<td>(b) Book value</td>
</tr>
<tr>
<td>(1)</td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
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<tr>
<td>(4)</td>
<td></td>
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<tr>
<td>(5)</td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Part IX</th>
<th>Other Assets.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Complete if the organization answered &quot;Yes&quot; on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.</td>
<td></td>
</tr>
<tr>
<td>(a) Description</td>
<td>(b) Book value</td>
</tr>
<tr>
<td>(1) INVESTMENT IN LIMITED PARTNERSHIP</td>
<td>28,955,451.</td>
</tr>
<tr>
<td>(2) CHARITABLE REMAINDER TRUST</td>
<td>738,324.</td>
</tr>
<tr>
<td>(3)</td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
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<tr>
<td>(7)</td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
</tr>
</tbody>
</table>

Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) 29,693,775.

<table>
<thead>
<tr>
<th>Part X</th>
<th>Other Liabilities.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Complete if the organization answered &quot;Yes&quot; on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.</td>
<td></td>
</tr>
<tr>
<td>(a) Description of liability</td>
<td>(b) Book value</td>
</tr>
<tr>
<td>(1) Federal income taxes</td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
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<td>(5)</td>
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<td>(6)</td>
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<td>(7)</td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
</tr>
</tbody>
</table>

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 X

Schedule D (Form 990) 2020
THE ORGANIZATION CONTINUES RAISING FUNDS DIRECTLY FOR THE ENDOWMENT WITH THE INTENT THAT A 5% ANNUAL DRAW WILL COVER THE STRUCTURAL DEFICIT BETWEEN EARNED/CONTRIBUTED REVENUE AND EXPENSE NEEDED TO FULFILL ITS MISSION.

PART X, LINE 2:

AND 2019, THE OLD GLOBE FILES AN EXEMPT ORGANIZATION RETURN IN THE UNITED STATES FEDERAL JURISDICTION AND WITH THE FRANCHISE TAX BOARD IN THE STATE OF CALIFORNIA.

<table>
<thead>
<tr>
<th>PART XI, LINE 2D - OTHER ADJUSTMENTS:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>COST OF GOODS SOLD</td>
<td>40,418.</td>
</tr>
<tr>
<td>CONSOLIDATED ENDOWMENT REVENUE</td>
<td>5,323,193.</td>
</tr>
<tr>
<td>RENTAL EXPENSE RECLASS</td>
<td>52,779.</td>
</tr>
<tr>
<td>TOTAL TO SCHEDULE D, PART XI, LINE 2D</td>
<td>5,416,390.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>PART XI, LINE 4B - OTHER ADJUSTMENTS:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>CONSOLIDATED ELIMINATION ENTRY</td>
<td>540,035.</td>
</tr>
<tr>
<td>SPECIAL EVENT EXPENSES</td>
<td>-9,394.</td>
</tr>
<tr>
<td>TOTAL TO SCHEDULE D, PART XI, LINE 4B</td>
<td>530,641.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>PART XII, LINE 2D - OTHER ADJUSTMENTS:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>COST OF GOODS SOLD</td>
<td>40,418.</td>
</tr>
<tr>
<td>CONSOLIDATED ENDOWMENT EXPENSES</td>
<td>417,369.</td>
</tr>
<tr>
<td>RENTAL EXPENSE RECLASS</td>
<td>52,779.</td>
</tr>
<tr>
<td>SPECIAL EVENT EXPENSES</td>
<td>9,394.</td>
</tr>
<tr>
<td>TOTAL TO SCHEDULE D, PART XII, LINE 2D</td>
<td>519,960.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>PART XII, LINE 4B - OTHER ADJUSTMENTS:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>CONSOLIDATED ELIMINATION ENTRY</td>
<td>540,035.</td>
</tr>
</tbody>
</table>
SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

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

Name of the organization: OLD GLOBE THEATRE

Employer identification number: 95-1543396

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1. Indicate whether the organization raised funds through any of the following activities. Check all that apply.
   - Mail solicitations
   - Internet and email solicitations
   - Phone solicitations
   - In-person solicitations
   - Solicitation of non-government grants
   - Solicitation of government grants
   - Special fundraising events

2. Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  
   - Yes
   - No

   If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

<table>
<thead>
<tr>
<th>(i) Name and address of individual or entity (fundraiser)</th>
<th>(ii) Activity</th>
<th>(iii) Did fundraiser have custody or control of contributions?</th>
<th>(iv) Gross receipts from activity</th>
<th>(v) Amount paid to (or retained by) fundraiser listed in col. (i)</th>
<th>(vi) Amount paid to (or retained by) organization</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total

3. List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

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

Schedule G (Form 990 or 990-EZ) 2020
### Part II  Fundraising Events
Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

<table>
<thead>
<tr>
<th>Column (a)</th>
<th>Column (b)</th>
<th>Column (c)</th>
<th>Column (d)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Event #1</td>
<td>Event #2</td>
<td>Other events</td>
<td>Total events</td>
</tr>
<tr>
<td>(event type)</td>
<td>(event type)</td>
<td>(total number)</td>
<td>(add col. (a) through col. (c))</td>
</tr>
<tr>
<td>1 Gross receipts</td>
<td>552,539.</td>
<td>2,419.</td>
<td>554,958.</td>
</tr>
<tr>
<td>2 Less: Contributions</td>
<td>552,539.</td>
<td>2,419.</td>
<td>554,958.</td>
</tr>
</tbody>
</table>

### Direct Expenses

<table>
<thead>
<tr>
<th>Event #1</th>
<th>Event #2</th>
<th>Other events</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash prizes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Noncash prizes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rent/facility costs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Food and beverages</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Entertainment</td>
<td>8,669.</td>
<td>725.</td>
</tr>
<tr>
<td>Other direct expenses</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Direct expense summary
Add lines 4 through 9 in column (d) |

#### Net income summary
Subtract line 10 from line 3, column (d) |

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

<table>
<thead>
<tr>
<th>Column (a)</th>
<th>Column (b)</th>
<th>Column (c)</th>
<th>Column (d)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Revenue</td>
<td>Bingo</td>
<td>Pull tabs/instant bingo/progressive bingo</td>
<td>Other gaming</td>
</tr>
<tr>
<td>1 Gross revenue</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Cash prizes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Noncash prizes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Rent/facility costs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Other direct expenses</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Volunteer labor</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
</tbody>
</table>
| 7 Direct expense summary
Add lines 2 through 5 in column (d) | | | |
| 8 Net gaming income summary
Subtract line 7 from line 1, column (d) | | | |

### Enter the state(s) in which the organization conducts gaming activities:

#### a Is the organization licensed to conduct gaming activities in each of these states?

- Yes
- No

#### b If "No," explain:

______

### 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?

- Yes
- No

#### b If "Yes," explain:

______
Schedule G (Form 990 or 990-EZ) 2020

<table>
<thead>
<tr>
<th>Schedule G (Form 990 or 990-EZ) 2020</th>
<th>OLD GLOBE THEATRE</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>11</strong> Does the organization conduct gaming activities with nonmembers?</td>
<td>Yes [ ] No [ ]</td>
</tr>
<tr>
<td><strong>12</strong> Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?</td>
<td>Yes [ ] No [ ]</td>
</tr>
<tr>
<td><strong>13</strong> Indicate the percentage of gaming activity conducted in:</td>
<td>13a [%]</td>
</tr>
<tr>
<td>a The organization's facility</td>
<td></td>
</tr>
<tr>
<td>b An outside facility</td>
<td>13b [%]</td>
</tr>
<tr>
<td><strong>14</strong> Enter the name and address of the person who prepares the organization's gaming/special events books and records:</td>
<td></td>
</tr>
<tr>
<td>Name ►</td>
<td></td>
</tr>
<tr>
<td>Address ►</td>
<td></td>
</tr>
<tr>
<td><strong>15a</strong> Does the organization have a contract with a third party from whom the organization receives gaming revenue?</td>
<td>Yes [ ] No [ ]</td>
</tr>
<tr>
<td>b If &quot;Yes,&quot; enter the amount of gaming revenue received by the organization ► $</td>
<td>and the amount of gaming revenue retained by the third party ► $</td>
</tr>
<tr>
<td>c If &quot;Yes,&quot; enter name and address of the third party:</td>
<td></td>
</tr>
<tr>
<td>Name ►</td>
<td></td>
</tr>
<tr>
<td>Address ►</td>
<td></td>
</tr>
<tr>
<td><strong>16</strong> Gaming manager information:</td>
<td></td>
</tr>
<tr>
<td>Name ►</td>
<td></td>
</tr>
<tr>
<td>Gaming manager compensation ► $</td>
<td></td>
</tr>
<tr>
<td>Description of services provided ►</td>
<td></td>
</tr>
<tr>
<td>Director/officer [ ] Employee [ ] Independent contractor [ ]</td>
<td></td>
</tr>
<tr>
<td><strong>17</strong> Mandatory distributions:</td>
<td></td>
</tr>
<tr>
<td>a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?</td>
<td>Yes [ ] No [ ]</td>
</tr>
<tr>
<td>b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► $</td>
<td></td>
</tr>
<tr>
<td><strong>Part IV Supplemental Information.</strong> Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.</td>
<td></td>
</tr>
</tbody>
</table>
### General Information on Grants and Assistance

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

   - Yes [X]
   - No [ ]

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

### Grants and Other Assistance to Domestic Organizations and Domestic Governments

<table>
<thead>
<tr>
<th>Name and address of organization or government</th>
<th>EIN</th>
<th>IRC section (if applicable)</th>
<th>Amount of cash grant</th>
<th>Amount of non-cash assistance</th>
<th>Method of valuation (book, FMV, appraisal, other)</th>
<th>Description of noncash assistance</th>
<th>Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>OLD GLOBE ENDOWMENT TRUST</td>
<td>33-6125358</td>
<td>501(c)(3)</td>
<td>122,666.</td>
<td>0.</td>
<td></td>
<td>GRANT TO SUPPORTING ORGANIZATION TO HOLD AS ENDOWMENT</td>
<td></td>
</tr>
<tr>
<td>P.O. BOX 122171</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SAN DIEGO, CA 92112-2171</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

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

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

**Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Type of grant or assistance</th>
<th>(b) Number of recipients</th>
<th>(c) Amount of cash grant</th>
<th>(d) Amount of non-cash assistance</th>
<th>(e) Method of valuation (book, FMV, appraisal, other)</th>
<th>(f) Description of noncash assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>UNIVERSITY OF CALIFORNIA, SAN DIEGO, MASTERS OF ARTS PROGRAM</td>
<td>21</td>
<td>152,200</td>
<td>0</td>
<td>FAIR MARKET VALUE</td>
<td>N/A</td>
</tr>
</tbody>
</table>

**Part IV**

**Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

**PART I, LINE 2:**

GRANTS/STIPENDS ARE GIVEN TO GRADUATE STUDENTS IN AN MFA PROGRAM RUN JOINTLY BY THE UNIVERSITY OF SAN DIEGO AND OLD GLOBE THEATRE. THE STIPENDS' PURPOSE FOR MFA STUDENTS IS TO COVER A SMALL PORTION OF MONTHLY LIVING EXPENSES OVER A TWO YEAR COURSE.

**PART I, LINE 2:**

GRANTS ARE PAID TO THE OLD GLOBE ENDOWMENT TRUST, WHICH IS A SUPPORTING ORGANIZATION OF THE OLD GLOBE THEATRE, TO HOLD AS ENDOWMENT AND ARE
APPROVED BY THE BOARD OF DIRECTORS.
## Part I Questions Regarding Compensation

### 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- [ ] First-class or charter travel
- [ ] Housing allowance or residence for personal use
- [ ] Travel for companions
- [ ] Payments for business use of personal residence
- [ ] Tax indemnification and gross-up payments
- [ ] Health or social club dues or initiation fees
- [ ] Discretionary spending account
- [ ] Personal services (such as maid, chauffeur, chef)

### 1b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.

### 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

### 3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- [ ] Compensation committee
- [ ] Written employment contract
- [X] Independent compensation consultant
- [X] Compensation survey or study
- [X] Approval by the board or compensation committee

### 4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- [X] Receive a severance payment or change-of-control payment?
- [X] Participate in or receive payment from a supplemental nonqualified retirement plan?
- [X] Participate in or receive payment from an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

### 5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- [X] The organization?
- [X] Any related organization?

If "Yes" on line 5a or 5b, describe in Part III.

### 6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- [X] The organization?
- [X] Any related organization?

If "Yes" on line 6a or 6b, describe in Part III.

### 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III.

### 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.

### 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

---

**LHA** For Paperwork Reduction Act Notice, see the Instructions for Form 990.
<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Breakdown of W-2 and/or 1099-MISC compensation</th>
<th>(C) Retirement and other deferred compensation</th>
<th>(D) Nontaxable benefits</th>
<th>(E) Total of columns (B)(i)-(D)</th>
<th>(F) Compensation in column (B) reported as deferred on prior Form 990</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(i) Base compensation (ii) Bonus &amp; incentive compensation (iii) Other reportable compensation</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1) TIMOTHY SHIELDS MANAGING DIRECTOR</td>
<td>357,145. 100,000. 0. 8,550. 21,331. 487,026. 0.</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>(2) BARRY EDELSTEIN ARTISTIC DIRECTOR</td>
<td>343,702. 100,000. 0. 8,550. 30,016. 482,268. 0.</td>
<td></td>
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</tr>
<tr>
<td>(3) LLEWELLYN CRAIN DIRECTOR OF PHILANTHROPY</td>
<td>202,102. 0. 0. 6,479. 29,324. 237,905. 0.</td>
<td></td>
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</tr>
<tr>
<td>(4) DAVID HENSON, SECRETARY DIRECTOR OF MARKETING</td>
<td>186,543. 0. 0. 5,596. 55. 192,194. 0.</td>
<td></td>
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</tr>
<tr>
<td>(5) ROBERT DRAKE SENIOR PRODUCER</td>
<td>150,270. 0. 0. 4,589. 12,080. 166,939. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(6) MICHELLE YEAGER DIRECTOR OF FINANCE</td>
<td>151,785. 0. 0. 4,589. 10,322. 166,696. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(7) MICHAEL PAGE GENERAL MANAGER</td>
<td>145,080. 0. 0. 6,139. 151,219. 0.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
PART I, LINE 7:

NONDISCRETIONARY BONUS PAYMENTS WERE PAID BASED ON PERSONS MEETING GOALS SET BY AND APPROVED BY BOARD OF DIRECTORS.
## Supplemental Information on Tax-Exempt Bonds

Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

### Part I - Bond Issues

<table>
<thead>
<tr>
<th>(a) Issuer name</th>
<th>(b) Issuer EIN</th>
<th>(c) CUSIP #</th>
<th>(d) Date issued</th>
<th>(e) Issue price</th>
<th>(f) Description of purpose</th>
<th>(g) Defeased</th>
<th>(h) On behalf of issuer</th>
<th>(i) Pooled financing</th>
</tr>
</thead>
<tbody>
<tr>
<td>OLD GLOBE THEATRE</td>
<td>95-1543396</td>
<td>NONE</td>
<td>08/12/10</td>
<td>3,802,430.</td>
<td>REPAYMENT OF EXISTING NOTES PA</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

### Part II - Proceeds

<table>
<thead>
<tr>
<th>1 Amount of bonds retired</th>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 Amount of bonds legally defeased</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Total proceeds of issue</td>
<td>3,802,430.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Gross proceeds in reserve funds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Capitalized interest from proceeds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Proceeds in refunding escrows</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Issuance costs from proceeds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Credit enhancement from proceeds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Working capital expenditures from proceeds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 Capital expenditures from proceeds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Other spent proceeds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Other unspent proceeds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 Year of substantial completion</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>14 Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)?</th>
<th>Yes</th>
<th>No</th>
<th>Yes</th>
<th>No</th>
<th>Yes</th>
<th>No</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>15 Were the bonds issued as part of a refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)?</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16 Has the final allocation of proceeds been made?</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17 Does the organization maintain adequate books and records to support the final allocation of proceeds?</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
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<td></td>
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<td></td>
</tr>
</tbody>
</table>

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part III  Private Business Use

<table>
<thead>
<tr>
<th></th>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>Are there any lease arrangements that may result in private business use of bond-financed property?</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3a</td>
<td>Are there any management or service contracts that may result in private business use of bond-financed property?</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3b</td>
<td>If &quot;Yes&quot; to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3c</td>
<td>Are there any research agreements that may result in private business use of bond-financed property?</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3d</td>
<td>If &quot;Yes&quot; to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government</td>
<td>.00 %</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>5</td>
<td>Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government</td>
<td>.00 %</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>6</td>
<td>Total of lines 4 and 5</td>
<td>.00 %</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>7</td>
<td>Does the bond issue meet the private security or payment test?</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8a</td>
<td>Has there been a sale or disposition of any of the bond-financed property to a non-governmental person other than a 501(c)(3) organization since the bonds were issued?</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8b</td>
<td>If &quot;Yes&quot; to line 8a, enter the percentage of bond-financed property sold or disposed of</td>
<td>%</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>8c</td>
<td>If &quot;Yes&quot; to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?</td>
<td>X</td>
<td></td>
<td></td>
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</tbody>
</table>

### Part IV  Arbitrage

<table>
<thead>
<tr>
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<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?</td>
<td>X</td>
<td></td>
<td></td>
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<tr>
<td>2</td>
<td>If &quot;No&quot; to line 1, did the following apply?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Rebate not due yet?</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Exception to rebate?</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>No rebate due?</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Is the bond issue a variable rate issue?</td>
<td>X</td>
<td></td>
<td></td>
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</table>
### Part IV  Arbitrage (continued)

<table>
<thead>
<tr>
<th></th>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
</tr>
</thead>
<tbody>
<tr>
<td>4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?</td>
<td>Yes</td>
<td>No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Name of provider</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Term of hedge</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Was the hedge superintegrated?</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>e Was the hedge terminated?</td>
<td>Yes</td>
<td></td>
<td></td>
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<tr>
<td>5a Were gross proceeds invested in a guaranteed investment contract (GIC)?</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Name of provider</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Term of GIC</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?</td>
<td>Yes</td>
<td></td>
<td></td>
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<tr>
<td>6 Were any gross proceeds invested beyond an available temporary period?</td>
<td>Yes</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>7 Has the organization established written procedures to monitor the requirements of section 148?</td>
<td>Yes</td>
<td></td>
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</tbody>
</table>

### Part V  Procedures To Undertake Corrective Action

<table>
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<tr>
<th></th>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
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</thead>
<tbody>
<tr>
<td>Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation isn’t available under applicable regulations?</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Part VI  Supplemental Information

Provide additional information for responses to questions on Schedule K. See instructions.

**SCHEDULE K, PART I, BOND ISSUES:**

(A) ISSUER NAME: OLD GLOBE THEATRE

(F) DESCRIPTION OF PURPOSE: REPAYMENT OF EXISTING NOTES PAYABLE

---

Schedule K (Form 990) 2020

OLD GLOBE THEATRE

95-1543396

Page 3

032123  12-01-20
## SCHEDULE M
(Form 990)

### Part I
Types of Property

<table>
<thead>
<tr>
<th>No.</th>
<th>Types of Property</th>
<th>(a) Check if applicable</th>
<th>(b) Number of contributions or items contributed</th>
<th>(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g</th>
<th>(d) Method of determining noncash contribution amounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Art - Works of art</td>
<td></td>
<td></td>
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<tr>
<td>2</td>
<td>Art - Historical treasures</td>
<td></td>
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<tr>
<td>3</td>
<td>Art - Fractional interests</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Books and publications</td>
<td>X</td>
<td>11,537. COST</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Clothing and household goods</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>6</td>
<td>Cars and other vehicles</td>
<td></td>
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<tr>
<td>7</td>
<td>Boats and planes</td>
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<td></td>
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<tr>
<td>8</td>
<td>Intellectual property</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Securities - Publicly traded</td>
<td>X</td>
<td>374,276. AVG. PRICE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Securities - Closely held stock</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Securities - Partnership, LLC, or trust interests</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>12</td>
<td>Securities - Miscellaneous</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Qualified conservation contribution - Historic structures</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Qualified conservation contribution - Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Real estate - Residential</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Real estate - Commercial</td>
<td></td>
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<tr>
<td>17</td>
<td>Real estate - Other</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>18</td>
<td>Collectibles</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>19</td>
<td>Food inventory</td>
<td></td>
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</tr>
<tr>
<td>20</td>
<td>Drugs and medical supplies</td>
<td></td>
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<tr>
<td>21</td>
<td>Taxidermy</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Historical artifacts</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Scientific specimens</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24</td>
<td>Archeological artifacts</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>Other</td>
<td>X</td>
<td>56,063. COST</td>
<td></td>
<td></td>
</tr>
<tr>
<td>26</td>
<td>Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>27</td>
<td>Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>28</td>
<td>Other</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

### Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement

<table>
<thead>
<tr>
<th>No.</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>29</td>
<td>Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement</td>
</tr>
</tbody>
</table>

### 30a
During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?

- Yes [ ]
- No [X]  

### 31
Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

- Yes [X]
- No [ ]

### 32a
Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

- Yes [X]
- No [ ]

### 33
If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

---

**Name of the organization:** OLD GLOBE THEATRE

**Employer identification number:** 95-1543396

---

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

**Schedule M (Form 990) 2020**

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032141 11-23-20

09441110 146892 33759

2020.05000 OLD GLOBE THEATRE 33759__1
Part II  Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
DIVERSITY AND BALANCE IN PROGRAMMING; PROVIDING AN ENVIRONMENT FOR THE GROWTH AND EDUCATION OF THEATRE PROFESSIONALS, AUDIENCES AND THE COMMUNITY AT LARGE.

FORM 990, PART III, LINE 3, CHANGES IN PROGRAM SERVICES:
DUE TO THE COVID-19 PANDEMIC THE OLD GLOBE Halted IN-PERSON PERFORMANCES IN MARCH 2020.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
VIEWS LOCALLY, NATIONALLY, AND INTERNATIONALLY. IN-ZOOM, A WORLD PREMIERE 10-MINUTE PLAY CREATED BY AND STARRING TWO-TIME TONY AWARD WINNER BILL IRWIN WITH THREE-TIME TONY AWARD NOMINEE CHRISTOPHER
FITZGERALD, WAS COMMISSIONED BY THE GLOBE AND STREAMED DURING THIS PERIOD.

THE ANNUAL PRODUCTION OF DR. SEUSS'S HOW THE GRINCH STOLE CHRISTMAS! WAS BROADCAST ON SAN DIEGO RADIO STATION KPBS. FREE STUDENT MATINEES OF THIS SHOW, WHICH REACHED 4,505 STUDENTS AND EDUCATORS THROUGH IN-PERSON PERFORMANCES IN 2019, ENGAGED OVER 10,000 STUDENTS THROUGH STREAMING. OTHER PROGRAMS INCLUDED VIRTUAL VERSIONS OF THINKING SHAKESPEARE LIVE!, AN EXPLORATION OF THE WORKS OF SHAKESPEARE AND BEHIND-THE-SCENES PROGRAMS FOR DONORS. THE GLOBE CONTINUED ITS COMMISSIONING PROGRAMS FOR WRITERS OF NEW PLAYS AS WELL.

THE OLD GLOBE WROTE AND IMPLEMENTED A SOCIAL JUSTICE ROADMAP TO MAKE THE GLOBE A MORE EQUITABLE AND WELCOMING PLACE FOR A DIVERSE COMMUNITY OF ARTISTS, STAFF, AND AUDIENCE MEMBERS. THIS ROADMAP DELINEATES A SERIES OF REFORMS TO ACCELERATE THE PACE OF CHANGE AT ALL LEVELS OF OUR INSTITUTION.


FORM 990, PART VI, SECTION A, LINE 6:
THE ORGANIZATION HAS ONE CLASS OF MEMBERSHIP WHO HAVE THE RIGHT TO ELECT OFFICERS AS PROPOSED TO THEM BY THE NOMINATING COMMITTEE.
FORM 990, PART VI, SECTION A, LINE 7A:

THE ORGANIZATION HAS ONE CLASS OF MEMBERSHIP WHO HAVE THE RIGHT TO ELECT
OFFICERS AS PROPOSED TO THEM BY THE NOMINATING COMMITTEE.

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

DIRECTOR OF FINANCE (CORPORATE OFFICER) AND TAX PREPARER COMPLETE 990,
WHICH IS REVIEWED BY THE MANAGING DIRECTOR. AFTER MANAGEMENT'S APPROVAL OF
THE 990, EACH MEMBER OF THE BOARD OF DIRECTORS IS PROVIDED ACCESS TO THE
PUBLIC DISCLOSURE COPY OF THE 990 PRIOR TO FILING THE RETURN WITH THE IRS.

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

EACH DIRECTOR AND PRINCIPAL OFFICER SHALL ANNUALLY SIGN A STATEMENT WHICH
AFFIRMS THAT SUCH PERSON: HAS RECEIVED A COPY OF THE CONFLICTS OF INTEREST
POLICY, HAS READ AND UNDERSTANDS THE POLICY, HAS AGREED TO COMPLY WITH THE
POLICY, AND UNDERSTANDS THAT THE OLD GLOBE IS A CHARITABLE ORGANIZATION AND
THAT IN ORDER TO MAINTAIN ITS FEDERAL TAX EXEMPTION IT MUST ENGAGE
PRIMARILY IN ACTIVITIES WHICH ACCOMPLISH ONE OR MORE OF ITS TAX-EXEMPT
PURPOSES. IF A CONFLICT ARISES, THAT BOARD MEMBER CAN NOT VOTE ON THE
TRANSACTION.

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

THE CONTRACTS FOR THE ARTISTIC AND MANAGING DIRECTORS ARE NEGOTIATED
BY THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS. THEIR
PROCESS INCLUDES A PERSONNEL APPRAISAL, CONSIDERATION OF THE THEATRE
COMMUNICATIONS GROUP'S SALARY SURVEY AS WELL AS PEER DISCUSSION WITH BOARDS
OF OTHER MAJOR PERFORMING ARTS INSTITUTIONS. THE MOST RECENT CONTRACT FOR
THE MANAGING DIRECTOR COVERS 1/1/21-12/31/25. THE MOST RECENT CONTRACT FOR
THE ARTISTIC DIRECTOR COVERS 1/1/21-12/31/25. A WRITTEN SUBSTANTIATION
IS HELD IN THE FILES OF THE ORGANIZATION'S INDEPENDENT ATTORNEY. THE SALARY OF THE DIRECTOR OF FINANCE IS APPROVED BY THE EXECUTIVE COMMITTEE. THE MANAGING DIRECTOR USES THE ORGANIZATION'S FORMAL APPRAISAL PROCESS, ON-GOING EVALUATIONS, AND COMPARABILITY INFORMATION FROM THE ANNUAL THEATRE COMMUNICATIONS GROUP SALARY SURVEY FOR EACH CORPORATE OFFICER AND/OR KEY EMPLOYEE. POSITIONS INCLUDE GENERAL MANAGER, DIRECTOR OF PRODUCTION, DIRECTOR OF ARTS ENGAGEMENT, DIRECTOR OF PHILANTHROPY, DIRECTOR OF HUMAN RESOURCES, DIRECTOR OF MARKETING, AND DIRECTOR OF FINANCE. THIS ANNUAL PROCESS HAS BEEN IN PLACE SINCE YEAR-BEGINNING 2004. CONTEMPORANEOUS SUBSTANTIATION IS A FINAL NEW SALARIES DOCUMENT WHICH IS SIGNED BY THE MANAGING DIRECTOR AND DIRECTOR OF HUMAN RESOURCES, THEN FORWARDED TO HUMAN RESOURCES AND PAYROLL FOR IMPLEMENTATION.

FORM 990, PART VI, SECTION C, LINE 19:
AUDITED FINANCIAL STATEMENTS ARE AVAILABLE ON THE ORGANIZATION'S WEBSITE OR UPON REQUEST. GOVERNING DOCUMENTS AND THE CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST.
**Part I**  
Identification of Disregarded Entities. Complete if the organization answered “Yes” on Form 990, Part IV, line 33.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN (if applicable) of disregarded entity</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Total income</th>
<th>(e) End-of-year assets</th>
<th>(f) Direct controlling entity</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

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

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Exempt Code section</th>
<th>(e) Public charity status (if section 501(c)(3))</th>
<th>(f) Direct controlling entity</th>
<th>(g) Section 512(b)(13) controlled entity?</th>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part III  Identification of Related Organizations Taxable as a Partnership
Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Direct controlling entity</th>
<th>(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Disproportionate allocations?</th>
<th>(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)</th>
<th>(j) General or managing partner?</th>
<th>(k) Percentage ownership</th>
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### Part IV  Identification of Related Organizations Taxable as a Corporation or Trust
Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Direct controlling entity</th>
<th>(e) Type of entity (C corp, S corp, or trust)</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Percentage ownership</th>
<th>(i) Section 512(b)(13) controlled entity?</th>
<th>(j) Yes</th>
<th>(k) No</th>
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032162 10-28-20 Schedule R (Form 990) 2020
**Part V Transactions With Related Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1. During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
   - Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
   - Gift, grant, or capital contribution to related organization(s)
   - Gift, grant, or capital contribution from related organization(s)
   - Loans or loan guarantees to or for related organization(s)
   - Loans or loan guarantees by related organization(s)
   - Dividends from related organization(s)
   - Sale of assets to related organization(s)
   - Purchase of assets from related organization(s)
   - Exchange of assets with related organization(s)
   - Lease of facilities, equipment, or other assets to related organization(s)
   - Lease of facilities, equipment, or other assets from related organization(s)
   - Performance of services or membership or fundraising solicitations for related organization(s)
   - Performance of services or membership or fundraising solicitations by related organization(s)
   - Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
   - Sharing of paid employees with related organization(s)
   - Reimbursement paid to related organization(s) for expenses
   - Reimbursement paid by related organization(s) for expenses
   - Other transfer of cash or property to related organization(s)
   - Other transfer of cash or property from related organization(s)

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

<table>
<thead>
<tr>
<th>(a) Name of related organization</th>
<th>(b) Transaction type (a-s)</th>
<th>(c) Amount involved</th>
<th>(d) Method of determining amount involved</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>(1) GRANT FROM OLD GLOBE ENDOWMENT</strong></td>
<td>C</td>
<td>281,106.</td>
<td>BOARD APPROVED</td>
</tr>
<tr>
<td><strong>(2) GRANT TO OLD GLOBE ENDOWMENT</strong></td>
<td>B</td>
<td>122,666.</td>
<td>BOARD APPROVED</td>
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<td><strong>(3)</strong></td>
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</table>
Part VI  Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of entity</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)</th>
<th>(e) Are all partners sec. 501(c)(3) orgs.?</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Disproportionate allocations?</th>
<th>(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)</th>
<th>(j) General or managing partner?</th>
<th>(k) Percentage ownership</th>
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Schedule R (Form 990) 2020  OLD GLOBE THEATRE  95-1543396  Page 4
Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.