Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c) of the Internal Revenue Code (except black lung benefit trust or private foundation), or section 527, or section 4947(a)(1) nonexempt charitable trust

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047

2000

Open to Public Inspection

A For the 2000 calendar year, or tax year period beginning JUL 01, 2000, and ending JUN 30, 2001

B Check if applicable: ☐ Change of addr ☐ Change of name ☐ Initial return ☐ Final return ☐ Amended return

Please use IRS label or print or type. See Specific Instructions.

C Name of organization, number and street, city, town, state, and ZIP code
CLEVELAND PUBLIC THEATRE, INC.
6415 DETROIT AVENUE
CLEVELAND OH 44102

D Employer identification number 34-1359225

E Telephone number 216-281-3535

F Check ▶ ☐ if application pending

G Organization type (check only one) ▶ ☒ 501(c)(3) ◀ (insert no) ☐ 527 or ☐ 4947(a)(1)

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)

J Accounting method ☒ Cash ☐ Accrual ☐ Other (specify) ▶

K Check here ▶ ☐ if the organization's gross receipts are normally not more than $25,000 The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data Some states require a complete return

Note H and I are not applicable to sec 527 orgs

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) If "Yes" enter number of affiliates ▶

H(c) Are all affiliates included? (If "No" attach a list See inst) ☐ Yes ☐ No

H(d) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☒ No

I Enter 4-digit group exemption no (GEN) ▶

L Check this box if organization is not required to attach Schedule B (Form 990 or 990-EZ) ▶ ☐

FEB 1 3 2002

ENVELOPE POSTMARK DATE

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Specific Instructions)

Revenue	1	Contributions, gifts, grants, and similar amounts received				
	a	Direct public support	1a	357,427.		
	b	Indirect public support	1b			
	c	Government contributions (grants)	1c	267,291.		
	d	Total (add lines 1a through 1c) (cash $ 624,718. noncash $)			1d	624,718.
	2	Program service revenue including government fees and contracts (from Part VII, line 93)			2	561,413.
	3	Membership dues and assessments			3	
	4	Interest on savings and temporary cash investments			4	1,532
	5	Dividends and interest from securities			5	
	6a	Gross rents	6a	15,500.		
	b	Less rental expenses	6b	17,741.		
	c	Net rental income or (loss) (subtract line 6b from line 6a)			6c	(2,241)
	7	Other investment income (describe ▶)			7	
	8a	Gross amount from sales of assets other than inventory — (A) Securities / (B) Other	8a			
	b	Less cost/other basis & sales expenses	8b			
	c	Gain or (loss) (attach schedule)	8c			
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))			8d	
	9	Special events and activities (attach schedule)				
	a	Gross revenue (not including $ of contributions reported on line 1a)	9a			
	b	Less direct expenses other than fundraising expenses	9b			
	c	Net income or (loss) from special events (subtract line 9b from line 9a)			9c	
	10a	Gross sales of inventory, less returns and allowances	10a			
	b	Less cost of goods sold	10b			
	c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)			10c	
	11	Other revenue (from Part VII, line 103)			11	
	12	Total revenue (add lines 1d, 2, 3, 4 5, 6c, 7, 8d 9c, 10c, and 11)			12	1,185,422.
Expenses	13	Program services (from line 44, column (B))			13	953,358.
	14	Management and general (from line 44, column (C))			14	58,601.
	15	Fundraising (from line 44, column (D))			15	68,580.
	16	Payments to affiliates (attach schedule)			16	
	17	Total expenses (add lines 16 and 44, column (A))			17	1,080,539
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)			18	104,883.
	19	Net assets or fund balances at beginning of year (from line 73, column (A))			19	693,456.
	20	Other changes in net assets or fund balances (attach explanation)			20	
	21	Net assets or fund balances at end of year (combine lines 18, 19 and 20)			21	798,339

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590
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For Paperwork Reduction Act Notice, see the separate instructions Form **990** (2000)

Part II Statement of Functional Expenses All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others (See Specific Instructions)

Do not include amounts reported on line 6b 8b 9b 10b or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) (cash $ noncash $)	22				
23 Specific assistance to individuals (attach schedule)	23				
24 Benefits paid to or for members (attach schedule)	24				
25 Compensation of officers, directors etc	25	37917.	32229.	1896.	3792.
26 Other salaries and wages	26	247901.	211630.	20108.	16163.
27 Pension plan contributions	27				
28 Other employee benefits	28	23446.	16784.	3837.	2825.
29 Payroll taxes	29	32467.	27702.	2499.	2266.
30 Professional fundraising fees	30				
31 Accounting fees	31	12731.		12731.	
32 Legal fees	32				
33 Supplies	33	12444.	11180.	948.	316
34 Telephone	34	5930.	4706.	918.	306
35 Postage and shipping	35	5290.	4415.	656.	219.
36 Occupancy	36	21889.	21365.	262.	262
37 Equipment rental and maintenance	37	23249.	19938.	2483.	828.
38 Printing and publications	38				
39 Travel	39	12230.	11899.	331.	
40 Conferences, conventions, and meetings	40				
41 Interest	41	6246.	4886.	1206.	154.
42 Depreciation, depletion etc (attach schedule)	42	30387.	28617.	787.	983.
43 Other expenses (itemize) a SEE STMT	43a				
b	43b				
c	43c				
d	43d				
e	43e				
44 Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44	1080539.	953358.	58601.	68580

Reporting of Joint Costs Did you report in column (B) (Program services) any joint costs from a combined educational campaign and fundraising solicitation? ▶ ☐ Yes ☒ No

If "Yes," enter (i) aggregate amount of these joint costs $ ________, (ii) the amount allocated to Program services $ ________

(iii) the amount allocated to Management and general $ ________, and (iv) the amount allocated to Fundraising $ ________

Part III Statement of Program Service Accomplishments (See Specific Instructions)

What is the organization's primary exempt purpose? ▶ARTS PRESENTATION & ED.

All organizations must describe their exempt purpose achievements in a clear and concise manner State the number of clients served, publications issued, etc Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others)

	Program Service Expenses (Required for 501(c)(3) & (4) orgs & 4947(a)(1) trusts but optional for others)
a PRESENTATION OF THEATRE ART PRODUCTIONS (Grants and allocations $)	408069.
b EDUCATION IN THE THEATRE ARTS (Grants and allocations $)	545289
c (Grants and allocations $)	
d (Grants and allocations $)	
e Other program services (attach schedule) (Grants and allocations $)	
f **Total of Program Service Expenses** (should equal line 44, column (B), Program services) ▶	953358.

Part IV **Balance Sheets** (See Specific Instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.			(A) Beginning of year		(B) End of year
ASSETS 45	Cash - - non-interest-bearing		133,413.	45	105,100.
46	Savings and temporary cash investments			46	
47a	Accounts receivable	47a 31,189.			
b	Less: allowance for doubtful accounts	47b		47c	31,189.
48a	Pledges receivable	48a			
b	Less: allowance for doubtful accounts	48b		48c	
49	Grants receivable		28,357.	49	21,874.
50	Receivables from officers, directors, trustees, and key employees (attach schedule)			50	
51a	Other notes and loans receivable (attach schedule)	51a			
b	Less: allowance for doubtful accounts	51b		51c	
52	Inventories for sale or use			52	
53	Prepaid expenses and deferred charges		2,805.	53	732.
54	Investments - - securities (attach schedule) ▶ ☐ Cost ☐ FMV			54	
55a	Investments - - land, buildings, and equipment: basis	55a			
b	Less: accumulated depreciation (attach schedule)	55b		55c	
56	Investments - - other (attach schedule)			56	
57a	Land, buildings, and equipment: basis	57a 1,271,982.			
b	Less: accumulated depreciation (attach schedule)	57b 180,990.	894,908.	57c	1,090,992.
58	Other assets (describe ▶)			58	
59	**Total assets** (add lines 45 through 58) (must equal line 74)		1,059,483.	59	1,249,887
LIABILITIES 60	Accounts payable and accrued expenses		55,464.	60	1,098
61	Grants payable			61	
62	Deferred revenue		114,591.	62	142,200.
63	Loans from officers, directors, trustees, and key employees (attach schedule)		41,500.	63	41,500.
64a	Tax-exempt bond liabilities (attach schedule)			64a	
b	Mortgages and other notes payable (attach schedule)		153,322.	64b	265,600.
65	Other liabilities (describe ▶ Security deposits)		1,150.	65	1,150.
66	**Total liabilities** (add lines 60 through 65)		366,027.	66	451,548.
NET ASSETS OR FUND BALANCES	**Organizations that follow SFAS 117, check here** ▶ ☐ and complete lines 67 through 69 and lines 73 and 74				
67	Unrestricted			67	
68	Temporarily restricted			68	
69	Permanently restricted			69	
	Organizations that do not follow SFAS 117, check here ▶ ☒ and complete lines 70 through 74				
70	Capital stock, trust principal, or current funds			70	
71	Paid-in or capital surplus, or land, building, and equipment fund			71	
72	Retained earnings, endowment, accumulated income, or other funds		693,456.	72	798,339.
73	**Total net assets or fund balances** (add lines 67 through 69 OR lines 70 through 72; column (A) must equal line 19 and column (B) must equal line 21)		693,456.	73	798,339.
74	**Total liabilities and net assets / fund balances** (add lines 66 and 73)		1,059,483.	74	1,249,887.

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See Specific Instructions.)

a	Total revenue, gains, and other support per audited financial statements ▶	a	1203163.
b	Amounts included on line a but not on line 12, Form 990		
(1)	Net unrealized gains on investments $		
(2)	Donated services & use of facilities $		
(3)	Recoveries of prior year grants $		
(4)	Other (specify) RENTAL $ 17741.		
	Add amounts on lines (1) through (4) ▶	b	17741.
c	Line a minus line b ▶	c	1185422.
d	Amounts included on line 12, Form 990 but not on line a		
(1)	Investment expenses not included on line 6b, Form 990 $		
(2)	Other (specify) $		
	Add amounts on lines (1) and (2) ▶	d	
e	Total revenue per line 12, Form 990 (line c plus line d) ▶	e	1185422.

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

a	Total expenses and losses per audited financial statements ▶	a	1098280
b	Amounts included on line a but not on line 17, Form 990		
(1)	Donated services & use of facilities $		
(2)	Prior year adjustments reported on line 20, Form 990 $		
(3)	Losses reported on line 20, Form 990 $		
(4)	Other (specify) RENTAL $ 17741.		
	Add amounts on lines (1) through (4) ▶	b	17741.
c	Line a minus line b ▶	c	1080539.
d	Amounts included on line 17, Form 990 but not on line a		
(1)	Investment expenses not included on line 6b, Form 990 $		
(2)	Other (specify) $		
	Add amounts on lines (1) and (2) ▶	d	
e	Total expenses per line 17, Form 990 (line c plus line d) ▶	e	1080539.

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated see Specific Instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred comp	(E) Expense account and other allowances
SEE ATTACHED LIST		0	0	0

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than $100 000 from your organization and all related organizations, of which more than $10,000 was provided by the related organizations? ▶ ☐ Yes ☐ No
If "Yes," attach schedule - - see Specific Instructions

Part VI Other Information (See Specific Instructions.)

			N/A	Yes	No
76	Did organization engage in any activity not previously reported to IRS? If "Yes," attach detailed description of each activity		76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		77		X
78a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?		78a	X	
b	If "Yes," has it filed a tax return on Form 990-T for this year?		78b	X	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		79		X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?		80a		X
b	If "Yes," enter the name of the organization ▶ N/A and check whether it is ☐ exempt OR ☐ nonexempt				
81a	Enter the amount of political expenditures direct or indirect, as described in the instructions for line 81	81a			
b	Did the organization file Form 1120-POL for this year?		81b		
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		82a	X	
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions for reporting in Part III.)	82b			
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?		83a	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?		83b	X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		84a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		84b		
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?		85a		
b	Did the organization make only in-house lobbying expenditures of $2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year		85b		
c	Dues, assessments, and similar amounts from members	85c			
d	Section 162(e) lobbying and political expenditures	85d			
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f			
g	Does the organization elect to pay the section 6033(e) tax on the amount in 85f?		85g		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?		85h		
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12	86a			
b	Gross receipts, included on line 12, for public use of club facilities	86b			
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders	87a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b			
88	At any time during the year did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX		88		
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under section 4911 ▶ ______, section 4912 ▶ ______, section 4955 ▶ ______				
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		89b		X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶				
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization ▶				

90a List the states with which a copy of this return is filed ▶ OH

b Number of employees employed in the pay period that includes March 12, 2000 (See inst.) 90b 12

91 The books are in care of ▶ JAMES LEVIN Telephone no. ▶ 216-631-2727

Located at ▶ 6415 DETROIT AVENUE, CLEVELAND OH ZIP code ▶ 44102

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 -- Check here ▶ ☐

and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 92

Part VII **Analysis of Income-Producing Activities** (See Specific Instructions.)

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	(E) Related or exempt function income
93 Program service revenue					
a BOX OFFICE					64,828.
b FEES / RENTALS					61,037
c CLASSES/WORKSHOPS					416,081
d AD SALES					11,610.
e CONCESSIONS/MISC.					7,857.
f Medicare/Medicaid payments					
g Fees & contracts from govt agencies					
94 Membership dues & assessments					
95 Interest on savings and temporary cash investments					1,532.
96 Dividends & interest from securities					
97 Net rental income or (loss) from real estate					
a debt-financed property		(2,241.)			
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit/(loss) from sales of inventory					
103 Other revenue a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		(2,241.)			562,945.

105 Total (add line 104, columns (B), (D), and (E)) ▶ 560,704.

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I

Part VIII **Relationship of Activities to the Accomplishment of Exempt Purposes** (See Specific Instructions.)

Line No. ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
93(a)	Educational and cultural programs.
93(b)	" "
93(c)	" "
93(d)	" "

Part IX **Information Regarding Taxable Subsidiaries and Disregarded Entities** (See Specific Instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership int	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X **Information Regarding Transfers Associated with Personal Benefit Contracts** (See Specific Instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Please 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. (Important: [redacted]

2/6/02 James Lloyd Director

Date | Type or print name and title

Date 02/11/02 | Check if self-em ▶ ☒ | Preparer's SSN or PTIN 350-40-8680

[redacted]

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information -- (See separate instructions.)

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No 1545-0047

2000

Name of the organization: CLEVELAND PUBLIC THEATRE, INC.

Employer identification number: 34-1359225

Part I — Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See the instructions List each one If there are none, enter "None")

(a) Name and address of each employee paid more than $50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to empl benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over $50,000 ▶				

Part II — Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See the instructions List each one (whether individuals or firms) If there are none, enter "None")

(a) Name and address of each independent contractor paid more than $50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over $50,000 for professional services ▶		

Part III Statements About Activities

			Yes	No
1	During the year has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum?	1		X
	If "Yes," enter total expenses paid or incurred in connection with the lobbying activities ▶ $			
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities			
2	During the year, has the organization either directly or indirectly, engaged in any of the following acts with any of its trustees directors officers, creators, key employees or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary			
a	Sale exchange, or leasing of property?	2a	X	
b	Lending of money or other extension of credit?	2b		X
c	Furnishing of goods services, or facilities?	2c		X
d	Payment of compensation (or payment or reimbursement of expenses if more than $1,000)?	2d	X	
e	Transfer of any part of its income or assets?	2e		X
	If the answer to any question is "Yes," attach a detailed statement explaining the transactions			
3	Does the organization make grants for scholarships, fellowships student loans, etc ?	3		X
4a	Do you have a section 403(b) annuity plan for your employees?	4a		X
b	Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs qualify to receive payments (See the instructions)			

Part IV Reason for Non-Private Foundation Status (See the instructions)

The organization is not a private foundation because it is (Please check only **ONE** applicable box)

5 ☐ A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)

6 ☐ A school Section 170(b)(1)(A)(ii) (Also complete Part V, page 5)

7 ☐ A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)

8 ☐ A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)

9 ☐ A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) **Enter the hospital's name, city, and state** ▶

10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A.)

11a ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A.)

11b ☐ A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A.)

12 ☐ 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 charitable, etc , 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) (Also complete the **Support Schedule** in Part IV-A)

13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in **(1)** lines 5 through 12 above, or **(2)** section 501(c)(4) (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))

Provide the following information about the supported organizations (See the instructions)

(a) Name(s) of supported organization(s)	**(b)** Line number from above

14 ☐ An organization organized and operated to test for public safety Section 509(a)(4) (See the instructions)

Part IV-A **Support Schedule** (Complete only if you checked a box on line 10, 11, or 12) **Use cash method of accounting**
Note You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

Calendar year (or fiscal year beginning in) ▶	(a) 1999	(b) 1998	(c) 1997	(d) 1996	(e) Total
15 Gifts grants and contributions received (Do not include unusual grants See line 28)	577,287.	541,695.	388,590.	247,652.	1,755,224.
16 Membership fees received					
17 Gross receipts from admissions merchandise sold or services performed or furnishing of facilities in any activity that is not a business unrelated to the organization s charitable etc purpose	234,039.	209,146.	157,377.	97,289.	697,851.
18 Gross income from interest dividends amounts received from payments on securities loans (section 512(a)(5)), rents royalties and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30 1975	2,051.	172.	2.	40.	2,265.
19 Net income from unrelated business activities not included in line 18	(1,759.)				(1,759.)
20 Tax revenues levied for the organization s benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22	811,618.	751,013.	545,969.	344,981.	2,453,581.
24 Line 23 minus line 17	577,579.	541,867.	388,592.	247,692.	1,755,730.
25 Enter 1% of line 23	8,116.	7,510.	5,460.	3,450.	

26 Organizations described on lines 10 or 11 a Enter 2% of amount in column (e), line 24 ▶ **26a** 35,115.

b Attach a list (which is not open to public inspection) showing the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1996 through 1999 exceeded the amount shown in line 26a Enter the sum of all these excess amounts ▶ **26b**

c Total support for section 509(a)(1) test Enter line 24, column (e) ▶ **26c** 1,755,730.

d Add Amounts from column (e) for lines **18** 2,265. **19** (1,759.) **22** ____ **26b** ____ ▶ **26d** 506.

e Public support (line 26c minus line 26d total) ▶ **26e** 1,755,224.

f **Public support percentage (line 26e (numerator) divided by line 26c (denominator))** ▶ **26f** 99.97 %

27 Organizations described on line 12 a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person" attach a list (which is not open to public inspection) to show the name of, and total amounts received in each year from each "disqualified person" Enter the sum of such amounts for each year

(1999) ____ (1998) ____ (1997) ____ (1996) ____

b For any amount included in line 17 that was received from a nondisqualified person, attach a list to show the name of, and amount received for each year, that was more than the **larger** of **(1)** the amount on line 25 for the year or **(2)** $5,000 (Include in the list organizations described in lines 5 through 11 as well as individuals) After computing the difference between the amount received and the larger amount described in **(1)** or **(2)**, enter the sum of these differences (the excess amounts) for each year

(1999) ____ (1998) ____ (1997) ____ (1996) ____

c Add Amounts from column (e) for lines **15** ____ **16** ____ **17** ____ **20** ____ **21** ____ ▶ **27c**

d Add Line 27a total ____ and line 27b total ____ ▶ **27d**

e Public support (line 27c total minus line 27d total) ▶ **27e**

f Total support for section 509(a)(2) test Enter amount on line 23, column (e) ▶ **27f**

g **Public support percentage (line 27e (numerator) divided by line 27f (denominator))** ▶ **27g** %

h **Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))** ▶ **27h** %

28 **Unusual Grants** For an organization described in line 10, 11, or 12 that received any unusual grants during 1996 through 1999 attach a list (which is not open to public inspection) for each year showing the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant Do not include these grants in line 15 (See the instructions)

Part V **Private School Questionnaire** (See the instructions)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		Line	Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to *all* parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)	31		
32	Does the organization maintain the following			
a	*Records indicating the racial composition of the student body, faculty, and administrative staff?*	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)	32d		
33	Does the organization discriminate by race in any way with respect to			
a	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
c	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
e	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities? If you answered "Yes" to any of the above please explain (If you need more space, attach a separate statement)	33h		
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended? *If you answered "Yes" to either 34a or b, please explain using an attached statement*	34b		
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	35		

Part VI-A Lobbying Expenditures by Electing Public Charities (See the instructions)

(To be completed **ONLY** by an eligible organization that filed Form 5768)

Check here ▶ **a** ☐ if the organization belongs to an affiliated group

Check here ▶ **b** ☐ if you checked "a" above and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		
38 Total lobbying expenditures (add lines 36 and 37)	38		
39 Other exempt purpose expenditures	39		
40 Total exempt purpose expenditures (add lines 38 and 39)	40		
41 Lobbying nontaxable amount Enter the amount from the following table - - **If the amount on line 40 is - -** / **The lobbying nontaxable amount is - -** Not over $500,000 — 20% of the amount on line 40 Over $500,000 but not over $1,000,000 — $100 000 plus 15% of the excess over $500 000 Over $1,000,000 but not over $1,500,000 — $175 000 plus 10% of the excess over $1 000 000 Over $1,500,000 but not over $17 000,000 — $225 000 plus 5% of the excess over $1 500 000 Over $17,000,000 — $1,000,000	41		
42 Grassroots nontaxable amount (enter 25% of line 41)	42		
43 Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43		
44 Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44		

Caution If there is an amount on either line 43 or line 44, you must file Form 4720

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below See the instructions for lines 45 through 50)

	Lobbying Expenditures During 4-Year Averaging Period				
Calendar year (or fiscal year beginning in) ▶	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See the instructions)

During the year did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines **c** through **h**)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (add lines **c** through **h**)			

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See the instructions)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

		Yes	No
a Transfers from the reporting organization to a noncharitable exempt organization of			
(i) Cash	51a(i)		X
(ii) Other assets	a(ii)		X
b Other transactions			
(i) Sales or exchanges of assets with a noncharitable exempt organization	b(i)		X
(ii) Purchases of assets from a noncharitable exempt organization	b(ii)		X
(iii) Rental of facilities, equipment or other assets	b(iii)		X
(iv) Reimbursement arrangements	b(iv)		X
(v) Loans or loan guarantees	b(v)		X
(vi) Performance of services or membership or fundraising solicitations	b(vi)		X
c Sharing of facilities, equipment mailing lists, other assets or paid employees	c		X

d If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods other assets, or services given by the reporting organization If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, & sharing arrangements

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ▶ ☐ Yes ☒ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Schedule B (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Supplementary Information for line 1d of Form 990 and line 1 of Form 990-EZ (see instructions)

OMB No 1545-0047

2000

Name of organization CLEVELAND PUBLIC THEATRE, INC.

Employer identification number 34-1359225

Organization type (check one)- Section [X] 501 (c) (3) (enter number) [ ] 527

[ ] 4947 (a) (1) nonexempt charitable trust

A **Section 501 (c) (7), (8), or (10) organizations-** Check this box if the organization had no charitable contributors who contributed more than $1,000 during the year (But see **General rule** below) ▶ [ ]

Enter here the total gifts received during the year for a religious, charitable, etc , purpose ▶ $

Note: This form is generally not open to public inspection except for section 527 organizations.

General Instructions

Purpose of Form

Schedule B (Form 990 or 990-EZ) is used by organizations required to file **Form 990,** Return of Organization Exempt From Income Tax, or **Form 990-EZ,** Short Form Return of Organization Exempt From Income Tax to provide the information regarding their contributors that is required for line 1d of Form 990 (or line 1 of Form 990-EZ)

Attach the Schedule B (Form 990 or 990-EZ) to Form 990 or 990-EZ Attach Schedule B after Schedule A (Form 990 or 990-EZ), Organization Exempt Under Section 501(c)(3), if that return is required for the organization

Who Must File Schedule B (Form 990 or 990-EZ)

All organizations must file Schedule B (Form 990 or 990-EZ) unless they certify that they do not meet the filing requirements of Schedule B (Form 990 or 990-EZ) by checking the box in item L of the heading of their Form 990 or Form 990-EZ

See the instructions for item L in the Instructions for Form 990 and Form 990-EZ

Caution Schedule B (Form 990 or 990-EZ) is not a substitute for the list of "contributors" required for Part IV-A, Support Schedule of Schedule A (Form 990 or 990-EZ)

Public Inspection

Schedule B (Form 990 or 990-EZ) is

- *Open to public inspection for a section 527 political organization*
- Generally not open to public inspection for the other organizations that must file this form

If a non-section 527 organization files a copy of Form 990, or Form 990-EZ and attachments with any state, it should not include its Schedule B (Form 990 or 990-EZ) in the attachments for the state, unless a schedule of contributors is specifically required by the state States that do not require the information might make the schedule available for public inspection along with the rest of the Form 990 or Form 990-EZ

See the instructions for Form 990 and Form 990-EZ for phone help and the public inspection rules for those forms and their attachments, which include Schedule B (Form 990 or 990-EZ)

Contributors Required To Be Listed on Part I

"Contributor" includes individuals, fiduciaries, partnerships, corporations, associations, trusts, and exempt organizations

General Rule- Unless the organization is covered by one of the special rules below, it must list on Part I every contributor who, during the year gave the organization directly or indirectly, money, securities, or any other type of property totaling $5,000 or more for the year Also complete Part II for a noncash contribution In determining the $5,000 amount, total all of the contributor's gifts of $1,000 or more for the year

Section 501(c) (3) organizations For an organization described in section 501(c) (3) that meets the 33 1/3% support test of the Regulations under sections 509(a) (1) /170(b) (1) (A) (vi) (whether or not the organization is otherwise described in section 170(b) (1) (A)-

List in Part I only those contributors whose contribution of $5,000 or more is greater than 2% of the amount reported on line 1d of Fom 990 (or line 1 of Form 990-EZ) (Regulations section 1 6033-2(a)(2)(iii)(a))

Example A section 501(c) (3) organization, of the type described above, reported $700,000 in total contributions, gifts, grants and similar amounts received on line 1d of its Form 990 The organization is only required to list in Parts I and II of its Schedule B (Form 990 or 990-EZ) each person who contributed more than the greater of $5,000 or $14 000 (2% or $700,000) Thus, a contributor who gave a total of $11,000 would not be reported in Parts I and II for this section 501(c)(3) organization Even though the $11,000 contribution to the organization exceeded $5,000 it did not exceed $14,000

Section 501(c) (7), (8), or (10) organizations For noncharitable contribution to one of these organizations, list in Part I contributors who gave $5,000 or more as described in the **General rule** discussed above

If a section 501(c)(7) (8), or (10) organization received contributions or bequests for use exclusively for religious, charitable, etc , purposes (sections 170(c)(4), 2055(a)(3), or 2522(a)(3))-

List in Part I each contributor whose contributions total more than $1,000 during the year that were for a religious, charitable, etc , purpose To determine the $1,000, aggregate all of a contributor's gifts for the year (regardless of amount) For a noncash contribution complete Part II

All section 501(c)(7) (8), or (10) organizations that received **any** charitable contributions and listed **any** charitable contributors on Part I must also complete Part III

If a section 501(c)(7), (8), or (10) organization received charitable gifts, but is not required to list **any** charitable contributors on Part I, check the box on line **A** at the top of Schedule B (Form 990 or 990- EZ) and enter the amount of charitable contributions received in the space provided The organization need not complete and attach Part III

Specific Instructions

Note You may duplicate parts I, II and III if more copies are needed Number each page of each Part

Part I In column **(a)**, identify the first contributor listed as no 1 and the second contributor as no 2, etc Number consecutively Show the contributor's name, address, aggregate contributions for the year, and the type of contribution (e g , whether an individual, payroll, or noncash contribution) Report payroll contributions by listing the employer's name, address, and total amount given (unless an employee gave enough to be listed individually)

Part II In column **(a)** show the number that corresponds to the contributor's number in Part I Describe the noncash contribution fully Report on property with readily determinable market value (i e , market quotations for securities) by listing its fair market value (FMV) For marketable securities registered and listed on a recognized securities exchange, measure market value by the average of the highest and lowest quoted selling prices (or the average between the bona fide bid and asked prices) on the contribution date See Regulations section 20 2031- 2 to determine the value of contributed stocks and bonds When market value cannot be readily determined, use an appraised or estimated value To determine the amount of a noncash contribution that is subject to an outstanding debt, subtract the debt from the property's fair market value

Part III Section 501(c) (7), (8), or (10) organizations that received contributions or bequests for use exclusively for religious, charitable etc , purposes must complete Parts I through III for those persons whose gifts totaled more than $1,000 during the year Show also, in the heading of Part III, total gifts that were $1,000 or less and were for a religious, charitable, etc , purpose Complete this information only on the first Part III page

If an amount is set aside for a religious, charitable etc purpose show in column **(d)** how the amount is held (e g whether it is mingled with amounts held for other purposes) If the organization transferred the gift to another organization, show the name and address of the transferee organization in column **(e)** and explain the relationship between the two organizations

Schedule B (Form 990 or 990-EZ) (2000)

Page ___ of ___

Name of organization: CLEVELAND PUBLIC THEATRE, INC.

Employer identification number: 34-1359225

Part I Contributors

(a) No	(b) Name, address and zip code	(c) Aggregate contributions	(d) Type of contribution
1		$ 116,034.	Individual ☐ Payroll ☐ Noncash ☐ (Complete Part II if a noncash contribution)
2		$ 110,000.	Individual ☐ Payroll ☐ Noncash ☐ (Complete Part II if a noncash contribution)
3		$ 15,293.	Individual ☐ Payroll ☐ Noncash ☐ (Complete Part II if a noncash contribution)
4		$ 25,000.	Individual ☐ Payroll ☐ Noncash ☐ (Complete Part II if a noncash contribution)
5		$ 22,000.	Individual ☐ Payroll ☐ Noncash ☐ (Complete Part II if a noncash contribution)
6		$ 15,000.	Individual ☐ Payroll ☐ Noncash ☐ (Complete Part II if a noncash contribution)

Name of organization: CLEVELAND PUBLIC THEATRE, INC.

Employer identification number: 34-1359225

Part I Contributors

(a) No	(b) Name, address and zip code	(c) Aggregate contributions	(d) Type of contribution
7		$ 15,000.	Individual ☐ Payroll ☐ Noncash ☐ (Complete Part II if a noncash contribution)
8		$ 25,000.	Individual ☐ Payroll ☐ Noncash ☐ (Complete Part II if a noncash contribution)
		$	Individual ☐ Payroll ☐ Noncash ☐ (Complete Part II if a noncash contribution)
		$	Individual ☐ Payroll ☐ Noncash ☐ (Complete Part II if a noncash contribution)
		$	Individual ☐ Payroll ☐ Noncash ☐ (Complete Part II if a noncash contribution)
		$	Individual ☐ Payroll ☐ Noncash ☐ (Complete Part II if a noncash contribution)

Loans from Officers, Directors, Trustees, and Other Disqualified Persons as of Year End

US — 990: Page 3, Line 63; 990-PF: Page 2, Line 20 — 2000

Lender's Name and Title	Repayment Terms, Interest Rate, Security Provided, Loan Purpose, Description and FMV of the consideration	Original Amount of Note	Balance Due	Date of Note	Maturity Date
JAMES LEVIN ARTISTIC DIR.	NONE	41,500.	41,500.	06/30/1995	
		41,500.	41,500.		

34-1359225

Mortgages and Other Notes Payable as of Year End

US **990: Page 3, Line 64b; 990-PF: Page 2, Line 21** 2000

Lender's Name and Title and Relationship to Any Officer, Director, or Other Disqualified Person	Repayment Terms, Interest Rate, Security Provided, Loan Purpose, Description and FMV of the consideration	Original Amount of Note	Balance Due	Date of Note	Maturity Date
CITY OF CLEVE.	240 MOS/3%/BLDG.	100,000.	95,807.	06/29/1993	07/01/2020
INSKEEP-FOX	120 MOS/5%/BLDG.	60,000.	52,793.	12/03/1999	01/01/2010
NATIONAL CITY	9%/THEATRE ASSETS	97,000.	97,000.	04/14/2001	
NATIONAL CITY	60 MOS/8.75%/BLDG	20,000.	20,000.	06/01/2001	06/30/2006
		277,000.	265,600.		

Form 990 - Page 2, Line 43
Other Functional Expenses

US

2000

Description of the Asset	Total	Program Services	Management and General	Fundraising
INSTRUCTORS	220,654.	220,654.		
PROGRAM STIPENDS	117,123.	94,212.		22,911.
ARTISTIC STIPENDS	107,461.	103,629.	3,832.	
ADVERTISING	71,073.	71,073.		
COSTUMES,SETS,PROPS..	64,357.	64,357.		
DEVELOPMENT	17,763.	728.		17,035.
DUES & MEMBERSHIPS	3,904.		3,904.	
INSURANCE	3,224.	3,224.		
OTHER	2,853.	130.	2,203.	520.
	608,412.	558,007.	9,939.	40,466.

PAGE 4

PART V LIST OF OFFICERS, DIRECTORS, TRUSEES AND KEY EMPLOYEESS

NAME AND ADDRESS	TITLE/ HOURS	COMPENSATION	BENEFITS	EXPENSE ACCOUNT
DANIEL PETRICIG 6415 DETROIT AVENUE CLEVELAND, OHIO 44102	PRESIDENT/ AS REQUIRED	-0-	-0-	-0-
LYNNA METRISIN 6415 DETROIT AVENUE CLEVELAND, OHIO 44102	VICE PRESIDENT/ AS REQUIRED	-0-	-0-	-0-
CINDY GRAYCAR 6415 DETROIT AVENUE CLEVELAND, OHIO 44102	SECRETARY/ AS REQUIRED	-0-	-0-	-0-
GEORGE CARR 6415 DETROIT AVENUE CLEVELAND, OHIO 44102	TREASURER/ AS REQUIRED	-0-	-0-	-0-
JAMES LEVIN 6415 DETROIT AVENUE CLEVELAND, OHIO 44102	EXECUTIVE DIR / 40 + HOURS	$37,917	$6,000	-0-
MARK BENNETT 6415 DETROIT AVENUE CLEVELAND, OHIO 44102	TRUSTEE/ AS REQUIRED	-0-	-0-	-0-
NANCY BURKINSHAW 6415 DETROIT AVENUE CLEVELAND, OHIO 44102	TRUSTEE/ AS REQUIRED	-0-	-0-	-0-
DAGMAR CELESTE 6415 DETROIT AVENUE CLEVELAND, OHIO 44102	TRUSTEE/ AS REQUIRED	-0-	-0-	-0-
JILLIAN DAVIS 6415 DETROIT AVENUE CLEVELAND, OHIO 44102	TRUSTEE/ AS REQUIRED	-0-	-0-	-0-
JANIS FAEHNRICH 6415 DETROIT AVENUE CLEVELAND, OHIO 44102	TRUSTEE/ AS REQUIRED	-0-	-0-	-0-

continued

CLEVELAND PUBLIC THEATRE, INC
FORM 990
June 30, 2001

34-1359225

NAME AND ADDRESS	TITLE/ HOURS	COMPENSATION	BENEFITS	EXPENSE ACCOUNT
PATSY KLINE 6415 DETROIT AVENUE CLEVELAND, OHIO 44102	TRUSTEE/ AS REQUIRED	-0-	-0-	-0-
JACKIE KRUPP 6415 DETROIT AVENUE CLEVELAND, OHIO 44102	TRUSTEE/ AS REQUIRED	-0-	-0-	-0-
LISA LEVINE 6415 DETROIT AVENUE CLEVELAND, OHIO 44102	TRUSTEE/ AS REQUIRED	-0-	-0-	-0-
JORDAN MUNN 6415 DETROIT AVENUE CLEVELAND, OHIO 44102	TRUSTEE/ AS REQUIRED	-0-	-0-	-0-
SVETLANA SCHREIBER 6415 DETROIT AVENUE CLEVELAND, OHIO 44102	TRUSTEE/ AS REQUIRED	-0-	-0-	-0-
DEWANDA SMITH-SOEDER 6415 DETROIT AVENUE CLEVELAND, OHIO 44102	TRUSTEE/ AS REQUIRED	-0-	-0-	-0-
FLORENCE TOLEDO 6415 DETROIT AVENUE CLEVELAND, OHIO 44102	TRUSTEE/ AS REQUIRED	-0-	-0-	-0-

Form **8868**
(December 2000)
Department of the Treasury
Internal Revenue Service

Application for Extension of Time to File an Exempt Organization Return

▶ File a separate application for each return

OMB No 1545-1709

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** and check this box ▶ ☐
- If you are filing for an **Additional (not automatic) 3-Month Extension, complete only Part II** (on page 2 of this form)

Note Do not complete Part II unless you have already been granted an automatic 3-month extension of a previously filed Form 8868

Part I **Automatic 3-Month Extension of Time**- Only submit original (no copies needed)

Note Form **990-T corporations** requesting an automatic 6-month extension- check this box and complete Part I only ▶ ☐

All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041

Type or print File by the due date for filing your return See instructions	Name of Exempt Organization: CLEVELAND PUBLIC THEATRE, INC.	**Employer identification number**: 34-1359225
	Number street, and room or suite no If a P O box, see instructions: 6415 DETROIT AVENUE	
	City, town or post office, state, and ZIP code For a foreign address see instructions: CLEVELAND OH 44102	

Check type of return to be filed (file a separate application for each return)

☒ Form 990	☐ Form 990-T (corporation)	☐ Form 4720
☐ Form 990-BL	☐ Form 990-T (sec 401(a) or 408(a) trust)	☐ Form 5227
☐ Form 990-EZ	☐ Form 990-T (trust other than above)	☐ Form 6069
☐ Form 990-PF	☐ Form 1041-A	☐ Form 8870

- If the organization does **not** have an office or place of business in the United States, check this box ▶ ☐
- If this is for **Group Return,** enter the organization's four digit Group Exemption Number (GEN) ________ If this is for the **whole** group, check this box ▶ ☐ If it is for part of the group, check this box ▶ ☐ and attach a list with the names and EINs of all members the extension will cover

1 I request an automatic 3-month (6-month, for **990-T corporation**) extension of time until 02/15/2002 to file the exempt organization return for the organization named above The extension is for the organization's return for
▶ ☐ calendar year 20 ____ or
▶ ☒ tax year beginning JUL 01, 2000 and ending JUN 30, 2001

2 If this tax year is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructios $ ________

b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit $ ________

c **Balance Due** Subract line 3b from line 3a Include your payment with this form, or, if required, deposit with FTD coupon or if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions $ ________

Signature and Verification

Under penalties of perjury I declare that I have examined this form including accompanying schedules and statements and to the best of my knowledge and belief it is true correct and complete, and that I am authorized to prepare this form

Signature ▶ Title ▶ CPA Date ▶ 11/12/01

For Paperwork Reduction Act Notice, see Instruction Cat No 27916D Form **8868** (12 2000)

 Preliminary SPA