Form 990

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

2007

Department of the Treasury Internal Revenue Service(77)

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

Open to Public Inspection

Α	For	the 2007 calendar year, or tax year beginning 7/01 ,2007, and ending 6/30	, 2008
В	Check	ii applicable	loyer Identification Number
	$\bigcap A$		-2556678
	\prod_{k}	ame change or type P.O. BOX 122	phone number
	\square	ontail return See See Specific SAN LUIS OBISPO, CA 93406	5-781-3889
	П	Instruc- ermination tions.	ounting Cash X Accrual
	H_{A}	mended return	Other (specify)
	\vdash	pplication pending Section 501(c)(3) organizations and 4947(a)(1) nonexempt H and I are not applicable to se	
	لــا	charitable trusts must attach a completed Schedule A H (a) is this a group return for	or affiliates? Yes X No
		(Form 990 or 990-EZ). H (b) If 'Yes,' enter number	of affiliates
<u>G</u> _	Web	site: ► SLOLITTLETHEATRE . ORG H (c) Are all affiliates include	
j	Orga	Inization type (If No,' attach a list S	·
		ck only one) ► X 501(c) 3 ◄ (insert no) 4947(a)(1) or 527 H (d) Is this a separate return	
K		k here ► if the organization is not a 509(a)(3) supporting organization and its	
	gros	s receipts are normally not more than \$25,000. A return is not required, but if the Group Exemption nization chooses to file a return, be sure to file a complete return.	
		W Clieck - I II til	e organization is not required
		1 1 0 1 0 0 1 1 0 1 0 1 0 1 0 1 0 1 0 1	(Form 990, 990-EZ, or 990-PF)
Pa	rt I	Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the Instru	ictions.)
	1	Contributions, gifts, grants, and similar amounts received	
	_	Contributions to donor advised funds	
		Direct public support (not included on line 1a) 1b 413, 402.	
		Indirect public support (not included on line 1a)	(
	٥	Government contributions (grants) (not included on line 1a)	
	`	Total (add lines la through Id) (cash \$ 415,502. noncash \$)	1e 415,502.
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2 265,012.
	3	Membership dues and assessments	3
	4	Interest on savings and temporary cash investments	4 8,371.
	5	Dividends and interest from securities	5
		Gross rents 6a	
	•	Less rental expenses 6b	[
	ſ	Net rental income or (loss) Subtract line 6b from line 6a	6c
Ŗ	7	Other investment income (describe SEE STATEMENT 1) Gross amount from sales of assets the CEIVE (A) Securities (B) Other than inventory	7 -23,101.
Ž	8 a	Gross amount from sales of assets ether CE/I (A) Securities (B) Other	
界センモスひを		than inventory 8a	
Ē		Less cost or other basis an electronic less cost or other basis and electronic less cost of electronic less cost or other basis and electronic less cost of electronic less cost of electronic less cost or other basis and electronic less cost of electronic less cost of electronic less cost of electronic less cost of electronic	
		Gain or (loss) (attach schedule) 7 8 200 8 c	(
	C	invergain or (loss). Combine line &C, Columns (A) and (B) T !	8d
	9	Special events and activities (attacks (partie) 14 any argunt is from gaming, check here	
	a	Gross revenue (not including \$ of contributions	}
	_ ا	reported on line 1b) Less direct expenses other than fundraising expenses 9a 112,280. 9b 50,187.	1 1
	l		9c 62,093.
	j .	Ret income or (loss) from special events. Subtract line 9b from line 9a STATEMENT 2. Gross sales of inventory, less returns and allowances.	02,033.
	1	Less cost of goods sold 10b	1
Ð	l	Gross profit or (loss) from sales of inventory (attach schedule) Subtract line 10b from line 10a	10 c
の う シ と ア -	11	Other revenue (from Part VII, line 103)	11
2	12	Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12 727,877.
<u></u>			13 274, 338.
JEX	13	Program services (from line 44, column (B)) Management and general (from line 44, column (C))	14 108,623.
EXPENSES	15	Fundraising (from line 44, column (D))	15
Ñ S	16	Payments to affiliates (attach schedule)	16
É S	17	Total expenses. Add lines 16 and 44, column (A)	17 382,961.
	18	Excess or (deficit) for the year Subtract line 17 from line 12	18 344, 916.
_N S	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19 132,870.
N S E E T	20	Other changes in net assets or fund balances (attach explanation)	20
'T S	21	Net assets or fund balances at end of year Combine lines 18, 19, and 20	21 477,786.
RA			12/27/07 Form 990 (2007)
-A	- FU	A Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.	L ILLENOT TOTAL COOTY

Form 990 (2007) SAN LUIS OBISPO LITTLE THEATRE 95-2556678 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 instruct) Part Il Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I (B) Program (A) Total (C) Management (D) Fundraising services and general 22a Grants paid from donor advised funds (attach sch) (cash non-cash \$ If this amount includes foreign grants, check here 22 a 22 b Other grants and allocations (att sch) (cash \$ non-cash If this amount includes 22b foreign grants, check here Specific assistance to individuals (áttach schedule) 23 Benefits paid to or for members 24 (attach schedule) 24 25 a Compensation of current officers, directors, key employees, etc listed in Part V-A 25 a 41,080 20,540 20,540 0. **b** Compensation of former officers. directors, key employees, etc listed in Part V-B 0 0 0. 25 b 0. c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 0 0 0 0. 4958(c)(3)(B) 25 c 26 Salaries and wages of employees not included on lines 25a, b, and c 91,327 53,141. 38,186. 26 27 Pension plan contributions not 27 included on lines 25a, b, and c Employee benefits not included on lines 25a · 27 28 5,577 2,789 2,788 28 6,273 6.273 29 Payroll taxes 29 12,546 30 Professional fundraising fees 30 31 3,344 1,672 1,672 31 Accounting fees 32 Legal fees 32 33 33 Supplies 3,308 1,654 1,654 34 34 Telephone 1,120 560 560 35 Postage and shipping 35 36 895. 448 447. 36 Occupancy 37 Equipment rental and maintenance 37 738 5 869 5 869 Printing and publications 20 20

30 I filling and publications	[30]	11,7,50.	3,002.	3,003.	
39 Travel	39				
40 Conferences, conventions, and meetings	40				
41 Interest	41	214.	107.	107.	
42 Depreciation, depletion, etc (attach sche	dule) 42	3,967.	1,984.	1,983.	
43 Other expenses not covered above (itemi	ıze)				
a SEE STATEMENT 3	43 a	207,845.	179,301.	28,544.	
b	43b				
c	43 c				
d	43 d				
e	43 e				
f	43 f				
9	43 g				
Total functional expenses Add lines 2: through 43g (Organizations completing (B) - (D), carry these totals to lines 13	2a columns 15) 44	382,961.	274,338.	108,623.	0
oint Costs. Check If you are	following SOP 98	3-2			
are any joint costs from a combined of	educational cam	paign and fundraising solid			► Yes X No
'Yes,' enter (i) the aggregate amour	nt of these joint o	osts \$		unt allocated to Prog	ram services
	mount allocated	to Management and gene	ral \$; and (iv) the	e amount allocated
p Fundraising \$					
BAA		TEEA0102L 08/02/	07		Form 990 (2007
	= =				

Part III Statement of Program Service Accomplishments (See the instructions.)

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	re
please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments	

picase make sure the return is	s complete and accurate	e and fully describes, in rart in, the organizations	s programs a	iiu ac	complianments
What is the organization's prin	nary exempt purpose?	► THEATRICAL PRODUCTION AND ED	DUCATION		Program Service Expenses (Required for 501(c)(3) and
All organizations must describ clients served, publications issue izations and 4947(a)(1) nonex	e their exempt purpose ed, etc. Discuss achievem empt charitable trusts r	e achievements in a clear and concise manner St nents that are not measurable (Section 501(c)(3) and must also enter the amount of grants and allocation	ate the numb I (4) organ- ons to others	er of	(4) organizations and 4947(a)(1) trusts, but optional for others)
	EXPERIENCES FO	RODUCTIONS WHICH PROVIDED PARTIC OR OVER 500 COUNTY RESIDENTS AND			
(Grants and allocations) If this amount includes foreign grants, che	ck here		274,338.
			·		
) If this amount includes foreign grants, che	ck here		
	\$) If this amount includes foreign grants, che	ck here	 	
d				_ ·	
(Grants and allocations	\$) If this amount includes foreign grants, chec	ck here	ĒΪ	
e Other program services		,			
(Grants and allocations	\$) If this amount includes foreign grants, chec	ck here 🕨		
f Total of Program Servic	e Expenses (should eq	ual line 44, column (B), Program services).		•	274,338.

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Form 990 (2007)

	e:	Where required, attached schedules and amounts within column should be for end-of-year amounts only	n the d	description	(A) Beginning of year		(B) End of year
	45	Cash - non-interest-bearing			82,403.	45	177,381.
	46	Savings and temporary cash investments				46	
	47	a Accounts receivable	47 a	2,535.		1 1	
		b Less allowance for doubtful accounts	47 b			47 c	2,535.
	48	a Pledges receivable	48 a	19,115.		, 1	
		b Less allowance for doubtful accounts	48 b		21,401.	48 c	19,115.
	49	Grants receivable				49	
	50	a Receivables from current and former officers, director employees (attach schedule)	s, trus	stees, and key		50 a	
A		b Receivables from other disqualified persons (as define and persons described in section 4958(c)(3)(B) (attack	ed und h sche	ler section 4958(f)(1)) edule)		50 b	
ANNETS	51	Other notes and loans receivable (attach schedule)	51 a				
Ś		b Less: allowance for doubtful accounts	51 b			51 c	
		Inventories for sale or use				52	
		Prepaid expenses and deferred charges			19,274.	53	17,335.
		a Investments – publicly-traded securities. STMT 4	,	Cost X FMV	33,809.	54 a	173,646.
		b Investments — other securities (attach sch)	, ,	Cost FMV		54 b	
	55	a Investments - land, buildings, & equipment basis	55 a		-		
		b Less accumulated depreciation (attach schedule)	55 b			55 c	·
		Investments - other (attach schedule)	ı			56	_
	57	a Land, buildings, and equipment basis	57 a	144,382.	-		
		b Less accumulated depreciation (attach schedule) STATEMENT 5	57 b	16,551.	68,437.	57 c	127,831.
:	58	Other assets, including program-related investments					4
		(describe ► SEE STATEMENT 6)	1,874.	58	1,670.
	59	Total assets (must equal line 74) Add lines 45 through	gh 58		227,198.	59	519,513.
	60	Accounts payable and accrued expenses	•		20,777.	60	9,645.
.]	61	Grants payable			ļ	61	
į	62	Deferred revenue				62	
A B L	63	Loans from officers, directors, trustees, and key employees (attach schedule)				63	
ļ.		a Tax-exempt bond liabilities (attach schedule)				64 a	
E S		b Mortgages and other notes payable (attach schedule)	_		50 551	64 b	
S	65	Other liabilities (describe SEE STATEMENT	7	⁾	73,551.	65	32,082.
	66	Total liabilities. Add lines 60 through 65			94,328.	66	41,727.
N	Org		nd cor	nplete lines 67			
Ř E T	67	through 69 and lines 73 and 74			23,148.	67	138,195.
Ą	67	Unrestricted			109,722.	67 68	339,591.
ASSETS	68	Temporarily restricted			109, 122.	69	339,391.
	69	Permanently restricted partial		and complete lines	ļ	105	
R	Oig	70 through 74	ш	and complete inies			
FUZD	70	Capital stock, trust principal, or current funds]	70	
	71	Paid-in or capital surplus, or land, building, and equip	ment	fund		71	
B A	72	Retained earnings, endowment, accumulated income,			·	72	
Ä							
BALANCES	73 74	Total net assets or fund balances. Add lines 67 throu 72 (Column (A) must equal line 19 and column (B) n Total liabilities and net assets/fund balances. Add lin	nust e	qual line 21)	132,870. 227,198.	73 74	477,786. 519,513.
BA		Total nabilities and het assets/fund balances. Add III	162 00	and /J	221,130.	1 / 4	Form 990 (2007)
 /-/	٠						1 (1111 330 (2007)

	art IV-A Reconciliation of Revenu		l Statemen	ts with			n (See the
a b	Total revenue, gains, and other support Amounts included on line a but not on P		ents			а	N/A
D	1 Net unrealized gains on investments	art i, line 12		ь1		1	1
	2Donated services and use of facilities			b2		┨	
	3Recoveries of prior year grants			b3		┨	
	400 ()						
	Add lines b1 through b4	~		b4	······································	ь	
С	Subtract line b from line a					С	
đ	Amounts included on Part I, line 12, but						
	1 Investment expenses not included on Pa	art I, line 6b		d1		4	
	2Other (specify)	- 		_			
		~ ~~~~		d2		┨	
	Add lines d1 and d2				_	d	
e D	Total revenue (Part I, line 12) Add lines		al Statoma	مادنىد مده	Evnances nov	Pot	
	art IV-B Reconciliation of Expens	es per Audited Financia	ai Statemei	nts with	Expenses per	Ret	urn
а	Total expenses and losses per audited fi	nancial statements				a	N/A
b	Amounts included on line a but not on P					_ -	
	1 Donated services and use of facilities			ь1			
	2Prior year adjustments reported on Part	I, line 20		b2			
	3Losses reported on Part I, line 20			b3		1	
						1	
				b4			
	Add lines b1 through b4	-				Ь	
С	Subtract line b from line a					С	
ď	Amounts included on Part I, line 17, but	not on line a:					
	1 Investment expenses not included on Pa	rt I, line 6b.		d1	·]	
	2Other (specify)		-				
				d2		-	
	Add lines d1 and d2				_	d	
e	Total expenses (Part I, line 17) Add line				_	e	
<u> </u>	Current Officers, Director or key employee at any time dur	rs, Trustees, and Key E ring the year even if they wer			,		
	(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compe (if not p enter -	nsation paid, ·0-)	(D) Contributions employee benefing plans and deferr compensation plans	fit ed	(E) Expense account and other allowances
SE	E STATEMENT 8			0.		0.	0.
							
	·						
							
		 					
	·						
							
	·						
BA	Α	TEEA0105L 0	8/02/07				Form 990 (2007)

			8	P	age 6
istees, and Key En	nployees (continue	d)		Yes	No
permitted to vote on organizat	tion business at board meeting	ps ▶ <u>9</u>	_		
nsated professional and igh family or business i	d other independent cor	itractors listed in Schedule	75 b		x
nsated professional and n any other organization	d other independent cor ns. whether tax exempt	itractors listed in Schedule			x
nformation described in	the instructions				
or, trustee, or key empl	loyee received compens of compensation or othe	sation or other benefits (de r benefits in the appropriat	scribed l e columi	below) n See	
(B) Loans and Advances	(if not paid, enter -0-)		account a	and ot	her
					
	}				
	İ	j			
i.					
ructions.)	·			Yes	No
vities or methods of co	inducting activities?		76	~	X
governing documents b	out not reported to the IF	RS?	77		X
-	or more during the yea	ar covered by this return?	78 a	<u> </u>	X
for this year?			78 b	N/	[A]
on, or substantial contra	action during the		79		х
ers, etc, to any other e	e or nationwide organiz xempt or nonexempt or	ation) through common ganization?	80 a		х
			-		
_ 		, ', 🖵 '	.		,
•) (SIIV	ل ۱۵۱۵		-	χ̈́
ns your				990	
	permitted to vote on organization projects listed in Formins ated professional anigh family or business itionship(s) ployees listed in form Shated professional anin any other organization definition of 'related information described in of interest policy? stees, and Key Enor, trustee, or key empand enter the amount of Advances (B) Loans and Advances (B) Loans and Advances (B) Coans and Coans C	permitted to vote on organization business at board meeting permitted to vote on organization business at board meeting permitted to vote on organization business at board meeting permitted to vote on organization business at board meeting permitted to vote on organization permitted to vote organization permitted professional and other independent cornication of virelated organization of virelated organization of interest policy? Stees, and Key Employees That Record, trustee, or key employee received compensated enter the amount of compensation or other organization (if not paid, enter -0-) (B) Loans and Advances (C) Compensation (if not paid, enter -0-) vities or methods of conducting activities? mange governing documents but not reported to the If less gross income of \$1,000 or more during the year for this year? on, or substantial contraction during the viciation with a statewide or nationwide organizers, etc, to any other exempt or nonexempt or N/A and check whether it is entered to the less (See line 81 instructions)	permitted to vote on organization business at board meetings 9 phosphose listed in Form 990, Part V-A, or highest compensated employee instead professional and other independent contractors listed in Schedule inships 10 ployees listed in form 990, Part V-A, or highest compensated employees instead professional and other independent contractors listed in Schedule in any other organizations, whether lax exempt or taxable, that are related to any other organizations, whether lax exempt or taxable, that are related to definition of 'related organizations' information described in the instructions of interest policy? Stees, and Key Employees That Received Compensation or other benefits (de and enter the amount of compensation or other benefits (de and enter the amount of compensation or other benefits (de and enter the amount of compensation or other benefits (de and enter the amount of compensation or other benefits (de and enter the amount of compensation or other benefits (de and enter the amount of compensation or other benefits (de and enter the amount of compensation or other benefits (de and enter the amount of compensation or other benefits (de and enter the amount of compensation or other benefits (de and enter the amount of compensation or other benefits (de and enter the amount of compensation or other benefits (de and enter the amount of compensation or other benefits (de and enter the amount of compensation or other benefits (de and enter the amount of compensation or other benefits (de and enter the amount of compensation or other benefits (de and enter the amount of compensation or other benefits (de and enter the amount of compensation or other benefits (de and enter the amount of compensation) and enter the amount of compensation or other benefits (de and enter the amount of compensation) and enter the amount of compensation or other benefits (de and enter the amount of compensation) and enter the amount of compensation or other benefits (de and enter the amount of compensation) and enter the a	provided to vote on organization business at board meetings proployees listed in Form 990, Part V-A, or highest compensated employees insafed professional and other independent contractors listed in Schedule floriship(s) ployees listed in form 990, Part V-A, or highest compensated employees nave of the definition of 'related organization' related organization' or 'related organization' or other benefits (described and enter the amount of compensation or other benefits (described and enter the amount of compensation or other benefits (described and enter the amount of compensation or other benefits in the appropriate column (B) Loans and Advances (C) Compensation (find paid, enter -0-) compensation plans (E) Example (B) Contributions to employee benefit plans and deferred compensation plans (E) Example (B) Contributions to employee benefit plans and deferred compensation plans (E) Example (B) Contributions to employee benefit plans and deferred compensation plans (E) Example (B) Contributions to employee benefit plans and deferred compensation plans (E) Example (B) Contributions to employee benefit plans and deferred compensation plans (E) Example (B) Contributions to employee benefit plans and deferred compensation plans (E) Example (B) Contributions to employee benefit plans and deferred compensation plans (E) Example (B) Contributions (E) Example (B) Contributions (E) Example (B) Contributions (B) Contributions (B) Contributions (B) Contributions (C) Compensation (B) Contributions (C) Compensation (B) Contributions (C) Compensation (C) Compensation (C) Compensation (C) Compensation (C) Compensation (C) Contributions (C) Compensation (C) Contributions (C) Contributions (C) Contributions (C) Compensation (C) Contributions	provides in the composition of t

Form 990 (2007) SAN LUIS OBISPO LITTLE THEATRE 95-25566	578	F	age 7
Part VI Other Information (continued)		Yes	No
82 a 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?	82 a		х
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 in Part III.)	'A		
83a Did the organization comply with the public inspection requirements for returns and exemption applications?	83a		
b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83 ь	X	<u> </u>
84a Did the organization solicit any contributions or gifts that were not tax deductible?	84 a		X
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84 b		/A
85 a 501(c)(4), (5), or (6) Were substantially all dues nondeductible by members?	85 a		/A
b Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85 b	N.	/A
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			
c Dues, assessments, and similar amounts from members 85c N/	_		
d Section 162(e) lobbying and political expenditures 85d N/	_		i i
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/			
f Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/	⊣ .		
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85 g	N.	/ <u>A</u>
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85 h	N,	A
86 501(c)(7) organizations Enter a Initiation fees and capital contributions included on			
line 12 86a N/			ļ
b Gross receipts, included on line 12, for public use of club facilities 86b No.			
87 501(c)(12) organizations Enter a Gross income from members or shareholders 87a N/	<u> </u>		1
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 876 N/	'A		
88 a 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 a		х
b At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Part XI	► 88 b		х
89 a 501(c)(3) organizations Enter. Amount of tax imposed on the organization during the year under:			
section 4911 ▶ 0. , section 4912 ▶ 0. , section 4955 ▶ 0)-	•	
b 501(c)(3) and 501(c)(4) organizations 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	89 ь		<u>x</u>
).		
).		
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89 e		X
f All organizations Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89 f	ļ	Х
g For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during	80 -		x
the year? 90 a List the states with which a copy of this return is filed CA CA	89 g		_ <u></u>
b Number of employees employed in the pay period that includes March 12, 2007 (See instructions)	90 Б		4
91 a The books are in care of ► WILDA ROSENE Located at ► P.O. BOX 122 SAN LUIS OBISPO, CA ZIP + 4 ► 934		<u> </u>	1
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a		Yes	
financial account in a foreign country (such as a bank account, securities account, or other financial account)? If 'Yes,' enter the name of the foreign country	91 b		X_
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts			
BAA	Form	990	(2007)

Part VI	Other Information (continue	ed)					Yes 1	No	
· c At any	y time during the calendar year, did	the organiza	tion mainta	in an office	outside of the U	Inited States?	91 c	<u>X</u>	
	If 'Yes,' enter the name of the foreign country								
	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 – Check here								
	nter the amount of tax-exempt inte					▶ 92	N	<u>/A</u>	
Part VII	Analysis of Income-Produc					etion 512 512 or 514			
Note: Enter	r gross amounts unless		business i			ction 512, 513, or 514	(E)		
otherwise ii		(A) Business code		3) ount	(C) Exclusion code	(D) Amount	Related or exemp		
93 Prod	gram service revenue								
	EATRICAL PROD./ED.						265,01	2.	
								_	
e									
	licare/Medicaid payments				 				
-	& contracts from government agencies								
	nbership dues and assessments				7.4	0.271			
	est on savings & temporary cash invmnts				14	8,371.			
	dends & interest from securities ental income or (loss) from real estate							—	
	t-financed property				 				
	debt-financed property		_		 			—	
	ental income or (loss) from pers prop		 -		 				
	er investment income				18	-23,101.		_	
100 Gair	n or (loss) from sales of assets							_	
	r than inventory								
101 Net ii	ncome or (loss) from special events				1	62,093.			
	s profit or (loss) from sales of inventory				_				
103 Othe	er revenue a				ļļ				
									
					 			—	
d								—	
104 Subto	otal (add columns (B), (D), and (E))				 	47,363.	265,01	了	
	al (add line 104, columns (B), (D),	and (E))				▶	312,37		
	105 plus line 1e, Part I, should equ	. ,,	on line 12	Part I				_	
	Relationship of Activities to				empt Purpose	es (See the instruc	tions.)	_	
Line No.	Explain how each activity for which	n income is re	ported in c	olumn (E)	of Part VII contrib	outed importantly to the	accomplishment		
	of the organization's exempt purpo	ses (other tha	an by provid	ding funds	for such purpose	s) 			
93A	EXEMPT INCOME FROM PRO	DUCTIONS	/SHOWS						
						 			
			· · · · · · · · · · · · · · · · · · ·					—	
Part IX	Information Regarding Tax	ahle Suhsi	diaries ar	nd Disrec	arded Entitie	s (See the instruct	ions)		
Tartix	(A)	(B)	aldi les di	(C		(D)	(E)		
Nome	address, and EIN of corporation,		of	_		Total	End-of-year		
	nership, or disregarded entity	Percentage ownership int		Nature of	activities	income	assets		
N/A			8						
			8						
		<u> </u>	8						
D. 117	1.4	1	%	ial- D)			
	Information Regarding Train								
	organization, during the year, receive any fu		• • • • •				Yes X No		
	e organization, during the year, pag 'Yes' to (b), file Form 8870 and Fo				i a personal beni	em comidet'	Yes X No		
RAA	res to (b), me rolli boro and ro	4720 (366	n isti detion:	·/		TEF AN 1081 12/27/0	7 Form 990 (20	07)	

Page 8

95-2556678

Form 990 (2007) SAN LUIS OBISPO LITTLE THEATRE

Pai	t XI	Jinformation Regarding Transfers To an organization is a controlling organizatio	nd From Controlled Ei	ntities. Com n 512/h)/13	plete only if the	9		
- -		organization is a controlling organization	as defined in section	11 312(0)(13)	<i>/</i>		Yes	No
106	Did	I the reporting organization make any transfers to a	a controlled entity as define	ed in section 51	2(b)(13) of the Co	de7 If		
	'Ye	s, complete the schedule below for each controlled	entity		2(0)(10) 01 110 00		L	X
		(A) Name, address, of each controlled entity	(B) Employer Identification Number	Desci tra	(C) ription of ansfer	(Amount	D) of tran	sfer
а	-							
b								
С								
		Totals			:			
							Yes	No
107	Did	the reporting organization receive any transfers fr	rom a controlled entity as d	efined in sectio	on 512(b)(13) of th	e Code? If		
	'Ye	s,' complete the schedule below for each controlled	d entity	, · · · · · · · · · · · · · · · · · · ·				Х
		(A) Name, address, of each controlled entity	(B) Employer Identification Number	Desci tra	(C) ription of ansfer	(l Amount d	D) of tran	sfer
a	 							
ь	 -							
С					_			
		Totals						
				<u> </u>		· 	Yes	No
108	Did	the organization have a binding written contract in nuities described in question 107 above?	effect on August 17, 2006	, covering the i	nterest, rents, roya	alties, and		X
Plea Sign Here	•	Under penalties of perjury. I declare that I have examined this return to correct, and complete Declaration of preparer (other than off Signature of officer Signature of officer Aprilum K. Blake	President President	_ 1	and to the best of my kr any knowledge 	owledge and b	elief, it is	5
Paid Pre-		Preparer's signature • A CONTROLL	CPA Date 11	/03/08		reparer's SSN o eneral Instructi /A	or PTIN (See
pare Use	r's	Firm's name (or yours if self-employed), Table 1368 MARSH STREET			EIN ► N/A			
Only	'	address, and ZIP + 4 SAN LUIS OBISPO, CA 93	3401	· · · · · · · · · · · · · · · · · · ·	Phone no ► (80	5) 543-	5800	
BAA						Form	990 (2007)

SCHEDULE A (Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information — (See separate instructions.)

2007

Employer identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

SAN LUIS OBISPO LITTLE THEATRE			95-2 <u>5</u> 56678	
	Highest Paid Employees Oth		, Directors, an	d Trustees
(See instructions, List eac	h one. If there are none, ente			· · · · · · · · · · · · · · · · · · ·
(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 employee benefit plans and deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$50,000		0		<u></u>
Part II — A Compensation of the Five (See Instructions. List each	Highest Paid Independent C h one (whether individuals or	ontractors for Pr firms). If there ar	ofessional Ser e none, enter '	vices None ')
(a) Name and address of each independent of	contractor paid more than \$50,000	(b) Type o	of service	(c) Compensation
NONE				
		-		
Total number of others receiving over \$50,000 for professional services		0		
(List each contractor who p	Highest Paid Independent Coerformed services other than ter 'None.' See instructions.)	ontractors for Ot professional ser	her Services vices, whether	ındıvıduals or
(a) Name and address of each independent of	contractor paid more than \$50,000	(b) Type o	of service	(c) Compensation
NONE				
			·····	
				
				
Total number of other contractors recovered	·			
Total number of other contractors receiving over \$50,000 for other services	(ol		

Sch	edule A (Form 990 or 990-EZ) 2007 SAN LUIS OBISPO LITTLE THEATRE 95-2	556678		Page 2
Pa	rt III Statements About Activities (See Instructions.)		Ye	s No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any att to influence public opinion on a legislative matter or referendum? If 'Yes,' enter the total expenses paid or incurred in connection with the lobbying activities	empt		
	or incurred in connection with the lobbying activities \$\ \sim \sqrt{N/A}\$ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B).		,	X
	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 substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or w taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or pibeneficiary? (If the answer to any question is 'Yes,' attach a detailed statement explaining the transactions)	ith any rincipal		
á	a Sale, exchange, or leasing of property?		2a	X
ŀ	Lending of money or other extension of credit?		2Ь	X
•	E Furnishing of goods, services, or facilities?		2c	X
ď	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	_2	2d	X
	e Transfer of any part of its income or assets?		2 e	X
3 a	a Did the organization make grants for scholarships, fellowships, student loans, etc? (If 'Yes,' attach an explanation of how the organization determines that recipients qualify to receive payments)		Ba	X
ŀ	b Did the organization have a section 403(b) annuity plan for its employees?	-3	зь Х	
(c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement		Bc	x
	d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?		3 d	X
4 a	a Did the organization maintain any donor advised funds? If 'Yes,' complete lines 4b through 4g If 'No,' complete 4f and 4g	lines	la .	X
ı	b Did the organization make any taxable distributions under section 4966?		1b	N/A
•	Did the organization make a distribution to a donor, donor advisor, or related person?		tc	N/A_
(d Enter the total number of donor advised funds owned at the end of the tax year	-		N/A
•	e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year	-		N/A
1	Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts	-		0
ţ	g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year	-		0.
BAA	TEEA0402L 12/27/07 Schedule A (Form	990 or Form	990-E	Z) 2007

Par	t IV Reason for Non-Private F	oundation Status (S	see instructions.)						
cer	tify that the organization is not a private t	foundation because it is. ((Please check only ONE ap	plicable box	:)				
5	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)								
7	A hospital or a cooperative hospital	service organization Sec	tion 170(b)(1)(A)(iii)						
8	A federal, state, or local governmen	t or governmental unit Se	ection 170(b)(1)(A)(v)						
9	A medical research organization operand state	erated in conjunction with	a hospital Section 170(b)	(1)(A)(III) E I	nter the hosp	ital's name, city,			
10	An organization operated for the ber (Also complete the Support Schedu	nefit of a college or univer ile in Part IV-A)	rsity owned or operated by	a governme	ental unit Sec	tion 170(b)(1)(A)(iv)			
11 a	X An organization that normally receive Section 170(b)(1)(A)(vi) (Also comp	es a substantial part of it plete the Support Schedu	s support from a governme le in Part IV-A)	ntal unit or	from the gene	eral public.			
116	A community trust Section 170(b)(1)(A)(vi) (Also complete t	he Support Schedule in Pa	art IV-A)					
12	An organization that normally receive from activities related to its charitable from gross investment income and corganization after June 30, 1975. See	le, etc, functions — subjei inrelated business taxable	ct to certain exceptions, an e income (less section 511	d (2) no mo tax) from bi	ore than 33-1/3 usinesses acc	3% of its support			
13	An organization that is not controller requirements of section 509(a)(3)	d by any disqualified pers	ons (other than foundation	managers)	and otherwise	e meets the			
	Type I Type II		onally Integrated	Type III					
	Provide the	following information ab	out the supported organization	ations. (See	instructions))			
	(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	Is the su organization the sup organiz gove docum	porting ration's rning nents?	(e) Amount of support			
				Yes	No				
	_								
_									
Tota			<u> </u>		>	0.			
<u>14</u> BAA	An organization organized and oper	ated to test for public safe	ety. Section 509(a)(4) (See			990 or 990-EZ) 2007			

	e: You may use the worksheet in the			· · · · · · · · · · · · · · · · · · ·			inung.
					1	y	(a)
begi	ndar year (or fiscal year nning in)	(a) 2006	(b) 2005	(c) 2004	(d) 2003		(e) Total
15 	Gifts, grants, and contributions received (Do not include unusual grants See line 28)	42,950.	26,563.	38,057.	36,	506.	144,076
<u>16</u>	Membership fees received						0
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc, purpose	340,365.	328,575.	248,755.	249,8	325.	1,167,520
18	Gross income from interest, dividends, amts rec'd from payments on securities loans (sec. 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less sec. 511 taxes) from businesses acquired by the organization after June 30, 1975		2,093.	1,045.		548.	7,632
19	Net income from unrelated business activities not included in line 18						0
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						0
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						0
22	Other income Attach a schedule Do not include gain or (loss) from sale of capital assets SEE STMT 9	4,592.	3,238.	1,767.	6.5	551.	16,148
23	Total of lines 15 through 22	391,853.	360,469.	289,624.	293,		1,335,376
	Line 23 minus line 17	51,488.	31,894.	40,869.	43,6		167,856
25	Enter 1% of line 23	3,919.	3,605.	2,896.	2,9	934.	
26	Organizations described on line	s 10 or 11: a Ente	er 2% of amount in c	olumn (e), line 24	•	26 a	3,357
b	Prepare a list for your records to show the supported organization) whose total gifts f return. Enter the total of all these excess	for 2003 through 2006 excee	ibuted by each person (oth ded the amount shown in	ner than a governmental un line 26a Do not file this lis	t or publicly it with your	26 b	
c	Total support for section 509(a)(1	l) test Enter line 24,			>	26 c	167,856
d	Add Amounts from column (e) for		7,632.	19			00.700
_	Dublic company (loss 20s company to	22	16,148.	26 b		26 d	23,780 144,076
	Public support (line 26c minus lir Public support percentage (line	•	lad by line 26c (deno	minator\\	•	26 e 26 f	85.83 %
27	Organizations described on line For amounts included in lines 15 name of, and total amounts received such amounts for each year	12: N/A , 16, and 17 that were ved in each year from	received from a 'dis n, each 'disqualified p	qualified person,' pre person ' Do not file th	is list with you	our rec r returr	ords to show the n. Enter the sum of
	(2006) For any amount included in line 1 to show the name of, and amount \$5,000 (Include in the list organi After computing the difference be differences (the excess amounts) (2006) Add Amounts from column (e) for 17	17 that was received for received for each ye zations described in letween the amount received reach year	rom each person (otl ar, that was more th ines 5 through 11b, a ceived and the larger	her than 'disqualified an the larger of (1) th as well as individuals amount described in	persons'), prep ne amount on li) Do not file thi (1) or (2), ente (2003)	are a li ne 25 fi s list w r the si	st for your records or the year or (2) vith your return. um of these
C	Add Amounts from column (e) fo	or lines 15		16		27	
		20	d line 27h total			27 d	
ں م	Public support (line 27c total min	us line 27d total)	u mie Z/D (Olai			27 e	
	Total support for section 509(a)(2		from line 23. column	(e) ► 27f			
	Public support percentage (line				>	1 1	
_	Investment income percentage (**	or)) >		8
28	Unusual Grants: For an organiza	ition described in line	10, 11, or 12 that reg	ceived any unusual gr	ants during 200	03 throu	ugh 2006, prepare a

•	(To be completed ONLY by schools that checked the box on line 6 in Part IV)	N/A		
		,	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	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?	31		
	If 'Yes,' please describe, if 'No,' please explain (If you need more space, attach a separate statement)	-		
	Does the organization maintain the following. a Records indicating the racial composition of the student body, faculty, and administrative staff?	32 a		
ı	b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32 b		
(Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32 c		
•	d Copies of all material used by the organization or on its behalf to solicit contributions?	32 d		
	If you answered 'No' to any of the above, please explain (If you need more space, attach a separate statement)	-{		
33	Does the organization discriminate by race in any way with respect to	-		
	, and a game and a second a second and a second a second and a second a second and a second and a second a second a second a second and a second a			
;	a Students' rights or privileges?	33a		_
į	b Admissions policies?	33 b		
•	Employment of faculty or administrative staff?	33 c		
(d Scholarships or other financial assistance?	33 d		
•	e Educational policies?	33 e		
1	f Use of facilities?	33 f		
,	g Athletic programs?	33 g		
1	h Other extracurricular activities?	33 h		
	If you answered 'Yes' to any of the above, please explain (If you need more space, attach a separate statement)	-		
	~	-		
34 :	a 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?	34 b		
35	If you answered 'Yes' to either 34a or b, please explain using an attached statement 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	لييا	

Par	Part VI-A Lobbying Expenditures by Electing Public Charities (See instructions) (To be completed ONLY by an eligible organization that filed Form 5768) N/A									
Che	Check ► a If the organization belongs to an affiliated group Check ► b If you checked 'a' and 'limited control' provisions apply									
	Limits on Lobbying Expenditures (a) Affiliated group totals (b) To be completed for all electing									
	(The term 'expenditures' means amounts paid or incurred) organizations									
36	Total lobbying expendit	•	36							
37	Total lobbying expendit	_	• •	ying)	37					
38	Total lobbying expendit	•	37).		38					
39	Other exempt purpose	•	20 100		39					
40	Total exempt purpose e	•	•		40					
41	Lobbying nontaxable ar		J		1	1				
	If the amount on line 40		lobbying nontaxable a of the amount on line							
	Not over \$500,000 Over \$500,000 but not over \$1		.000 plus 15% of the excess o	1						
	Over \$1,000,000 but not over \$		000 plus 10% of the excess of	· · ·	41					
	Over \$1,500,000 but not over \$		000 plus 5% of the excess ov		7,-					
	Over \$17,000,000		000,000	., 41,000,000						
42	Grassroots nontaxable		,		42	-	-		•	
43	Subtract line 42 from lin	•	•		43					
44	Subtract line 41 from lin	ne 38 Enter -0- if line 4	I is more than line 38		44					_
	Caution: If there is an a	amount on either line 4.	3 or line 44, you must f	ile Form 4720						_
	(Some organ	izations that made a se	Averaging Period ection 501(h) election de the instructions for lie	o not have to co	omplete	(h) all of the fr	ve col	umns	below	
		, , , , , , , , , , , , , , , , , , , ,	Lobbying Expend	ditures During	4 -Year	Averaging I	Period			
	Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2006	(c) 2005			d) 004		(e) Total	
45	Lobbying nontaxable amount			·.						
46	Lobbying ceiling amount (150% of line 45(e))									
47	Total lobbying expenditures				- , 					
48	Grassroots non- taxable amount									
49	Grassroots ceiling amount (150% of line 48(e))									
	Grassroots lobbying expenditures									
Par	t VI-B Lobbying A	ctivity by Nonelect only by organizations th	ing Public Charitie at did not complete Pai	:5 rt VI-A) (See in	structio	ns)			N/A	
Durir atter	ng the year, did the orgain	nization attempt to influ	ence national, state or	local legislation	n, includ	····	Yes	No	Amount	_
ā	Volunteers							-	·	
t	Paid staff or manageme	ent (Include compensati	ion in expenses reporte	d on lines c th	rough h	.)				
c	: Media advertisements							-		
c	Mailings to members, le	gislators, or the public								
	Publications, or publish									
	Grants to other organiza									
	Direct contact with legis						 			
	Rallies, demonstrations		•	r any other me	ans		igdash			—
ı	Total lobbying expendition of the above		•	intion of the lab	huna aa	hvities				_
BAA	If 'Yes' to any of the abov	e, also attacti a statemer	it giving a detailed descr	iphori or the look	bying act		edule 4	(For	m 990 or 990-EZ) 2	007
	Schedule A (Form 550 of 550-LZ) 2007									

Schedule A (Form 990 or 990-EZ) 2007

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

a Transfers from the reporting organization to a noncharitable exempt organization of (I)Cash (II) Char assets (III) Char assets (III) Char assets (III) Char assets or exchanges of assets with a noncharitable exempt organization (III) Processes of assets from a noncharitable exempt organization (III) Processes of assets from a noncharitable exempt organization (III) Processes of assets from a noncharitable exempt organization (III) Processes of assets from a noncharitable exempt organization (III) Processes of assets from a noncharitable exempt organization (III) Processes of assets from a noncharitable exempt organization (III) Processes (III) P	of the	e reporting organization Code (other than section	airectly or ir n 501(c)(3) (nairectiy engage organizations) o	r in any of the following r in section 527, rela	ng with any other organization of ting to political organizations?	jescribea in secti	อก อบ	(C)
(ii) Other transactions (i) Sales or exchanges of assets with a noncharitable exempt organization (ii) Rental of facilities, equipment, or other assets (iii) Purchases of assets from a noncharitable exempt organization (iii) Rental of facilities, equipment, or other assets (iv) Rembursement arrangements (b) (iii) X (v) Loans or loan guarantees (vi) Performance of services or membership or fundraising solicitations (c) Sharing of facilities, equipment, mailing lists, other assets, or paid employees 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 granization received less than fair market value in any transaction or sharing arrangement, show in column (b) five value of the goods, other assets, or services received (a) (b) Rental of the color of transfers, transactions, and sharing arrangement. Show in column (b) five value of the goods, other assets, or services received (b) Name of noncharitable exempt organization (c) Description of transfers, transactions, and sharing arrangements. (b) Name of organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations (c) Description of relationship.				- ,		- ' -		Yes	No
(i)Sales or exchanges of assets with a noncharitable exempt organization (ii)Purchases of assets from a noncharitable exempt organization (iii)Rental of facilities, equipment, or other assets (iiii)Rental of facilities, equipment, or other assets (ivi)Rembursement arrangements (b)(iii) X (V)Coans or loan guarantees (vi)Performance of services or membership or fundraising solicitations (b)(iii) X (c) X (d)(iii)Rental of facilities, equipment, or other assets (vi)Performance of services or membership or fundraising solicitations (b)(iii) X (v)Performance of services or membership or fundraising solicitations (b)(iii) X (c) X (d) X	(i) Ca	sh	J		, ,		51 a (i)		X
b Other transactions (i) Sales or exchanges of assets with a noncharitable exempt organization (ii) Purchases of assets from a noncharitable exempt organization (iii) Rental of facilities, equipment, or other assets (iv) Rembursement arrangements (v) Loans or loan guarantees (v) Performance of services or membership or fundraising solicitations c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "ves", 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 (b) the 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 (b). (a) Amount involved Amount involved N/A Sales 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 5277 *	(ii)Otl	her assets					a (ii)		X
(ii)Purchases of assets from a noncharitable exempt organization (iii)Rental of facilities, equipment, or other assets (iv)Reimbursement arrangements (v)Performance of services or membership or fundraising solicitations (vi)Performance of services or performance or services ser	b Other t	transactions							
(iii) Rental of facilities, equipment, or other assets (iv) Reimbursement arrangements (v) Loans or loan guarantees (vi) Performance of services or membership or fundraising solicitations (vi) Performance of services or membership or fundraising solicitations (vi) Performance of services or membership or fundraising solicitations (vi) Performance of services or membership or fundraising solicitations (vi) Performance of services or membership or fundraising solicitations (vi) Performance of services or membership or fundraising solicitations (vi) Performance of services or membership or fundraising solicitations (vi) Performance of services or membership or fundraising solicitations (vi) Performance of services or membership or fundraising solicitations (vi) Performance of services or membership or fundraising solicitations (vi) Performance of services or membership or fundraising solicitations (vi) Performance of services or membership or fundraising solicitations (vi) Performance of services or membership of fundraising solicitations (vi) Performance of services or membership of fundraising solicitations (vi) Performance of services or membership of fundraising solicitations (vi) Performance of services or membership of fundraising solicitations (vi) Performance of services or membership of fundraising solicitations (vi) Performance of services or membership of fundraising solicitations (vi) Performance of services or performance or part of fundraising solicitations (vi) Performance of services or performance of the fundraising solicitations (vi) Performance of services or performance of the fundraising solicitations (vi) Performance of services or performance or part of the fundraising lists, other assets, or part of the fund	(i) Sa	les or exchanges of ass	ets with a n	oncharitable exi	empt organization		b (i)		Х
(iv)Reimbursement arrangements (vi)Deans or loan guarantees (vi)Performance of services or membership or fundraising solicitations c Sharing of facilities, equipment, mailing lists, other assets, or paid employees 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 of any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line no Amount involved Name of noncharitable exempt organization N/A Description of transfers, transactions, and sharing arrangements N/A State of the goods of transfers transactions, and sharing arrangements **Temperature** *	(iı) Pu	rchases of assets from	a noncharita	ble exempt org	anızatıon		b (ii)		X
(v) Loans or loan guarantees (vi) Performance of services or membership or fundraising solicitations c Sharing of facilities, equipment, mailing lists, other assets, or paid employees 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 of any fransaction or sharing arrangement, show in column (b) the value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value of the goods, other assets, or services given by the reporting organization if the organization of transfers, transactions, and sharing arrangements. N/A N/A N/A Solve (c) Name of noncharitable exempt organization Description of transfers, transactions, and sharing arrangements or transfers, transactions or transfers, transactions, and sharing arrangements or transfers, transactions or transfe	(ıii)Re	ntal of facilities, equipm	ent, or othe	r assets			b (iii)		X
(vi)Performance of services or membership or fundraising solicitations c Sharing of facilities, equipment, mailing lists, other assets, or paid employees dlif the answer to any of the above is "Ves," 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) (b) (c) (c) (c) (d) (d) (d) (d) (e) (d) (e) (d) (e) (f) (e) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f	(iv)Re	ımbursement arrangeme	ents				b (iv)		Х
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees 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 of the goods, other assets, or services received (a) (b) (c) (d) Line no Amount involved Name of noncharitable exempt organization N/A Description of transfers, transactions, and sharing arrangements N/A 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 X No b If "Yes," complete the following schedule (b) Name of organization of relationship	(v) Lo	ans or loan guarantees					b (v)		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) (b) (c) Name of noncharitable exempt organization N/A Description of transfers, transactions, and sharing arrangements N/A Description of transfers, transactions, and sharing arrangements Solvent and transfers, transactions, and sharing arrangements are considered in the column of transfers, transactions, and sharing arrangements are considered in the column of transfers, transactions, and sharing arrangements are considered in transfers, transactions, and sharing arrangements are considered in the column of transfers, transactions, and sharing arrangements are considered in the considered in transfers, transactions, and sharing arrangements are considered in the considered	(vi)Pe	rformance of services of	r membersh	ıp or fundraising	g solicitations		b (vi)		
(c) Amount involved Name of noncharitable exempt organization Description of transfers, transactions, and sharing arrangements N/A									<u>X</u>
(c) Amount involved Name of noncharitable exempt organization Description of transfers, transactions, and sharing arrangements N/A	d If the a	answer to any of the abo ods, other assets, or ser	ve is 'Yes,' vices given	complete the fo	llowing schedule Co porganization, If the	lumn (b) should always show the organization received less than	e fair market valu fair market value	in of	
N/A		(b)		(c)		(d))		
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? Page 1 Yes X No b if 'Yes,' complete the following schedule (a) Name of organization Type of organization Type of organization Description of relationship	Line no	Amount involved	Name of	noncharitable e	xempt organization	Description of transfers, transacti	ons, and sharing arrai	ngement	is
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described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If 'Yes,' complete the following schedule (a) Name of organization (b) Type of organization Description of relationship									
Name of organization Type of organization Description of relationship	describ	ed in section 501(c) of complete the following	the Code (of	iliated with, or r ther than section	n 501(c)(3)) or in sec	ction 527?		s X	No ——
N/A	_			Type of		Description of	relationship		
	N/A								
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20 0 7	FEDERAL STATEMENTS		PAGE 1
CLIENT 8094	SAN LUIS OBISPO LITTLE THEATRE		95-2556678
11/03/08 STATEMENT 1 FORM 990, PART I, LINE 7 OTHER INVESTMENT INCOME		•	10 32AM
UNREALIZED LOSS ON INV.	•	TOTAL \$	-23,101. -23,101.

STATEMENT 2 FORM 990, PART I, LINE 9 NET INCOME (LOSS) FROM SPECIAL EVENTS

SPECIAL EVENTS		GROSS RECEIPTS	LESS CONTRI- BUTIONS	GROSS REVENUE	LESS DIRECT EXPENSES	NET INCOME (LOSS)
LEGENDS GALA BALL	TOTAL	85,365. 26,915. \$ 112,280.	0. 0. \$ 0.	85,365. 26,915. \$ 112,280.	31,734. 18,453. \$ 50,187.	53,631. 8,462. \$ 62,093.

STATEMENT 3 FORM 990, PART II, LINE 43 OTHER EXPENSES

	(A)	(B) PROGRAM	(C) MANAGEMENT	(D)
	TOTAL	SERVICES	& GENERAL	<u>FUNDRAISING</u>
ADVERTISING	4,141.	2,071.	2,070.	
ALARM FEES	572.	286.	286.	
BANK & CC CHARGES	8,382.	4,191.	4,191.	
BOX OFFICE/SUPPL	1,189.	1,189.	,	
DUES AND SUBSCRIPTIONS	1,006.	503.	503.	
INSURANCE	17,793.	8,897.	8,896.	
JANITORIAL	3,725.	1,863.	1,862.	
MEETINGS	2,199.	1,100.	1,099.	
MISCELLANEOUS	1,075.	538.	537.	
OFFICE EXPENSE	4,875.	2,438.	2,437.	
OPERATING GRANT EXP	3,600.	1,800.	1,800.	
OUTSIDE SERVICES	5,000.	2,500.	2,500.	
PERFORMANCE SUPPLIES	3,707.	3,707.	·	
PRODUCTION EXPENSE	142,592.	142,592.		
SPONSOR DONOR PGM	829.	415.	414.	
THEATER MAINTENANCE/SUPPLIES	3,261.	3,261.		
UTILITIES	3,392.	1,696.	1,696.	
VOLUNTEER EXPENSES	83.	42.	41.	
WEBSITE/INTERNET	424.	212.	212.	
TOTA		\$ 179,301.	\$ 28,544.	\$ 0.

2007	FEDER	RAL ST	ΈΑΤ	EMEI	NTS				PAGE 2
CLIENT 8094 SAN LUIS OBISPO LITTLE THEATRE								95-2556678	
11/03/08								_	10.32AM
STATEMENT 4 FORM 990, PART IV, LI INVESTMENTS - PUBL	NE 54A ICLY TRADED SECURI	TIES							
OTHER PUBLICLY TRA	DED SECURITIES_					V	ALUATION METHOD		AMOUNT
PUBLICLY TRADED SE					_	MAR	KET VALUE	\$	173,646.
							TOTAL	\$	173,646.
			PUF	BLICLY	TRAI	DED	SECURITIES	\$	173,646.
STATEMENT 5 FORM 990, PART IV, LI LAND, BUILDINGS, AN C FURNITURE AND FIXT MACHINERY AND EQUI IMPROVEMENTS	D EQUIPMENT ATEGORY URES	TOTAL	\$	129, 14,	600.		ACCUM. DEPREC. 172. 11,349. 5,030. 16,551.		BOOK VALUE 428. 118,213. 9,190. 127,831.
STATEMENT 6 FORM 990, PART IV, LI OTHER ASSETS DEPOSITS	NE 58						TOTAL	\$ \$	1,670. 1,670.
STATEMENT 7 FORM 990, PART IV, LI OTHER LIABILITIES ACCRUED EXPENSES DEFERRED REVENUE PAYROLL TAXES PAYA PENSION PAYABLE							TOTAL	\$	6,480. 22,915. 2,487. 200. 32,082.

2007	

FEDERAL STATEMENTS

PAGE 3

CLIENT 8094

SAN LUIS OBISPO LITTLE THEATRE

95-2556678

11/03/08

10 33AM

STATEMENT 8
FORM 990, PART V-A
LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED			ACCOUNT/
GAY-YVETTE SPENCER PO BOX 122 SAN LUIS OBISPO, CA 93406	MEMBER 2.00		\$ 0.	
WILDA ROSENE P.O. BOX 122 SAN LUIS OBISPO, CA 93406	PRESIDENT 2.00	0.	0.	0.
JEANNINE RICHISON PO BOX 122 SAN LUIS OBISPO, CA 93406	MEMBER 2.00	0.	0.	0.
ELAINE FOURNIER PO BOX 122 SAN LUIS OBISPO, CA 93406	MEMBER 2.00	0.	0.	0.
TERRY LICHTMAN P.O. BOX 122 SAN LUIS OBISPO, CA 93402	MEMBER 2.00	0.	0.	0.
SUSAN RODRIGUEZ P.O. BOX 122 SAN LUIS OBISPO, CA 93406	MEMBER 2.00	0.	0.	0.
STEVE BELASCO P.O. BOX 122 SAN LUIS OBISPO, CA 93406	PAST PRESIDENT 2.00	0.	0.	0.
MARILYN BLAKE P.O. BOX 122 SAN LUIS OBISPO, CA 93406	VICE PRESIDENT 2.00	0.	0.	0.
DOTTIE THOMPSON P.O. BOX 122 SAN LUIS OBISPO, CA 93406	TREASURER 2.00	0.	0.	0.
	TOTAL	\$ 0.	\$ 0.	\$ 0.

STATEMENT 9 SCHEDULE A, PART IV-A, LINE 22 OTHER INCOME

DESCRIPTION	(A) <u>2006</u>	(B) 2005	<u>(C) 2004</u>	(D) 2003	(E) TOTAL
UNREALIZED GAIN ON INVESTMENT	ľ				
	\$ 4,592.	\$ 3,238.	\$ 1,767.	\$ 6,551.	\$ 16,1 <u>48.</u>
TOTAL	\$ 4,592.	\$ 3,238.	\$ 1,767.	\$ 6,551.	\$ 16,148.

80/08/	2	007 F	EDER,	AL B	300K	DEP	2007 FEDERAL BOOK DEPRECIATION SCHEDULE	TION	SCHE	DULE					PAGE 1
CLIENT 8094				SANL	JO SIN-	3ISPO L	SAN LUIS OBISPO LITTLE THEATRE	HEATRE							95-2556678
11/03/08 ND DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS	CUR 179 BONUS	SPECIAL DEPR ALLOW	PRIOR 179/ BONUS/ SP. DEPR	PRIOR DEC BAL DEPR.	SALVAG /BASIS REDUCT	DEPR BASIS	PRIOR DEPR.	METHOD		RAIE	10 32AM CURRENT DEPR.
1 990/990-PF															
FURNITURE AND FIXTURES															
9 THEATRE SEATS	7/01/06	•	009	ı	1					009	98	S/L	٦ /		98
TOTAL FURNITURE AND FIXTURE			009		0	0	0	0 (0	009	98				98
IMPROVEMENTS															
5 CARPETING	10/17/02		2,000							5,000	4,667				333
14 IMPROVEMENTS	5/01/08	Í	9,220	1						9,220		S/L MM	M 39	9 00321	30
TOTAL IMPROVEMENTS			14,220		0	0	0	0	0	14,220	4,667				363
MACHINERY AND EQUIPMENT															
1 EQUIPMENT	VARIOUS		58,765							58,765					0
2 COMPUTER-BOX OFFICE	7/25/01		1,005							1,005	1,005	S/L		2	0
3 SOFTWARE-BOX OFFICE	10/23/7		3,126							3,126	3,126			5	0
4 IMAC COMPUTER	4/30/02		009							009	009			r.	0
6 SOUND SYSTEM	8/30/05		2,714							2,714	2,624			2	6
7 LIGHTING	4/04/07		2,190							2,190	78			7	313
8 COMPUTER	10/03/06		1,675							1,675	251			ۍ	335
10 SOUND EQUIPMENT	9/14/06		979							646	77			7	35
11 SOUND EQUIPMENT	1/10/07		2/9							672	48			7	96
12 SOUND EQUIPMENT	5/22/07		1,838							1,838	22			7	263
13 LIGHTING	6/30/07		2,190							2,190		S/L		7	313
15 COMPUTER SERVER	8/17/07		5,434							5,434		S/L		5	906
16 HVAC	5/01/08		39,427							39,427		/S	S/L	7	939

80/08/9	20)07 F	2007 FEDERA	AL B	00 K	(DEP	REC1/	TION	SCH	AL BOOK DEPRECIATION SCHEDULE				PAGE 2
CLIENT 8094				SANL	UIS O	BISPO L	SAN LUIS OBISPO LITTLE THEATRE	HEATR	1,1					95-2556678
11/03/08 NO. DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS	CUR 179 BONUS	SPECIAL DEPR ALLOW	PRIOR 179/ BONUS/ SP. DEPR	PRIOR DEC BAL DEPR	SALVAG /BASIS REDUCT	DEPR BASIS	PRIOR DEPR	METHOD_ LIFE_RATE	LIEE RATE	10 32AM CURRENT DEPR.
17 BLINDS 18 LIGHTING	2/07/08 5/27/08		1,280							1,280		3/r 8/r	7	76
TOTAL MACHINERY AND EQUIPME		1	129,562	ı	0	0		0	0 0	129,562	7,831			3,518
TOTAL DEPRECIATION		. "	144,382	ı U				0	0 0	144,382	12,584			3,967
GRAND TOTAL DEPRECIATION		u	144,382	II		0		0	0	144,382	12,584			3,967