990

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2022

Do not enter social security numbers on this form as it may be made public. Department of the Treasury Open to Public Go to www.irs.gov/Form990 for instructions and the latest information. Inspection For the 2022 calendar year, or tax year beginning 09/01/22 , and ending 08/31/23 Check if applicable: C Name of organization D Employer identification number Address change Park City Performances Doing business as Egyptian Theatre Company Name change 94-2773017 Number and street (or P.O. box il is not delivered to street address) Initial return PO Box 3119 435-649-9371 Final return/ City or town, state or province, country, and ZIP or foreign postal code terminated Park City UT 84060-3119 Amended return G Gross receipts\$ 4,908,335 Name and address of principal officer Application pending H(a) Is this a group return for subordinates Randy Barton Yes X No PO Box 3119 H(b) Are all subordinates included? Park City 84060 If "No," attach a list. See instruction X 501(c)(3) 501(c) (Tax-exempt status) (insert no.) Website: www.parkcityshows.com H(c) Group exemption number Form of organization: X Corporation Trust Association Year of formation: 1981 M State of legal domicile: Part I 1 Briefly describe the organization's mission or most significant activities: The Egyptian Theatre is a community asset dedicated to enriching lives Governance through the performing arts. 2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 8 4 Number of independent voting members of the governing body (Part VI, line 1b) 8 4 5 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 71 5 6 Total number of volunteers (estimate if necessary) 6 7a Total unrelated business revenue from Part VIII, column (C), line 12 0 7a b Net unrelated business taxable income from Form 990-T, Part I, line 11 7b 0 Prior Year Current Year 8 Contributions and grants (Part VIII, line 1h) 2,377,217 1,475,593 9 Program service revenue (Part VIII, line 2g) 2,280,171 3,156,145 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 12,204 46,809 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 327,180 229,788 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 4,996,772 4,908,335 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1,361,113 1,854,761 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 3,123,442 4,484,555 3,058,257 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 4,913,018 19 Revenue less expenses. Subtract line 18 from line 12 512,217 -4,683Beginning of Current Year End of Year 20 Total assets (Part X, line 16) 3,694,107 3,939,055 21 Total liabilities (Part X, line 26) 462,411 1,640,030 22 Net assets or fund balances. Subtract line 21 from line 20 231,696 2,299,025 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Sign Here Kathy Stepp President Type or print name and title Print/Type preparer's name Date Check Paid 7/15/2024 Garrit G. Dahl P01381099 Preparer Niederhauser Firm's name 8 Davis LLC 87-0624335 Use Only PO Box 680460 Park City, UT 84068-0460 Phone no. 435-655-3300 May the IRS discuss this return with the preparer shown above? See instructions Yes No For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2022)

Yes describe these new services on Schedule O. Yes	Form 990 (2022) Park City Pe		94-2773017	Page :
1 Breigh describe the organization's mission: The Egyptian Theatre is a community asset dedicated to enriching lives through the performing arts. 2 Dot the organization undertake any significant program services during the year which were not fasted on the prior from 1800 or 900 EZ? 1 "Yes," describe these new services on Schedule O. 3 Dot the organization receive conducting, or make significant charges in how it conducts, any program services as measured by experience. Section 501(c)(3) organizations are required to report the amount of grants and allocations to others, the total expenses. Section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses. Section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses. Section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses. Section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses. Section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses of the section of the program services. Section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses of the section of the section of the section of grants of s				ابا
The Egyptian Theatre is a community asset dedicated to enriching lives through the performing arts. 2 Did the organization undertake any significant program services during the year which were not fisted on the prior Form 1900 or 990 E27 1º Yes, "describe these rew services on Schedule O. 3 Did the organization cases concucting, or make significant charges in how it conducts, any program services as measured by services. Privas, "describe these rews are secured to report the amount of grants and efficients to others, the total expenses. Section 5010(5) and 501(6)(4) organizators are required to report the amount of grants and efficients to others, the total expenses, and revenue, if my, for each organizations reported. 4a (Code:) (Expenses S 3,714,264 Including grants of S) (Revenue S 2,481,5 Serverd, the community by providing a higher level of quality shows in a areas; hall of fame music artists, live theater, dance and comedy performances. 4b (Code:) (Expenses S 657,320 Including grants of S) (Revenue S 674,2 Provided educational programs and performances through our tuition fre youth theatre funded by patrons to offset tuition. 4c (Code:) (Expenses S including grants of S) (Revenue S N/A) (Revenue S N/A) (Expenses S including grants of S) (Revenue S N/A) (Revenue S N/A) (Expenses S) (Revenu	f Briefly describe the organization's m	contains a response or note	to any line in this Part III	
2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 900 of 900 EZ? "Yes, "scrible three new services on Scriedule O. 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services." Yes	The Egyptian Theatr	e is a community a	· · · · · · · · · · · · · · · · · · ·	ing lives
print Form 1990 or 1990 CEZ? Yes	The same of the sa	±1193# 09	and the second of the second o	
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Services? If "Yes" describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Socion 501c(i)3 and 501c(i)4 organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program services are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service are required to report the amount of grants and allocations to others, the total expenses and revenue, if any, for each program services are measured by expenses and service are required to report the amount of grants and allocations to others, the total expenses of the community of grants of serviced the community by providing a higher level of quality shows in a areas: hall of fame music artists, live theater, dance and comedy performances. 4b (Code:) (Expenses \$ 657,320 including grants of \$) (Revenue \$ 674,7) and the performances of the performances of the performance of t	If "Yes," describe these new services	s on Schedule O.		Yes X No
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Form 990 (2022) Park City Performances Part IV Checklist of Required Schedules

	The state of the gamest conjectures	· ·	Yes	N
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	X	
2	is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3.	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		x
4	**************************************	4		X
5	is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues.			
6	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III. Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	5	-	X
·	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If Yes, complete Schedule D, Part I			x
7	Did the organization receive or hold a conservation easement; including easements to preserve open space.	6		^
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D. Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
-	complete Schedule D, Part III	8		Х
A	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	_10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D. Parts VI, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
-	complete Schedule D; Part VI		x	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more	11a	^	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	x	
Ċ	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more	7,15	43	
ч	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
u	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11đ		x
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	1		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes;" complete Schedule D. Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	x	
b.	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
a'A	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
Q	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate			
	familia (mantisate antisate) 6400 con	أمما	Ī	v
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	14b		X
	for any foreign propriestion? If "Voc." complete Salicefula C. Basti II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	'		
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	ŀ	х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
18	Part IX. column (A), lines 6 and 11e? If "Yes," complète Schedule G, Part I. See instructions Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17		X
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	bid the organization report more than \$15,000 or gross income from gaming activities on Part VIII, line 9a?		1	
.one	If "Yes," complete Schedule G, Part III	19		X
zva h	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		X
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	20b	_	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II	21		X
DAA			990	_

	m 990 (2022) Park City Performances 94-2773017 art IV Checklist of Required Schedules (continued)	<u></u>	<u></u> [Page. 4
	The state of the s		Vác	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	_	res	NO.
•	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	*	- 12		
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	ermlovees? If "Ves." complete Schedule 1	ا	٦,	
24=	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	23	_X	ļ <u> </u>
-,0	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schoolule W. If "Nie " on to Kee 25a			
h	unage 200 an Complete Streeting N. Ir. 100, go to line 200	24a		X
	Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception?	24b	—	 .
L	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	to defease any lax-exempt bonds?	24c		<u> </u>
250	Did the organization act as an "on behalf of issuer for bonds outstanding at any time during the year?		<del> </del>	<del> </del>
45a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes;" complete Schedule L, Part I	25a	ļ	X
В	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	.		
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	•		1
	controlled entity or family member of any of these persons? If "Yes;" complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these	i		•
	persons? If "Yes," complete Schedule L, Part III	27		x
28	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		2007/00	
	Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			1.
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	200		<b></b>
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L. Part IV	28a 28b	<del> </del>	X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	70D		
•	"Van" complete Catindule I. Died III	-	İ	107
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c 29	$\vdash$	<u>x</u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29		
***	conservation contributions? If "Yes," complete Schedule M			1.7
31		30		<u>X</u>
32	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I  Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	.31	ļ	X
32				
	complete Schedule N, Part II	32		<u>X</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	$oxed{oxed}$	_X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
2.00	or IV, and Part V, line 1	.34		X
35a	or IV, and Part V, line 1  Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	ii fes to line soa, did the organization receive any payment from or engage in any transaction with a	l i		
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization.			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 14b and			
	19? Note: All Form 990 filers are required to complete Schedule O:	38	X.	
Pa	ort V Statements Regarding Other IRS Fillings and Tax Compliance	30	43.	
• •	Check if Schedule O contains a response or note to any line in this Part V			
		<del> </del>		<u> </u>
	Enter the number reported in box 3 of Form 1096, Enter -0- if not applicable.		Yes	NO
10				
1a	Enter the number reported in box 3 of Form 1096, Enter -0- if not applicable.  11 13	4 /		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable  Did the organization comply with backup withholding rules for reportable payments to vendors and		}::::::::::::::::::::::::::::::::::::	: '

	Form	n 990 (2022) Park City Performances 94-2773017		F	Page 5
		art V Statements Regarding Other IRS Filings and Tax Compliance (continued)			No.
	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1300		1000
		Statements, filed for the calendar year ending with or within the year covered by this return 2a 71	100		
	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	x	1
		Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	<del> </del> -	X
		[f-"Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	<del> </del>	<del> </del>
	4a.	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,	30	<del> </del>	<del> </del>
	144	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	١		٦,
	'n	If "Yes," enter the name of the foreign country	4a	N	X
		See instructions for filling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			Ι΄
	C-a	Man the appointment a market to a morbibilitied from the Manufacture of the control of the contr			7.0.200
		Was the organization a party to a prohibited tax shelfer transaction at any time during the tax year?	5a		X
	Þ	Old any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	<b>├</b>	X
\$56,000 to 200,000 to	C Signal	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?  Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	5c	ļ	
	ба			ĺ	l
		organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
	D.	If "Yes;" did the organization include with every solicitation an express statement that such contributions or			
		gifts were not tax deductible?	6b		
	7	Organizations that may receive deductible contributions under section 170(c).			N "
	а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		700 L	
		and services provided to the payor?	7a	X	
	b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
		Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			$\Box$
		required to file Form 8282?	7c		x
	d	If "Yes," indicate the number of Forms 8282 filed during the year.			·
		Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		x
		Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
	ġ	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<del></del> -
	h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		<del></del>
	8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		27/21/2	
	-	sponsoring organization have excess business holdings at any time during the year?	8		
	9	Sponsoring organizations maintaining donor advised funds.	14.71	- 7,7	ļ
		Did the sponsoring organization make any taxable distributions under section 4966?	1 '		1
		Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9a 9b		
,		Section 501(c)(7) organizations. Enter:	90		_
		initiation fees and capital contributions included on Part VIII; line 12 10a			
		Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	18 Te		
	11	Section 501(c)(12) organizations, Enter.			i .
'					11 11 11
		Gross income from other sources. (Do not net amounts due or paid to other sources			
٠,	10-	against amounts due or received from them.)  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041?		No.	12.00 m
1			12a		
		If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			1.5
1	3	Section 501(c)(29) qualified nonprofit health insurance Issuers.			274,
	а	Is the organization licensed to issue qualified health plans in more than one state?	13a		<u> </u>
		Note: See the instructions for additional information the organization must report on Schedule O.		res	
	b	Enter the amount of reserves the organization is required to maintain by the states in which			
		the organization is licensed to issue qualified health plans			1
	C	Enter the amount of reserves on hand			
1	4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	b	If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation on Schedule O	14b		
1	5	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
		excess parachute payment(s) during the year?	15	_	X
		If "Yes," see instructions and file Form 4720, Schedule N.		13/17	
1	6	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
		If "Yes," complete Form 4720, Schedule O.	1100	12.7	
1	7	Section 501(c)(21) organizations. Did the trust, any disqualified or other person engage in any activities			
		that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
		If "Yes," complete Form 6069.		V. 1.	
-					

-	n 990 (2022) Park City Performances art VI Governance, Management, and Disclosure For each "Ye	94-2773017	rough	7h holour	ned f	
: \$ · \$	response to line 8a, 8b, or 10b below, describe the circumstant					
	Check if Schedule O contains a response or note to any line in		jos ur	ocnepue	U; 36	sei v
Sec	ction A. Governing Body and Management	una Fait VI	· · · · · · ·		<u> </u>	
	and the state of t					Y
1a	Enter the number of voting members of the governing body at the end of the tax year	ar	1a	8	1.	Ė
	If there are material differences in voting rights among members of the governing by				┪	4
	if the governing body delegated broad authority to an executive committee or similar	• -				Ι.
	committee, explain on Schedule O.					
h	Enter the number of voting members included on line 1a, above, who are independent	ent	.ib	8	1000000	
2	Did any officer, director, trustee, or key employee have a family relationship or a bu		.10			
_	any other officer, director, trustee, or key employee?	ionicos relationarilo with			2	ľ
3	Did the organization delegate control over management duties customarily performe	d by as under the direct	· · · · ·		-	
	supervision of officers, directors, trustees, or key employees to a management com			TANK TANK TANK TANK TANK	3	
4	Did the organization make any significant changes to its governing documents since				4	-
5	Did the organization become aware during the year of a significant diversion of the		<del>2</del> α β		_	┝
6	Did the organization have members or stockholders?	organization's assets?			5	⊦
	The state of the s				6	H
/a	Did the organization have members, stockholders, or other persons who had the po				l_	ľ
'n.	one or more members of the governing body?	. ; ; - , ; , ; - ; - , - , -			7a	$\vdash$
þ	Are any governance decisions of the organization reserved to (or subject to approve					
	stockholders, or persons other than the governing body?		200	eri yang meren	7b	-
8	Did the organization contemporaneously document the meetings held or written acti	ons undertaken during the y	ear by	the following	1	
a	The governing body?				8a	L
þ					8b	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A. w					l
	the organization's mailing address? If "Yes," provide the names and addresses on	Schedule O		<u> </u>	9	Ļ
Sec	tion B. Policies (This Section B requests information about policie	s not required by the	Intern	al Revenu	<u>е Со</u>	т.
						Ľ
	Did the organization have local chapters, branches, or affiliates?	ولارتوا والمراجع والمتار والمتار والمتار والمتار والمتار والمار والمتار والمتا			10a	L
b	If "Yes," did the organization have written policies and procedures governing the ac-		•			
	affiliates, and branches to ensure their operations are consistent with the organization				10b	L
	Has the organization provided a complete copy of this Form 990 to all members of i		ng the	form?	11a	
	Describe on Schedule O the process, if any, used by the organization to review this					
	Did the organization have a written conflict of interest policy? If "No," go to line 13.				12a	L
þ	Were officers, directors, or trustees, and key employees required to disclose annua	lly interests that could give	rise ta	conflicts?	12b	
Ç	Did the organization regularly and consistently monitor and enforce compliance with	the policy? If "Yes,"				Г
	describe on Schedule O how this was done				12c	
13	Did the organization have a written whistleblower policy?				13	Γ
14	Did the organization have a written document retention and destruction policy?				14	
15	Did the process for determining compensation of the following persons include a rev	riew and approval by				Ē
	independent persons, comparability data, and contemporaneous substantiation of th	e deliberation and decision	2		.	ŀ
а	The organization's CEO, Executive Director, or top management official				15a	
b	Other officers as here manufactors of the constitution				15b	Г
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	· - · · · · · · · · · · · · · · · · · ·			1,335	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture of	r similar arrangement				
	with a trumplia antitis during the config	•			16a	
b	If "Yes," did the organization follow a written policy or procedure requiring the organization	zation to evaluate its	/	**********		
-	participation in joint venture arrangements under applicable federal tax law, and take					
	organization's exempt status with respect to such arrangements?				16b	
Sec	tion C. Disclosure	<u>entra menggan kenter bekara saka ana</u>		*********	1 100	
17	List the states with which a copy of this Form 990 is required to be filed None					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if a	applicable), DDO and DOS T	i Inactic			٠
10			(section	isonit(c)		
	(3)s only) available for public inspection. Indicate how you made these available: Ch					
	X Own website Another's website X Upon request Other (explain					
ıâ	Describe on Schedule O whether (and if so, how) the organization made its governi	ing accuments, conflict of in	terest p	iolicy _i .		
20	and financial statements available to the public during the tax year.					
	State the name, address, and telephone number of the person who possesses the	organization's books and rec	pords			
	andy Barton PO Box 3119					_
22	ark City	UT 8406	0	435	-649	9

Form 990 (2)	22) Park City Performances	94-2773017	Page
Part VII	Compensation of Officers, Directors,	Trustees, Key Employees, Highest Compensated	Employees, and
	Independent Contractors	•	
	Check if Schedule O contains a respons	se or note to any line in this Part VII	
	Officers, Directors, Trustees, Key Employees,		

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee)
   who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- . List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

  Check this box if neither the organization pay any related organization compensated any current officer, director, or fairline.

Check this box if neither the or	ganization nor a	пу ге	elated	d org	ganiz	ation	COL	ripensated any current off	icer, director, or trustee.	
(A) Name and tite	(B) Average hours per-week (list any hours for related organizations below dotted line)	500	x, unfe icer a	Pos check ss pe	erson l directe	Highest compensated	ian iee)	(D) Reportable compensation from the organization (W-2/ 1099-MSC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1089-MISC/ 1089-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Randy Barton Theatre Director	40.00 0.00				x			146,604	.0	4,800
(2) Michel Burns Board Member	0.00	х						Ó	0	0
(3) Lynn Fey Board Member	0.00	x						Ó	Ö	0
(4) Ellen Hendricks Board Member	on 0.00 0.00	x						0	0	Ó
(5) Kaylene Kotter Vice Pres/Treasurer	0.00	x		X				Ö	0	0
(6) Gretchen Rubell Secretary	0.00	x		х				0	0	0
(7) Randy Sikora Board Member	0.00	х					·	0	0	0
(8) Kathy Stepp President	1.00	x		x				0	Ö	Ö
(9) Peter Zaccagnin	0.00	x		••		:		0	0	0
(10)	74. A	**								
(11)	·									·

Form 990 (2022) Park City Performances 94-2773017 Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) Part VII (C) Position (A) (B)  $[\dot{\mathbb{D}}]$ (E) (do not check more than one (F) Name and tide Reportable compensation Reportable Estimated amount of other Average box, unless person is both an hours officer and a director/frustee) compensation per week from the from related compensation Officer Institutional organization (W-2/ (fist any organizations (W-2/: from the 1099-MISC/ 1099-MISC/ hours for organization and employee related related organizations 1099-NEC) 1099-NEC) - DOMINGE organizations below trustee dotted line) 146,604 1b Subtotal Adjustining and American 4,800 c Total from continuation sheets to Part VII, Section A 146,604 4,800 Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 1 Yes No Did the organization list any former officer, director, trustee, key employee, or highest compensated 3 employee on line 1a? If "Yes," complete Schedule J for such individual Х For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such 4 individual

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) Name and business address: (C) Compensation

Ö

Form 990 (2022)

Total number of independent contractors (including but not limited to those listed above) who

received more than \$100,000 of compensation from the organization

Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) Related or exempt function revenue (C) Unrelated business reyenue (D) Revenue excluded from tax under sections 512-514 (A) Total révenue 1a Federated campaigns 1a. b Membership dues 1b c Fundraising events 10 d Related organizations ার .e Government grants (contributions) 1e 235,000 f All other contributions, gifts, grants, 1,240,593 and similar amounts not included above 1f g Noncash contributions included in lines 1a-11 h Total. Add lines 1a-1f 1,475,593 Business Code 2,481,821 Service nue 2,481,821 2a Production Revenue Education Programs/Youtheatre 674,324 674,324 f Alt other program service revenue ..... g Total. Add lines 2a-2f 3,156,145 3 Investment income (including dividends, interest, and 46,809 other similar amounts) 46,809 4 Income from investment of tax-exempt bond proceeds 5 Royalties ..... (ii) Personal (i) Real 229,788 6a Gross rents 6a b Less: rental expenses 6b 229,788 C Rental Inc. or (loss) 6c d Net rental income or (loss) 229,788 229,788 7a Gross amount from (I) Securities. (ii) Other sales of assets other than inventory Revenue b Less, cost or other basis and sales exps. c Gain or (loss) 7c Other d Net gain or (loss) ...... 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net Income or (loss) from fundraising events 9a Gross income from gaming activities. See Part IV, line 19 b Less; direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, lessreturns and allowances 10a b Less; cost of goods sold c Net income or (loss) from sales of inventory Business Code d All other revenue e Total. Add lines 11a-11d Total revenue. See instructions 4,908,335 3,202,954 0 229,788 8,

	ot include amounts reported on lines 6b, 7. b, and 10b of Part VIII.	(A) Total exponses	(B) Program; service expenses	(C) Management and general expenses	(D) Fundratsing expenses
	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3.	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16				
	Benefits paid to or for members				
5	Compensation of current officers, directors,		1	X	**************************************
	trustees, and key employees	149,000	54,035	41,819	53,14
6	Compensation not included above to disqualified			·	
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
	Other salaries and wages	1,499,764	1,308,126	111,503	80,13
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)			······································	
	Other employee benefits	205,997	187,332	11,452	7,21
10	Payroll taxes				
	Fees for services (nonemployees):				i
a	Management	<del></del>			
b	Legal				
C.	Accounting				
d	Lobbying				
G	Professional fundraising services. See Part IV, line 13	•		<u> Parakija koja and</u>	·····
	Investment management fees				
·g	Other, (If line 11g amount exceeds 10% of line 25, column	·005:406	101 000	56 047	
	(A) amount, list line 11g expenses on Schedule O.)	237,486	181,239	56,247	1 00
12	Advertising and promotion	66,320		455	1,90
13	Office expenses	11,616		11,616	
14	Information technology	<del> </del>			
15	Royalties	F1 200	46 740	. 0.057	1: 70
1.6	Occupancy	51,398	46,742	2,857	1,79
17	Travel				
18	Payments of travel or entertainment expenses				
4.0	for any federal, state, or local public officials				
	Conferences, conventions, and meetings		<u> </u>		
	Interest  Reymonts to officiates				
21	Payments to affiliates	302,486	302,486	<del> </del>	
	Depreciation, depletion, and amortization insurance	302,486	302,486		
	Other expenses Itemize expenses not covered		30,017		498 mar (2015) (1815 mar (2015) mar (2015)
24	*				
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
_	(A) amount, list line 24e expenses on Schedule O.)	1,392,123	1,392,123		** 1
a	Artist Fees Hospitality	369,282		2,742	17
0		123,766	366,368 123,766	4,142	1.73
C J	Fee Expense		123,100		100 26
,d	Fundraiser Expense	120,364	21/ 52/	25 402	120,364
	All other expenses	352,539	314,534	35,403	2,602
	Total functional expenses, Add lines 1 through 24e  Joint costs. Complete this line only if the	4,913,018	4,371,584	274,094	267,340
20	organization, reported in column (B) joint costs- from a combined educational campaign and fundraising solicitation. Check here				

ja 1940a tilberg avantarion

art	X Balance Sheet			rage II
	Check if Schedule O contains a response or note to any line in this Part X	<del></del>	., <u>.</u>	
		(A) Beginning of year		(B) End of year
1	Cashnon-interest-bearing	1,744,516	1	688,606
	Cash—non-interest-bearing Savings and temporary cash investments	1,,41,310	2	000,000
3			3	
4	A . A . P. A. B. A.	108,406	4	87,692
	Loans and other receivables from any current or former officer, director,	200,400	- <b>4</b>	20101027 101027 2010
"	trustee, key employee; creator or founder, substantial contributor, or 35%			
	and a final field of the same of the contract of the same of the s	Probability of the day property as a section of the Control	5	egistelija (m. 1901.) eta 1911. Mis ir gist de engan Aldrika ira 1914. gist mis ira e
غ أ	controlled entity or family member of any of these persons  Loans and other receivables from other disqualified persons (as defined		<del></del>	and the confidence of the control of
	under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
7	Alaba and Lana and Lana		7	ondoniai si ohaanii oradiidada oradii aa in Afrikaa aa dhaada
l á	Additional Facilities and a committee of the committee of		8	<u> </u>
	Prepaid expenses and deferred charges	123,927	9	254,863
10:	Eand, buildings, and equipment: cost or other			
]	basis. Complete Part VI of Schedule D 10a 2,229,093			
l h	basis. Complete Part VI of Schedule D 10a 2,229,093 Less) accumulated depreciation 10b 1,208,406	1,042,174	10c	1,020,687
111	tarrandan artik artikilah dan dan dan manar ditan	2,012,211	11	2,020,001
	North Administration of the Control	675,084	12	1,887,207
	Investments—program-related. See Part IV, line 11	0757054	13	1,001,201
	1.40 10.90		14	
146	Other assets. See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 33)	3,694,107	16	3,939,055
17	Accounts payable and accrued expenses	136,661	17	119,669
18	Grante novable:		18	119,009
10	Grants payable	1,325,750	19	1,347,048
90	Deferred revenue	1,323,730	20	1,547,040
21	Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	Loans and other payables to any current or former officer, director,	2005/0000000000000000000000000000000000	3200	
-	trustee, key employee, creator or founder, substantial contributor, or 35%			
1	controlled entity or family member of any of these persons		22	g begag eget ji te ke maka atka a pana a taka ji ke ili. Ta
23	Secured mortgages and notes payable to unrelated third parties	1	23	<del></del>
24	I had not passed in the same and the form of the same and the same and the same in the same in the same and the same in the sa		24	
1 '	Other liabilities (including federal income tax, payables to related third			
1~~	parties, and other liabilities not included on lines 17-24). Complete: Part X			
1			25	173,313
26	Total liabilities. Add lines 17 through 25	1,462,411	26	1,640,030
120	Organizations that follow FASB ASC 958, check here X	1,302,344	20	1,040,030
	and complete lines 27, 28, 32, and 33.			
27	The state of the s	2,231,696	27	2,299,025
	" " " " " " " " " " " " " " " " " " "	2,231,030	28	5,500,000
-0	Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here			
	and complete lines 29 through 33.			
29	Constitution of the Angles of the constitution		20	nese ta mengaway (m.). T
30	Pald-in or capital surplus, or land, building, or equipment fund		29 ⁻ 30	
31	Retained earnings, endowment, accumulated income, or other funds		31	······································
31	Total net assets or fund balances	2,231,696	32:	2,299,025
32	lotal net assets or fund balances			

Form 990 (2022)

Form 990 (2022) Park City Performances 94-2773017			Page 12
Part XI Reconciliation of Net Assets	-		<u></u>
Check if Schedule O contains a response or note to any line in this Part XI		<u></u>	
1 Total revenue (must equal Part VIII, column (A), line 12)	1		8,335
2 Total expenses (must equal Part IX, column (A), line 25)	.2	4,91	3,018
3 Revenue less expenses. Subtract line 2 from line 1	3		-4,683
4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		1,696
5 Net unrealized gains (losses) on investments	5	7	2,012
6 Donated services and use of facilities	6		
7 Investment expenses	7		
8. Prior period adjustments	8		
8. Prior period adjustments 9. Other changes in net assets or fund balances (explain on Schedule O)	9		
10. Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
32, column (B))	10	2,29	9,025
Part XII Financial Statements and Reporting	200	DOZANI SANDA SANDA	
Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>		<u></u>
			Yes No
1 Accounting method used to prepare the Form 990; 🔲 Cash 💢 Accrual 🔲 Other			
If the organization changed its method of accounting from a prior year or checked "Other," explain on		19.479	
Schedule O.			
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or			
reviewed on a separate basis, consolidated basis, or both:			
Separate basis. Consolidated basis Both consolidated and separate basis			·
b Were the organization's financial statements audited by an independent accountant?		2b	Х
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a			
separate basis, consolidated basis, or both:			
X Separate basis Consolidated basis Both consolidated and separate basis		37.4.	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
the auditi review, or compilation of its financial statements and selection of an independent accountant?		2c	Х
If the organization changed either its oversight process or selection process during the tax year, explain on	<b>!</b>	114/04	
Schedule O,			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th	ne .		
Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a	$\mathbf{x}$
Official Galdange, 2 Oscille Fall 200, Gabpate F			
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	V C		

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## SCHEDULE A

(Form 990)

Public Charity Status and Public Support

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

		of the Treasury		Attach to Form 9	90 or For	m 990-EZ	-1		Open to Public
ntem	si Ke	renue Service	Go to	www.irs.gov/Form990 for in	structions	and the	latest informati	on.	Inspection
Varne	of th	io organization	Park City E	erformances				Employer Identi	fication number
P	art	Reas		y Status. (All organization	ons mus	t compl	ete this part.)		
The	orga			use it is: (For lines 1 through 1					··
1	$\Box$			ssociation of churches describe					
2	М			1)(A)(II). (Attach Schedule E (F			-11.475-354-		
3				vice organization described in			arim		
4	H			ed in conjunction with a hospital				(iiii) Enter the	hoanitalla nome
•		city, and sta		co in conjunction with a nestitu	ar acacine	C III SECL	iori zindroltistwi	(iii). Einer me	Hospitals Hattle,
5				of a college or university owner	d or open	ted by a	governmental un	t described in	ران در المنظور و الموسوع و مورد أو المرافق المنظوم المنظوم المنظوم المنظوم المنظوم المنظوم المنظوم المنظوم الم المنظوم المنظوم المنظوم و المنظوم المنظ
			D(b)(1)(A)(iv). (Complete Pa				<b>U</b> , - · · · · · · · · · · · · · · · · · ·		
6				governmental unit described in	section	170(b)(1)	(A)(v).		
7	X		ion that normally receives a section 170(b)(1)(A)(vi).	a substantial part of its support	from a go	vernmenta	al unit or from the	general publi	Ċ
8	П			n 170(b)(1)(A)(vi), (Complete F	Part II.)				
9	Н			escribed in section 170(b)(1)(		ated in co	niunction with a	land-orant coll	eae
	Щ.			of agriculture (see instructions					
10	$\Box$		ion thát normallu rácaluar i	(1) more than 33 1/3% of its st	connect from	o sontribu	tions month or bl	n food and a	er sjon og etter en en en etter en er er
10	ш	receipts from	activities related to its exe	empt functions, subject to certain	apport iron	ne: and ()	ouns, membershi N no more than	piees, and gr 331/3% of its	OSS
		support from	gross investment income	and unrelated business taxable	income (	ess section	on 511 tax) from	businesses	
		acquired by	the organization after June	30, 1975. See section 509(a)	(2). (Comp	lete Part	III.)	21011100000	
11				exclusively to test for public s					
12	П	An organizati	ion organized and operated	exclusively for the benefit of, t	o perform	the function	ons of, or to cam	vout the purp	oses of
	_	one or more	publicly supported organization	ations described in section 50	9(a)(1) or s	section 5	09(a)(2). See se	ction 509(a)(3	). Check
		the box on li	nes 12a through 12d that d	lescribes the type of supporting	organizati	on and co	implete lines 12e	, 12f, and 12g	
	а			perated, supervised, or control					ing
				ower to regularly appoint or ele		ty of the	directors or truste	es of the	
	L			complete Part IV, Sections A		L 1/2			
	þ			supervised or controlled in controlled in controlled in the ortion vested in the					
				te Part IV, Sections A and C.	e same he	isons ma	Continui oi mana	ge me suppor	tea.
	Ċ	Type III	functionally integrated. A	supporting organization opera	ted in con	nection wi	th, and functiona	lly integrated v	with,
	d		er and the second of the secon	ed. A supporting organization of				ded organizat	ion(e)
	<b>u</b>			he organization generally must					
				must complete Part IV, Sect					
	e	Check the	is box if the organization re lly integrated, or Type III o	ceived a written determination non-functionally integrated supp	from the IF	RS that it i	is a Type I, Type	II, Type III	
	f		mber of supported organiza						<u> </u>
	g	Provide the f	following information about	the supported organization(s).	*!*****			** *** ***	
(1)	Nam	e of supported	(ii) EiN	(III) Type of organization		organization	(v) Amount of	monetary	(v)) Amount of
	org	anization		(described on lines 1-10		ur gaverning	support (		other support (see
				above (see instructions))		ment?	Instruction	ns)	instructions)
/43					Yes	No		+	
(A)									
(B)									·
(Ċ)					-				
					ļ				
(D)									
(E)									
			la contra de la contra de la contraction de la companya de la	t leksen his och sterret var etter etterretare i s	- Character 7	<del> </del>			

Page 2

Park City Performances 94-2773017 Page Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Schedule A (Form 990) 2022 Part II

:5	Part III. If the organizati ection A. Public Support	on fails to qualify	under the te	sts listed belov	v, please comp	olete Part III.)	
·		/-\ 004B	(I) 5046 T	43,0000	1)) 0004 1		
	alendar year (or fiscal year beginning in)  Gifts, grants, contributions, and	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	membership fees received (Do not include any "unusual grants.")	1,638,997	1,736,236	2,229,449	2,377,217	1,475,593	9,657,492
3	<ol> <li>Tax revenues levied for the organization's benefit and either paid to or expended on its behalf</li> </ol>						<del></del>
STANDARD CONTRACTOR CO	The value of services or facilities furnished by a governmental unit to the organization without charge		**************************************		A AND THE STATE OF	<b>3000000000000000000000000000000000000</b>	TO THE PROPERTY OF THE PROPERT
4		1,838,997	1,736,236	2,229,449	2,377,217	1,475,593	9,657,492
ŧ							419,093
6	Public support, Subtract line 5 from line 4		2 22 23				9,238,399
_	ection B. Total Support	1.11	<del></del>		<u> </u>		5,255,7255
	lendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	1,838,997	1,736,236	2,229,449	2,377,217	1,475,593	9,657,492
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	69,771	67,815	15,018	107,792	229,788	490,184
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
ic	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11							10,147,676
.12	Gross receipts from related activities, et	c. (see instructions)				12	9,205,027
13 <u>S</u>	First 5 years. If the Form 990 is for the organization, check this box and stop hection C. Computation of Public	ere	<u> </u>	th, or fifth tax year	as a section 501	(c)(3)	
14				nri (fl)		14	91.04%
15							93.69%
16	Public support percentage from 2021 Sc a 33 1/3% support test—2022. If the org	anization did not che	ck the box on line	13, and line 14 is	33 1/3% or more.	check this	
	box and stop here. The organization qu	alifies as a publicly s	upported organiza	ation			X
	b 33 1/3% support test-2021. If the org	anization did not che	ck a box on line 1	3 or 16a, and line	15 is 33 1/3% or r	more, check	
	this box and stop here. The organization	n qualifies as a public	cly supported orga	anization		receptant a agreement	🗍
17	a 10%-facts-and-circumstances test-2	2022. If the organizati	on did not check	a box on line 13, 1	6a, or 16b, and lin	ie 14 is	
	10% or more, and if the organization me Part VI how the organization meets the organization	facts-and-circumstand	ces test. The orga	anization qualifies	as a publicly supp	orted	
	b 10%-facts-and-cfrcumstances test—15 is 10% or more, and if the organization for the fact 1/4 how the organization most the	2021. If the organization meets the facts-a	on did not check and-circumstances	a box on line 13, 1 test, check this bo	6a. 16b, or 17a, a ox and stop here.	ind line Explain	
18	in Part VI how the organization meets the organization Private foundation. If the organization of the org			-			
	instructions						

Schedule A (Form 990) 2022

%

%

17

18

20

18 Investment income percentage from 2021 Schedule A. Part III, line 17

19a 33 1/3% support tests—2022. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests—2021. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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Schedule A (Form 990) 2022 Park
Part IV Supporting Organizations

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

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing	334A	\$20 A. O.	
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			i.
	class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2).	2	MA LET	
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer	.40000	garagga.	83,500.5
THE STATE OF	lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and		10866	(2000) A.
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the		S. A. A. A.	<i></i>
	organization made the determination.	3b	\$44° 2 54	
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)	0.75%	410401	12/12/20
	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c	September 1	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If	36		
	"Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	1 40		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign	4a		
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations.	1.3%	415,1141 A	41.5
С	Did the organization support any foreign supported organization that does not have an IRS determination	4b	.setviete	\$679.5°
٠	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used	10.000		
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
			ANY PARIS	· .
5a	purposes.  Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"	4c		
va				建 宝
	answer lines 5b and 5c below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action;	7.754 7.757		·
	(iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action			
	was accomplished (such as by amendment to the organizing document).	-	. '	
b	Type I or Type II only. Was any added or substituted supported organization part of a class already	5a		
	designated in the organization's organizing document?			
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5b		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to	5c	· 75 4556	day/ser
ų.		277 (c)		
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (iii) other supporting organizations that also support or			39. Juli
	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.		Againmenter	40
7		6		1000
,	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity			
8	with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
0	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line			
0.4	7? If "Yes," complete Part I of Schedule L (Form 990).	8	1. 3777	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more			
	disqualified persons, as defined in section 4946 (other than foundation managers and organizations	1 1		Market 1
í.	described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	<u>9a</u>		5 5.
þ	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which		DEPER	9099
_	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b	, <u>1715</u> - 175	
C	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit			it.
ın-	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		13
0a	Was the organization subject to the excess business holdings rules of section 4943 because of section	19089	94443.000	

4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated

b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to

supporting organizations)? If "Yes," answer line 10b below.

determine whether the organization had excess business holdings.)

10a

		dule A (Form 990) 2022 Park City Performances 94-277301	.7		Page 5
	Pa	art IV Supporting Organizations (continued)	<del></del>	<u></u>	· · ·
	11	Has the organization accepted a gift or contribution from any of the following persons?	1000	Yes	No :
	a				
	•	11c below, the governing body of a supported organization?	11a	**** * **	
	Ĭ,	A family member of a person described on line 11a above?	115		
		A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			7:
		provide detail in Part VI.	11c		<u> </u>
	Sec	tion B. Type I Supporting Organizations			F
	à	The the constant with the state of the state		Yes	No
	1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
		more supported organizations have the power to regularly appoint or elect at feast a majority of the organization's officers,	日安然情		
Purent and the second	WALLE TO A	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)  effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
		organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	1 🕩	Vita di	•
		supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1 1		
	2	Did the organization operate for the benefit of any supported organization other than the supported	Mark 19	1.586	<u> </u>
		organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
		VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
		supervised, or controlled the supporting organization.	2		
	Sec	tion C. Type II Supporting Organizations			
				Yes	No
	1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
		or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
		or management of the supporting organization was vested in the same persons that controlled or managed			
	Sec	the supported organization(s). tion D. All Type III Supporting Organizations	1_1_1_		
	000	don B. All Type in dupporting digunzations		Yes	No
	1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	Bet (4)	100	3
		organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
		year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			1 P
		organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
	2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	701577 (C)		
		organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
		the organization maintained a close and continuous working relationship with the supported organization(s),	2		
	3	By reason of the relationship described on line 2, above, did the organization's supported organizations have			
		a significant voice in the organization's investment policies and in directing the use of the organization's			
		income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's		\$50 m	
	Sac	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	3		
	1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct)	t1		· -,
	ı .a		ons).		
	b				
	'C		astruction	181.	
	2	Activities Test. Answer lines 2a and 2b below.		Yes	Νο
	·a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	2000		11.00 E
		the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
		those supported organizations and explain how these activities directly furthered their exempt purposes,			
		how the organization was responsive to those supported organizations, and how the organization determined			Market.
		that these activities constituted substantially all of its activities,	2a .		
	b	Did the activities described on line 2a, above, constitute activities that, but for the organization's			
		Involvement, one or more of the organization's supported organization(s) would have been engaged in? If		·	
		"Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would			
		have engaged in these activities but for the organization's involvement.	2b	<del></del>	
	3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
	·a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			64
		trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a	<del>773</del>	
	b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	15.833 35	#####	Park to the
		of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard:	3b	1	

	edule A (Form 990) 2022 Park City Performances  art V Type III Non-Functionally Integrated 509(a)(3) Supporting	a Organia	94-2773	017 Page 6
:	1 Check here if the organization satisfied the integral Part Test as a qualifying trust			· · · · · · · · · · · · · · · · · · ·
	instructions. All other Type III non-functionally integrated supporting organization			
.—		IS THUSE COR	piete Sections A through	(B) Current Year
_	action A – Adjusted Net Income		(À) Priör Year	(optional)
	1 Net short-term capital gain	1	**************************************	
_	2 Recoveries of prior-year distributions	2		
	3 Other gross income (see instructions)	3		
_	4 Add lines 1 through 3.	4		
	5 Depreciation and depletion	5		
	6 Portion of operating expenses paid or incurred for production or collection			
	of gross income or for management, conservation, or maintenance of			
	property held for production of Income (see instructions)	6		ļ
	7 Other expenses (see instructions)	7	OUTON_TOUTON_CONTACT.	TABLE TO AND AN AND AND AND AND AND AND AND AND
	8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Se	ection B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
	1 Aggregate fair market value of all non-exempt-use assets (see	\$77.53.53 44.53.53		
	instructions for short tax year or assets held for part of year):			
	a Average monthly value of securities	1a		
	b Average monthly cash balances	1b		<u></u>
	c Fair market value of other non-exempt-use assets	1c		
	d Total (add lines 1a, 1b, and 1c)	1d		
	e Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
	2 Acquisition indebtedness applicable to non-exempt-use assets	2		
	3 Subtract line 2 from line 1d.	3		
	4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,	·   · · · · ·		·
	see instructions).	4		
	5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
	Multiply line 5 by 0.035.	6		
	Recoveries of prior-year distributions	7		
	B Minimum Asset Amount (add line 7 to line 6)	8		-
Se	oction C – Distributable Amount	-		Current Year
	1 Adjusted net income for prior year (from Section A, line 8, column A)	1		<del>.</del>
	2 Enter 0.85 of line 1,	2	1911 - 1911 - 1911	
	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
	Enter greater of line 2 or line 3.	4		
	Income tax imposed in prior year	5		
	Distributable Amount Subtract line 5 from line 4, unless subject to			-
•	emergency temporary reduction (see Instructions).	_E		
	Check here if the current year is the organization's first as a non-functionally integ		A CONTRACTOR OF THE STATE OF TH	

Park City Performances 94-2773017 Schedule A (Form 990) 2022 Page 7 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions Current Year Amounts paid to supported organizations to accomplish exempt purposes 1 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required—provide details in Part VI) 5 Other distributions (describe in Part VI). See instructions. 6 Total annual distributions. Add lines 1 through 6. 7 Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions 9 Distributable amount for 2022 from Section C, line 6 Line 8 amount divided by line 9 amount 10 (i) (ii) (10) Section E - Distribution Allocations (see instructions) Excess Distributions **Underdistributions** Distributable Pre-2022 Amount for 2022 Distributable amount for 2022 from Section C, line 6 Underdistributions, if any, for years prior to 2022. (reasonable cause required-explain in Part VI). See Excess distributions carryover, if any, to 2022 a. From 2017. b From 2018 c From 2019 .... d From 2020 e From 2021 f Total of lines 3a through 3e g Applied to underdistributions of prior years h Applied to 2022 distributable amount I Carryover from 2017 not applied (see instructions) Remainder, Subtract lines 3g, 3h, and 3i from line 3f. 4 Distributions for 2022 from Section D. line 7: a Applied to underdistributions of prior years. b Applied to 2022 distributable amount c Remainder. Subtract lines 4a and 4b from line 4. 5 Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2023. Add lines 3j and 4c. Breakdown of line 7: a Excess from 2018 b Excess from 2019 c Excess from 2020 d Excess from 2021 e Excess from 2022

	Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b; 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
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JOHN HOUR CLEANED STREET	
	tion of the contraction of the c
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	Mark tindeplember on the contribution of the c
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	e test protestation of the protest and the surprise and the continuous sections as an about the continuous solds.
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#### Schedule B (Form 990)

#### Schedule of Contributors

OMB No. 1545-0047

2022

Department of the Treasury Internal Revenue Service

provide the provide the providence

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

Name of the organization	Employer identification number									
Park City Per	formances	94-2773017								
Organization type (check or										
Filers of:	Section:									
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization									
4947(a)(1) nonexempt charitable trust not treated as a private foundation										
	527 political organization									
Form 990-PF	501(c)(3) exempt private foundation									
	4947(a)(1) nonexempt charitable trust treated as a private foundation									
	501(c)(3) taxable private foundation									
	covered by the General Rule or a Special Rule. ), (8), or (10) organization can check boxes for both the General Rule and a Special R	ule. See								
General Rule										
	ing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling property) from any one contributor. Complete Parts I and It. See instructions for deterritibutions.									
Special Rules										
regulations under sections and that received	For an organization described in section 501(a)(3) filling Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, Iline 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (I) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.									
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address). It, and It.										
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year.										
	isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990; or check the box on line H of its Form 990-EZ or on its Form 990.									

2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990),

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ; or 990-PF.

Schedule B (Form 990) (2022)

Page 1 of 1 Schedule B (Form 990) (2022) Name of organization Employer identification number 94-2773017 Park City Performances Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. Part I (a) No. Name, address, and ZIP + 4 Total contributions Type of contribution 1 Person Payroll 100,000 Noncash (Complete Part II for noncash contributions.) (a) Name, address, and ZIP + 4 Total contributions Type of contribution No. 2 Person Payroll 300,000 Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 Total contributions Type of contribution No. 3 Person Payroll 125,000 Noncash (Complete Part II for noncash contributions.) (b) (c) (a) Name, address, and ZIP + 4 Total contributions Type of contribution No. Person Payroll Noncash (Complete Part II for noncash contributions.) (b) (c) (d) (a) Total contributions Type of contribution-Name, address, and ZIP + 4 No. Person Payroll Noncash (Complete Part II for noneash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 Type of contribution Total contributions No. Person Payroli Noncash (Complete Part II for noncash contributions.)

#### SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

grantous water por transport

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

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

OMB No. 1545-0047 2022 Open to Public

Inspection

Name of the organization		Employer Identification number
Park City Performances		94-2773017
Part I Organizations Maintaining Donor Advised Fu Complete if the organization answered "Yes" on	inds or Other Similar Funds of Form 990, Part IV, line 6	
	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
Aggregate value of contributions to (during year)		
Aggregate value of grants from (during year)		
Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that		
funds are the organization's property, subject to the organization's exc		Yes No
6 Did the organization inform all grantees, donors, and donor advisors in		
only for charitable purposes and not for the benefit of the donor or dor	7.1	<u> </u>
conferring impermissible private benefit?		Yes No
Part II Conservation Easements. Complete if the organization answered "Yes" on		
1 Purpose(s) of conservation easements held by the organization (check		
Preservation of land for public use (for example, recreation or edu-		
Protection of natural habitat	Preservation of a certified h	istoric structure
Preservation of open space		
2 Complete lines 2a through 2d if the organization held a qualified conse	ervation contribution in the form of a con	no La Co
easement on the last day of the tax year.		Held at the End of the Tax Year
b Total acreage restricted by conservation easements	And the second form of the second	<u>2b</u>
c Number of conservation easements on a certified historic structure inc	luded in (a)	. 2c
d Number of conservation easements included in (c) acquired after July	· ·	
historic structure listed in the National Register		2d
3 Number of conservation easements modified, transferred, released, ex	tinguisned, or terminated by the organia	zation during the
tax year	landed	
5 Does the organization have a written policy regarding the periodic mor		
violations, and enforcement of the conservation easements it holds?	itoling, respection, flambling of	Yes No
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of	of violations, and enforcing conservation	easements during the year
out and volunteer steam devoted to morning, inspecting, training t	a volutions, and emororing conservation	casements during the year
7 Amount of expenses incurred in monitoring, inspecting, handling of vio	lations, and enforcing conservation ease	ements during the year
8 Does each conservation easement reported on line 2(d) above satisfy	the requirements of section 170(h)(4)(E	GÝG
the state of the s		[™] □ ₩ □ ₩
9 In Part XIII, describe how the organization reports conservation easem		
balance sheet, and include, if applicable, the text of the footnote to the		
organization's accounting for conservation easements.		
Part III Organizations Maintaining Collections of Art Complete if the organization answered "Yes" on		er Similar Assets.
1a If the organization elected, as permitted under FASB ASC 958, not to	report in its revenue statement and bala	ince sheet works.
of art, historical treasures, or other similar assets held for public exhibit	tion, education, or research in furtheran	ce of public
service, provide in Part XIII the text of the footnote to its financial state	ments that describes these items.	
b If the organization elected, as permitted under FASB ASC 958, to repo	ort in its revenue statement and balance	sheet works of
art, historical treasures, or other similar assets held for public exhibition	n, education, or research in furtherance	of public service,
provide the following amounts relating to these items:		
(i) Revenue included on Form 990, Part VIII, line 1		<b>.</b>
(ii) Assets included in Form 990, Part X		\$
2 If the organization received or held works of art, historical treasures, or	r other similar assets for financial gain, p	provide the
following amounts required to be reported under FASB ASC 958 relationships and the second sec		
a Revenue included on Form 990, Part VIII, line 1		<b>\$</b>
b Assets included in Form 990, Part X		<u> </u>
For Paperwork Reduction Act Notice, see the Instructions for Form 99	U.	Schedule D (Form 990) 2022

Part III Organizations Maintainii		ces		773017	Page :							
	ng Collections of	Art, Historical	Freasures, or Ot	her Similar Asse	ets (continued)							
3 Using the organization's acquisition, access collection items (check all that apply):	sion, and other records.	, check any of the fo	llowing that make sigi	nificant use of its								
a Public exhibition	d 🗍 Lo	oan of exchange prog	gram									
b Scholarly research e Other												
c Preservation for future generations												
4 Provide a description of the organization's	collections and explain	how they further the	organization's exempt	purpose in Part								
XIII.												
5 During the year, did the organization solicit	t or receive donations o	f art, historical treasu	ires, or other similar									
assets to be sold to raise funds rather than	to be maintained as p	art of the organization	n's collection?		Yes No							
Part IV Escrow and Custodial A												
Complete if the organization	on answered "Yes"	on Form 990, P	art IV, line 9, or i	eported an amou	int on Form							
990, Part X, line 21.	w		A Alexander Marie I Marie									
1a Is the organization an agent, trustee, custo												
included on Form 990, Part X?  b If "Yes;" explain the arrangement in Part X.			ç xç		Yes No							
b if "Yes," explain the arrangement in Part XI	III and complete the following	owing table:			<u> </u>							
					Amount							
c Beginning balance				1c	<u></u>							
d Additions during the year			erroren zen zen erroren arrena erroren	1d								
e Distributions during the year				1e								
f Ending balance		. <u></u>		1f								
2a Did the organization include an amount on					Yes No							
b If "Yes," explain the arrangement in Part XI	II. Check here if the exp	planation has been p	rovided on Part XIII									
Part V Endowment Funds.	an' annuis saidh Wann	CAN FARM 1000 F	ant N.C. line, 40									
Complete if the organization		·····		ras <del>d</del> epartituación cara.	1-1 (0-10)							
As maitearin article control	(a) Current year 675,084	(b) Prior year 252,411	(c) Two years back	(d) Three years back	(e) Four years back 225,047							
1a Begirining of year balance	0/3/004	232,411	224,662	228,012	225,04/							
b Contributions c Net investment earnings, gains; and		<del></del>										
· · · · · · · · · · · · · · · · · · ·	118,821	-59,427	66,143	5,759	9,234							
d Grants or scholarships		33,421	30,143	37.739	9,234							
e Other expenditures for facilities and												
programs	1,093,302	482,100	38,394	6,350	4,967							
f Administrative expenses		π,σ.σ.γ,π.σ.σ.,	30.7001	2,759								
	1,887,207	675,084	252,411	224,662	228,012							
o rod or vear palance I		0.0700.	/	221,002								
g End of year balance	ment year and balance.	ding to column (all)	hald no									
2 Provide the estimated percentage of the cu		(line 1g, column (a))	held as:									
<ul> <li>Provide the estimated percentage of the cult</li> <li>Board designated or quasi-endowment</li> </ul>	.00.00%	(line 1g, column (a))	held as:									
2 Provide the estimated percentage of the cual Board designated or quasi-endowment 3 Permanent endowment %	.00.00%	(line 1g, column (a))	held as:									
2 Provide the estimated percentage of the cual Board designated or quasi-endowment 1 b Permanent endowment % % c Term endowment %	.00.00 %	(line 1g. column (a))	held as:									
Provide the estimated percentage of the cual Board designated or quasi-endowment     Permanent endowment %     Term endowment %     The percentages on lines 2a, 2b, and 2c sl	.00 . 00 % hould equal 100%.	,,, , , , , , , , , , , , , , , , , ,										
2 Provide the estimated percentage of the cual Board designated or quasi-endowment 3 Permanent endowment % C Term endowment % The percentages on lines 2a, 2b, and 2c sl 3a Are there endowment funds not in the possible.	.00 . 00 % hould equal 100%.	,,, , , , , , , , , , , , , , , , , ,			Yas No							
Provide the estimated percentage of the cual Board designated or quasi-endowment.     Permanent endowment.     Term endowment.     The percentages on lines 2a, 2b, and 2c st.      Are there endowment funds not in the possorganization by:	.00 .00 % hould equal 100%, session of the organizati	ion that are held and	administered for the		,							
2 Provide the estimated percentage of the cual Board designated or quasi-endowment  b Permanent endowment %  c Term endowment %  The percentages on lines 2a, 2b, and 2c sl  3a Are there endowment funds not in the post organization by:  (i) Unrelated organizations	.00 .00 % hould equal 100%, session of the organizati	ion that are held and	administered for the	district the Mark	3a(i) X							
2 Provide the estimated percentage of the cual Board designated or quasi-endowment. 1 b Permanent endowment	.00 .00 % hould equal 100%, session of the organizati	ion that are held and	administered for the		3a(i) X 3a(ii) X							
2 Provide the estimated percentage of the cual Board designated or quasi-endowment 3 Permanent endowment 4 The percentages on lines 2a, 2b, and 2c sl 3a Are there endowment funds not in the post organization by: (i) Unrelated organizations (ii) Related organizations b If "Yes" on line 3a(ii), are the related organization.	.00.00 % hould equal 100%, session of the organizati	ion that are held and ed on Schedule R?	administered for the		3a(i) X 3a(ii) X							
2 Provide the estimated percentage of the cual Board designated or quasi-endowment 3 Permanent endowment 4 The percentages on lines 2a, 2b, and 2c sl 3a Are there endowment funds not in the post organization by: (i) Unrelated organizations (ii) Related organizations b if "Yes" on line 3a(ii), are the related organization part XIII the intended uses of the second of the culture	.00.00 % hould equal 100%, session of the organizati izations listed as require the organization's endoy	ion that are held and ed on Schedule R?	administered for the		3a(i) X 3a(ii) X							
2 Provide the estimated percentage of the cual Board designated or quasi-endowment 1 Permanent endowment % The percentages on lines 2a, 2b, and 2c sl 3a. Are there endowment funds not in the post organization by:  (i) Unrelated organizations (ii) Related organizations b if "Yes" on line 3a(ii), are the related organization Part XIII the intended uses of the Part VIII Land, Buildings, and Equations	hould equal 100%, session of the organizations listed as require the organization's endownipment.	ion that are held and ed on Schedule R? wment funds.	administered for the		3a(i) X 3a(ii) X 3b							
2 Provide the estimated percentage of the cual Board designated or quasi-endowment 1 Permanent endowment % The percentages on lines 2a, 2b, and 2c start and 2c s	hould equal 100%, session of the organizations listed as require the organization's endownipment.	ion that are held and ed on Schedule R? wment funds.	administered for the	See Form 990, Pa	3a(i) X 3a(ii) X 3b X							
2 Provide the estimated percentage of the cual Board designated or quasi-endowment 1 b Permanent endowment % The percentages on lines 2a, 2b, and 2c sl 3a. Are there endowment funds not in the post organization by:  (i) Unrelated organizations (ii) Related organizations b if "Yes" on line 3a(ii), are the related organization percentage of the part VIII the intended uses of the part VIII Land, Buildings, and Equations	hould equal 100%, session of the organizations listed as require the organization's endoy uipment.  (a) Cost or other bas	ion that are held and ed on Schedule R? wment funds.  on Form 990, P is (b) Cost or other	administered for the administe	See Form 990, Pa	3a(i) X 3a(ii) X 3b							
2 Provide the estimated percentage of the cual Board designated or quasi-endowment 1 Permanent endowment % Term endowment % The percentages on lines 2a, 2b, and 2c start and	hould equal 100%, session of the organizations listed as require the organization's endouglipment.  (a) Cost or other bas (investment)	ion that are held and ed on Schedule R? wment funds.	administered for the administe	See Form 990, Pa comulated prédation	3a(i) X 3a(ii) X 3b X							
2 Provide the estimated percentage of the cual Board designated or quasi-endowment 1 Permanent endowment % Term endowment % The percentages on lines 2a, 2b, and 2c states and 2c states are there endowment funds not in the possion organization by (ii) Unrelated organizations (iii) Related organizations bif "Yes" on line 3a(ii), are the related organization Part VI Land, Buildings, and Equation Complete if the organization of property	hould equal 100%, session of the organizations listed as require the organization's endoy uipment.  [a) Cost or other bas (investment)	ion that are held and ed on Schedule R? wment funds.  on Form 990, P is (b) Cost or other	administered for the administe	See Form 990, Pa	3a(i) X 3a(ii) X 3b X							
2 Provide the estimated percentage of the cual Board designated or quasi-endowment 1 Permanent endowment % Term endowment % The percentages on lines 2a, 2b, and 2c states and 2c states are there endowment funds not in the possion organization by (ii) Unrelated organizations (iii) Related organizations bif "Yes" on line 3a(ii), are the related organization Part VII Land, Buildings, and Equation Complete if the organization of property	hould equal 100%, session of the organizations listed as require the organization's endoy uipment.  [a) Cost or other bas (investment)	ion that are held and ed on Schedule R? wment funds.  on Form 990, P is (b) Cost or other	administered for the administe	See Form 990, Pa comulated prédation	3a(i) X 3a(ii) X 3b X							
2 Provide the estimated percentage of the cual Board designated or quasi-endowment 1 Permanent endowment % The percentages on lines 2a, 2b, and 2c states and 2c states are there endowment funds not in the possion organization by (i) Unrelated organizations (ii) Related organizations if "Yes" on line 3a(ii), are the related organization Part VII Land, Buildings, and Equation Complete if the organization obscription of property	hould equal 100%, session of the organizations listed as require the organization's endowupment.  (a) Cost or other bas (investment)	ion that are held and ed on Schedule R? wment funds.  On Form 990, P is (b) Cost or olt (other)	administered for the  art IV, line 11a. Serier basis (c) A	See Form 990, Pa comulated prédation	3a(il) X 3b X							

organization's flability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

		94-277301		Page 4
Part XI Reconciliation of Revenue per Audited Financial Stater			Retur	n
Complete if the organization answered "Yes" on Form 990.	Part IV, I	ine 12a.		
			1	5,220,476
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12;	1 1			
a Net unrealized gains (losses) on investments	2a .	72,012		
b Donated services and use of facilities	2Ь	240,129		
c Recoveries of prior year grants	2c			
d Other (Describe in Part XIII.)	2d			200 444
e. Add lines 2a through 2d			2e	312,141
Subtract line 2e from line 1     Amounts included on Form 990, Part VIII, line 12, but not on line 1:	· promote	PARTIES PROPERTY OF A STATE	.3	4,908,335
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		30 (0.05) 444-450	
h. Other (Decribe in Part VIII.)	4a 4b			
b Other (Describe in Part XIII.) c Add lines 4a and 4b			4c	NAME OF THE PARTY
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	4,908,335
Part XII Reconciliation of Expenses per Audited Financial State				
Complete if the organization answered "Yes" on Form 990,	Part IV, Ii	ne 12a.		
1 Total expenses and losses per audited financial statements			1	5,153,147
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a Donated services and use of facilities	2a	240,129	991 AV	
b Prior year adjustments	2b			
c Other losses	2c			
d Other (Describe in Part XIII.)	20			
e Add lines 2a through 2d			20	240,129
3 Subtract line 2e from line 1			3	4,913,018
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:			1.5	
a Investment expenses not included on Form 990, Part VIII, line 7b				
b Other (Describe in Part XIII.)	4b			
c Add lines 4a and 4b  5 Tolal expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			4c	4,913,018
Part XIII Supplemental Information.			<b>D</b>	4,913,016
Provide the descriptions required for Part II, lines 3; 5, and 9; Part III, lines 1a and 4; Part	IV lines the	ind 2h: Part Villing 4:	Part Y	line
2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide			IUILA	, unic
Part V, Line 4 - Intended Uses for Endowmer				
		interesta de la composición del composición de la composición de	• • • • • • • • •	******************
The endowment fund was set up for anticipat	ted fut	ure expens	es	specific
	di	eran en		***************************************
for the operational needs of the Theatre. T	The Boa	rd has des	igna	ated that all
amounts contributed to the fund and 50% of	the ea	rnings sha	11 ŀ	oe held in
	•••			
perpetuity, while 50% of the earnings can be	e dist	ributed fo	r ar	y use as
disposted by the Board Who Board was also	3			
directed by the Board. The Board may also	TILEGE	that the r	ema	uning 50% or
earnings be left in the fund until needed h	y ETC.	The Board	sha	all make any
decisions on distributions from the fund or	ı a sen	niannual ba	sis	. Donations
contributed to the fund in the future may b				
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Schedule D (Form 990) 2022 Park City Performances Part XIII. Supplemental Information (continued)		9
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on proceedings of the contract		S

#### SCHEDULE J

(Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

#### Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990; Part IV, line 23. Attach to Form 990.

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

OMB No: 1545-0047

2022 Open to Public

Inspection

Employer identification number

#### 94-2773017 Park City Performances Questions Regarding Compensation Part I Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a, Complete Part III to provide any relevant information regarding these items. Housing allowance or residence for personal use First-class or charter travel Travel for companions Payments for business use of personal residence Tax Indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (such as maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to 1b manager de la companya del companya della companya 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 2 3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply, Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee X Written employment contract Independent compensation consultant Compensation survey or study Approval by the board or compensation committee Form 990 of other organizations 4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: a Receive a severance payment or change-of-control payment? 4a b Participate in or receive payment from a supptemental nonqualified retirement plan? c Participate in or receive payment from an equity-based compensation arrangement? If "Yes" to any of lines 4a-c; list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. 5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization? 5a **b** Any related organization? If "Yes" on line 5a or 5b, describe in Part III. 6 For persons listed on Form 990, Part VII; Section A, line 1a, did the organization pay or accuse any compensation contingent on the net earnings of: a The organization? 6a **b** Any related organization? 6b If "Yes" on line 6a or 6b, describe in Part III. 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? [f "Yes," describe in Part III X 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53,4958-4(a)(3)? If "Yes," describe in Part (I 9 If "Yes" on line 8 did the organization also follow the rebuttable presumption procedure described in

Regulations section 53.4958-6(c)?

Randy Barton  Randy Barton  Theatre Director  (a) (a) (b) (a) (b) (a) (b) (b) (b) (b) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	J. report compensation from the organization on row (i) and from related organizations, described in the sum 990, Part VII. Section A, fine 1a, applicable column (D) and (E) amounts for that individual Reakdown of W2 ander 1994MSC compensation (c) Retirement and other telefored open 15 Total of column (D) Nightown of W2 ander 1994MSC and/or 1099-NEC compensation of the compensation o	Compensation (Ward (B) reporter Form 990
Randy Barton   (A) Name and Tibe   (B) Reakdown of W2 and/or 100 formulation of Tibes   (B) Breakdown of W2 and/or 100 formulation of Tibes   (B) Breakdown of W2 and/or 100 formulation of Tibes   (B)   (B)	1099-NEC compensation   (C) Retirement and   (D) Northweathe   (E) Total of columns   (III)	) Compensation olymni (B) reported (deferred on prior Form 990 0
(A) Name and Title	Omer deferred topolis (B(0,+0) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Shurri (B) reported Ceferration prior Form 990 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Randy Barton Theatre Director	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
Theatre Director (0) (0) (0) (0) (0) (0) (0) (0) (0) (0)	0 0	
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S egg-	, 6b, 7, and 8 and for Part II. Also complete this part			The second secon							Schedule J (Form 990) 2022
94-2773017	equired for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a,										
Schedule J (Form 990) 2022 Park City Performan	Provide the information, explanation, or descriptions required and additional information.					:			7		

#### SCHEDULE O (Form 990)

### Supplemental Information to Form 990 or 990-EZ

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

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information. Open to Public Inspection

Employer identification number

Park City Performances	94-2773017
Form 990, Part VI, Line 11b - Organization's Process to	Review Form 990
A completed copy of the Form 990 is provided to the ent	ire Board and the
executive director for review and approval before filin	g.
	erik je reseje erik kapa erak perik general (1881). Sam
Form 990, Part VI, Line 15a - Compensation Process for	Top Official
Compensation for the Executive Director is determined by	y the Board of
Directors, based on performance evaluations and compara	ble data, and
recorded in the Board minutes.	
Form 990, Part VI, Line 15b - Compensation Process for	Officers
Compensation for ETC employees is determined by the Exe	cutive Director,
based on performance evaluations and comparable data.	
Form 990, Part VI, Line 19 - Governing Documents Disclo	sure Explanation
Governing documents, public inspection copies of the Fo	rm 990, and other
pertinent documents are made available at the Theatre's	office upon
request.	
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entronico a más necesario no carectorio con constitue a constitue a constitue a constitue a	erik wrzenika (z. 1888) kan
	s anger liver a live skill art etterate i live skille
garrányazan mennezisten ez erretter kantan tankatan ez errettet eta ez errettet eta errettet ez errettet ez en	saan aga saaraa da ahay ahaa ga saabaa ah saara

94-2773017

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# Federal Asset Report

FYE: 8/31/2023 Form 990, Page 1

Bus Sec Date Basis Asset Description In Service Cost % 179 Bonus for Depr Per Conv Meth Prior Current Other Depreciation:

1 Oasis Stage Works: Lights
8 Kurzweil Piano 10/09/97 2/02/00 107,310 2,000 15,666 5 MO S/L 7 MO S/L 5 MO S/L 107,310 107,310 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 | 10/09/97 2,000 2,000 15,666 15,666 5 MO S/L 7 MO S/L 3,645 3,645 3,645 6,530 6,530 6,530 5 MO S/L 5 MO S/L 4,625 4,625 4,625 3,000 3,000 3,000 5/17/10 3 MO S/L 5 MO S/L 3,172 3 MO S/L
9,43 3 MO S/L
1,226 5 MO S/L
1,167 3 MO S/L
1,620 3 MO S/L
1,620 3 MO S/L
3,000 3 MO S/L
25,245 5 MO S/L
800 5 MO S/L
6,000 5 MO S/L
2,700 3 MO S/L
2,700 3 MO S/L
10,000 5 MO S/L
10,000 5 MO S/L
10,000 5 MO S/L
1,068 5 MO S/L
1,068 5 MO S/L
1,068 5 MO S/L
1,164 5 MO S/L
1,165 3 MO S/L
1,164 5 MO S/L
1,165 3 MO S/L
1,164 5 MO S/L
1,165 3 MO S/L
1,165 3 MO S/L
3,500 3 MO S/L
3,500 3 MO S/L Desktop 2/22/11 1,167 Computer Equipment
HP Maintenance Kit - Speakers
Video Equipment
Amplifier Guitar Czar 3/03/11 1,620 1,620 3/17/11 25,245 8/08/12 25,245 5/18/12 3/15/12 3/28/12 Audio Equipment - Ramsa SP Computers 600 600 6,554 45 6,554 Guitar Czar Server 8000 3/27/12 5,035 2,700 5,035 2,700 47 1/18/12 48 Microphones 12/02/11 10,000 10,000 Microphones
Sound Equipment
Word Clock
Oasis Lighting Upgrade
Equipment - Refrigerator
Audio Equipment - Subwoofer 12/08/11 6,722 10/19/11 9/14/11 1,068 1.068 9,369 9,369 9/29/11 2,015 2,015 9/01/11 4,640 4,640 1/18/12 1,100 1,100 Equipment
Laptop Computer 2013
Monitors
Sound Upgrade 2013
Electrical Upgrade 2013
Printer/Fax 2013
Remodel - 2012/2013
Out Of Service: 8/01/20
Video Equipment - 2012 - 13
Credit Card Machines
Lighting Equipment 1,765 1,765 8/19/13 449 449 3/01/13 14,164 14,164 8,992 3,500 4/01/13 61 8,992 1/08/13 4/01/13 75,359 14,331 5 MO S/L 7 MO S/L 7 MO S/L 60,506 600 4/01/13 60:506 60,506 3/05/14 600 600 31,574 Lighting Equipment Lighting Equipment Sound Equipment 31,574 9/23/13 12,000 12,000 10/17/13 12,000 1,500 9/20/13 1,500 Sound Equipment Sound Equipment 1,800 540 2,000 1,800 540 2,000 1,800 1/08/14 2/11/14 540 5/20/14 7/25/14 Sound Equipment 2.000 Sound Equipment 1,000 1,000 1,000 Video Equipment :9/11/13 661 Video Equipment 10/16/13 696 696 696 Video Equipment 12/16/13 480 Video Equipment Camera EOS 6D 4/18/14: 478 9/15/14 2,670 2.670 2,670 Camera EOS 6D Display refrigerator
Out Of Service: 9/01/20
True Diversity receiver & rack mount
Hearing impaired equipment
Lumin lights/LED lighting fixtures
LLine array speakers 1/15/15 1,552 1,552 5 MO S/L 3/11/15 2,365 2,365 1/15/15 4,227 4.227 4.227 2.000 2/24/15 2,000 2.000 14,000 250 12/10/14 14,000 250 83 14,000 Monitor Seating expansion 7/30/15 7/07/15 250 24,219 24,219 2,501 936 499 24,219 Silverware
Live sound plugins/plugin package
Simply Mac/Mini Mac
Video equipment for Mac 6/12/15. 10/02/14 2,501 936 2,501 936 4/23/15 499 499 2/03/15 2,239 2,239 2,239 Cameras-Broadcast, Tübe, Nite Vision 1,329 250 8/06/15 1,329 1,329 92 Monitor 8/22/15 250 18' Subwoofers and Amp 9/01/15 1.400 LED Retrofit Assembly (4) Washing Machine 433 Out Of Service: 8/01/20 4/14/16 449 96 Refridgerator 449 5 MO S/L 397 Out Of Service: 8/01/20

07/15/2024 10:50 AM

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EGYPTIANTHE Park City Performances 07/15/2024 10 94-2773017 Federal Asset Report
FYE: 8/31/2023 Form 990, Page 1

07/15/2024 10:50 AM

		Date		Bus	Sec	Basis				_
<u>Asset</u>	Description	In Service	Cost	_%_	<u>179</u> Bonus	for Depr	Pèr	Conv Meth	Prior	Current
97	Eighting Equipment - DMX DJ Club Out Of Service: 8/01/20	11/03/15	205			205	5	MO_S/L	198	0
98	LHI - AC Ducts for Balconies Out Of Service: 8/01/20	12/10/15	14,000			14,000	.7	MO/S/L	9,500	0
99	Guitar Czár Out Of Service: 8/01/20	7/23/16	2,800			2,800	5	MO S/U	2,287	0.
100	Sound Monitors	9/22/15	1,500			1,500.	5	MO S/L	1,475	0
· ·	Out Of Service: 8/01/20									
101	Sound Monitors (2 small floor monitors) Out Of Service: 8/01/20	11/11/15	325			325	5	MO S/L	314	0
102	Scating Expansion	10/08/15	2,522			2,522	.5	MQ S/L	2,480	0, 1
·	Out Of Service; 8/01/20									
103	Sound Equipment - Monitor	2/02/16	262			262	5	MO S/L	240	0
XIIIVIII	Out Of Service: 8/01/20									
104.	Sound Equipment - Control Room Cable	5/26/16	1.862			1,862	- 5	MO S/L	1,583	.0,
	Out Of Service: 8/01/20	a casta sa A				A		بمصد		
	Sound Equipment - Sound Grid Server	9/01/15	3.044			3,044		MO S/L	3,044	0.
106	Apple Computer - Server	9/02/15	3,759			3,759	Э.	MO S/L	3,759	-0
	Total Other Depreciation		542,219			542,219			475,393	0
	•	_	······································		,				<del>, ,</del> ,-	· · · · · · · · · · · · · · · · · · ·
	Total ACRS and Other Deprec	iation <u> </u>	542,219			542,219			475,393	0
	Grand Totals Less: Dispositions and Transfer	·s	542,219 0			542,219 0			475;393 0	0
	Less: Start-up/Org Expense	_	0			0			<u>u</u> -	<u>U</u> .
	Net Grand Totals	=	542,219		•	542,219			475,393	

EGYPTIANTHE Park City Performances 07/15/2024 10 94-2773017 **AMT Asset Report**FYE: 8/31/2023 **Form 990, Page 1** 

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Asset	Description	Date In Service	Cost	Bus Sec % 179 Bonus	Basis for Depr	PerConv Meth	Prior C	urrent
<u>Öther</u>	Depreciation: Qasis Stage: Works: Lights	10/09/97	'n.		0	-0 НŸ	0	0.
8	Kurzweii Piano	2/02/00	0		0	0 HY	0	Ó
111 26.	Lighting Equipment Union Light System 2006	1/01/01 1/06/06	0		0	T 1/1 1	0 0	0
30	Carpet Edwina Room	12/01/07	Ō,		Ö	0 HY	.0	O
32 34	Samsung Copier CLX-8540ND. 2 Lights	12/18/09 5/14/10	:0: :0		0	*	.0 0	0
35	Box Office Equipment	5/17/10	0		Ö	0 HÝ	Ö	0.
36 37	2 Active 3 Way Line Array Module Dell Computer - Becky	7/19/10 8/16/10	, 0 0		0		() Ö	0
38	Sound Supplies	9/01/10	Ō		0	0 HY	0	0
39 40	Desktop Computer Equipment	2/22/11 3/03/11	0 0		0		0 D	.0 .0
41	HP Maintenance Kit - Speakers	3/17/11	0 0 .0		Ó	0 HY	0	0
42 43	Video Equipment Amplifier Guitar Czar	8/08/12 5/18/12	.0		0	0 HY 0 HY	0	0- 0
44	Audio Equipment - Ranisa SP	3/15/12	0.		0		0	0
45 46	Computers Guitar Czar	3/28/12. 3/27/12	0.		Ö	0 HY 0 HY	0 0	0
47	Server 8000	1/18/12	0 0 0		-0	0 HY	0	0
48 49	Microphones Sound Equipment	12/02/11 12/08/11	.0		0	0 HY 0 HY	0	0
50	Word Clock	10/19/11	0		0		0 0	0 0 0
51 52	Oasis Lighting Upgrade Equipment - Refrigerator	9/14/11 9/29/11	.Q		.0		0	0
53 54	Audio Equipment - Subwoofer	9/01/11	0		0	7	0	0
54 58	Equipment Laptop Computer 2013	1/18/12 6/05/13	0 0		0		0	0
59	Monitors	8/19/13:	Ø		0	0 HY	0	0
60 61	Sound Upgrade 2013 Electrical Upgrade 2013	3/01/13 4/01/13	0		0		0	0: 0
62	Printer/Fax 2013	1/08/13	0		0.0		0	0
.63	Remodel - 2012/2013 Out Of Service: 8/01/20	4/01/13			. پر	0 HY		U
64 66	Video Equipment - 2012 - 13 Credit Card Machines	4/01/13 3/05/14	.0 .0		0	0 HY 0 HY	0	.0 0
67	Lighting Equipment	9/23/13	0		Ò	0 HY	0	Ó
68 69	Lighting Equipment Sound Equipment	10/17/13 9/20/13	0 0		0	0 HY 0 HY	0 0	,0 0
70	Sound Equipment	1/08/14	0		.0.		Ø	0
71 72	Sound Equipment	2/11/14 5/20/14	0		0		0 0	0
73	Sound Equipment Sound Equipment	7/25/14	0:		ő		0	0.
74	Video Equipment	9/11/13 10/16/13	0		0		0	(0 0
75 76	Video Equipment Video Equipment	12/16/13	0		0		0	0
77	Video Equipment	4/18/14 9/15/14	0		0		0 0	Q.
78 79	Camera EOS 6D Display refrigerator	1/15/15	0		0		0	ő
80	Out Of Service: 9/01/20 True Diversity receiver & rack mount	3/11/15	'n		0	0 HY	0	0
81	Flearing impaired equipment	1/15/15	0		Ö	0 HY	0	Q [']
82 83	Lumin lights/LED lighting fixtures LLine array speakers	2/24/15 12/10/14	0		0	0 HY 0 HY	0	0
84	Monitor	7/30/15	0.		9	0 HY	0	0
85 86	Scating expansion Silverware	7/07/15 6/12/15	0 0		0		0	0.
87	Live sound plugins/plugin package:	10/02/14	.0		0	0 HY	0	0
88 89	Simply Mac/Mini Mac Video equipment for Mac	4/23/15 2/03/15	0. 0		0		Ò 0	0. n.
90	Cameras-Broadcast, Tube, Nite Vision	8/06/15	ő		Ó	0 HY	Ó	0.0
92 93	Monitor 18' Subwoofers and Amp	8/22/15 9/01/15	0 0 0		Ŏ 0		0	.0 .0
94	LED Retrofit Assembly (4)	9/03/15	0 0		0	0 HY	0	0
95	Washing Machine Out Of Service: 8/01/20	4/14/16;	0		Ó	.0 HY	0	.0
96.	Refridgerator	4/14/16	0		0	0 HY	0	Ō.
	Out Of Service: 8/01/20							

EGYPTIANTHE Park City Performances

Net Grand Totals

94-2773017

**AMT Asset Report** 

Date Bus Sec Basis Description In Service Cost % 179 Bonus for Depr Per Conv Meth Current Asset 97 Lighting Equipment - DMX DJ Club Out Of Service: 8/01/20 1,1/03/15 0 0 HY 0 0 LHI - AC Ducts for Balconies 12/10/15 0 0 0 HY 0 Out Of Service: 8/01/20 0 HY Guitar Czar Out Of Service: 8/01/20 7/23/16 0 100 Sound Monitors 9/22/15 0 HY 0 Out Of Service: 8/01/20 Sound Monitors (2 small floor monitors) 11/11/15 0 HY 0 101 Out Of Service: 8/01/20 0 Seating Expansion 10/08/15 0 HY 0 Out Of Service: 8/01/20 Sound Equipment - Monitor 2/02/16 0 0 0 0. HY 0 Out Of Service: 8/01/20 Sound Equipment - Control Room Cable 5/26/16. 0 0. 0 HY 0 Q. Out Of Service: 8/01/20 Sound Equipment - Sound Grid Server Apple Computer - Server 0 HY 0 HY 9/01/15 9/02/15 Ō Û Ō 0 Total Other Depreciation 0 0. 0 Total ACRS and Other Depreciation 0 Grand Totals Less: Dispositions and Transfers 0 0

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FYE: 8/31/2023

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07/15/2024 10:50 AM

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EGYPTIANTHE Park City Performances 94-2773017	07/15/2024 10:50 AM	
Form Unit Asset Description Tax AMT  There are no assets that meet the criteria of this report	AMT Adjustments/ Preferences	
		!

 $y = -\frac{p^2}{n^2} z = -z$ 

Norman Section 1

EGYPTIANTHE Park City Performances 07/15/2024 10 94-2773017 Future Depreciation Report FYE: 8/31/24 FYE: 8/31/2023 Form 990, Page 1 07/15/2024 10:50 AM

8 - 1 - 1

	Asset	Description	Date in Service	Cost	Tax	AMT	
	Other_1	Depreciation:					
Source of the second se	1 8 11 26 30 32 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 51 52 53 54 58	Oasis Stage Works: Lights Kurzweil Piano Lighting Equipment Union Light System 2006 Carpet Edwina Room Sansuing Copier CLX-8540ND 2 Lights Box Office Equipment 2 Active 3 Way Line Array Module Dell Computer - Becky Sound Supplies Desktop Computer Equipment HP Maintenance Kit - Speakers Video Equipment Amplifier Guitar Czar Audio Equipment - Ramsa SP Computers Guitar Czar Server 8000 Microphones Sound Equipment Word Clock Oasis Lighting Upgrade Equipment - Refrigerator Audio Equipment - Subwoofer Equipment Equipment Laptop Computer 2013	10/09/97 2/02/00 1/01/01 1/06/06 12/01/07 12/18/09 5/14/10 5/17/10 7/19/10 8/16/10 9/01/10 2/22/11 3/03/11 3/03/11 3/03/11 3/03/11 3/03/11 3/17/11 8/08/12 5/18/12 3/15/12 3/15/12 3/28/12 1/18/12 12/02/11 12/08/11 10/19/11 9/14/11 9/29/11 9/04/11	107,310 2,000 15,666 3,645 6,530 4,625 3,000 6,600 3,172 943 1,226 1,167 1,620 3,00 25,245 8,00 6,00 6,554 5,035 2,700 10,000 6,722 1,068 9,369 2,015 4,640 1,100 1,765	0.0000000000000000000000000000000000000	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
	59 60 612 63 64 66 67 77 77 77 77 77 77 88 88 88 88 99 99 99 99 99 99 99 99 99	Monitors Sound Upgrade 2013 Electrical Upgrade 2013 Printer/Fax 2013 Remodel - 2012/2013 Video Equipment - 2012 - 13 Credit Card Machines Lighting Equipment Lighting Equipment Sound Equipment Sound Equipment Sound Equipment Sound Equipment Sound Equipment Video Equipment Lumin Eghts/LED lighting fixtures Lune array speakers Monitor Seating expansion Silverware Live sound plugins/plugin package Simply Mac/Mint Mac Video cquipment for Mac Cameras-Broadcast, Tube, Nite Vision Monitor 18' Subwoofers and Amp LED Retrofit, Assembly (4) Washing Machine Refridgerator Lighting Equipment - DMX DJ Club LHI - AC Ducts for Balconies Guitar Czar	8/19/13 3/01/13 4/01/13 1/08/13 4/01/13 1/08/13 4/01/13 3/05/14 9/23/13 10/17/13 9/20/13 1/08/14 5/20/14 7/25/14 9/11/13 10/16/13 12/16/13 12/16/13 12/16/13 12/16/13 12/16/13 12/16/13 12/16/13 12/16/13 12/16/13 12/16/13 12/16/13 12/16/13 1/15/15 1/15/15 1/15/15 1/15/15 1/15/15 1/15/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15 1/16/15	449 14,164 8,992 3,500 75,359 60,506 60,506 1,500 1,500 1,500 1,500 1,800 2,000 1,000 661 696 480 478 2,670 1,552 2,365 4,227 2,000 14,000 250 24,219 2,501 936 499 2,239 1,329 2,239 1,329 2,230 1,400 4,845 433 449 205 14,000 2,800			

EGYPTIANTHE Park City Performances

Total ACRS and Other Depreciation

94-2773017

FYE: 8/31/2023

Future Depreciation Report

Form 990, Page 1

07/15/2024 10:50 AM

FYE: 8/31/24

Date In Service Asset Description Cost Tax AMT 1,500 325 2,522 262 100 9/22/15 Sound Monitors Sound Monitors (2 small floor monitors) 101 11/11/15 102 103 Seating Expansion Sound Equipment - Monitor 10/08/15 2/02/16 Sound Equipment - Control Room Cable Sound Equipment - Sound Grid Server Apple Computer - Server 1.04 5/26/16 1.862 3,044 3,759 105 9/01/15 106 9/02/15 Total Other Depreciation 542,219 .0 0

Grand Totals 542,219 0 0

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Form 990/990PF	Rent Income and Deduction Worksheet  Description Theater Rental		2022
Name Park City Per	formances	Taxpayer k	tentification Number 73017

Use this summary worksheet	to verify data entered for a specific activity for your rental information
1. Gross rents	
Expenses (see details on worksheets below):	
2. Fees for services	nakakarana kiraka kira kari mwana kakada ya kapaka pinga kari mwana karanga mil <mark>ga.</mark>
3. Depreciation Expense	nyakanana tinaka kina kananananan atau atau atau atau atau atau
4 Hirant Lynansa	4
5. Total expenses. Add lines 8 through 12	
6. Net Income/Loss. Line 7 minus Line 13	6. 229,78
Expense Details - Fees for Services:	
Accounting.	
Legal	enten ar eller en
Commissions	entrana de Martines en la completa en la colonia de la completa en parte de la colonia del colonia de la colonia de la colonia de la colonia del colonia del colonia de la colonia del colonia de la colonia del colonia d
Management	er for the constitution of the constitution of the property of the property of the constitution of the con
Other Professional Fees	ener i Serenski for en komer er en karronene egis er konstruktionen en _M igere Webere. Se offenske for i Serenski foren konstruktionen en komer er en konstruktionen en _M oren en en _M oren en en en e
Total Fees for Services	s of the first of
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Expense Details - Depreciation Expense:	y and a second control of the second control
Expense Details - Depreciation Expense: On: non-investment property	
Expense Details - Depreciation Expense: On non-investment property On investment property	
Expense Details - Depreciation Expense: On non-investment property On investment property Amortization	
Expense Details - Depreciation Expense: On non-investment property On investment property Amortization Depletion	
Expense Details - Depreciation Expense: On non-investment property On investment property Amortization Depletion	
Expense Details - Depreciation Expense: On non-investment property On investment property Amortization Depletion Total Depreciation Expense	
Expense Details - Depreciation Expense: On non-investment property On investment property Amortization Depletion Total Depreciation Expense  Expense Details - Direct Expense:	
Expense Details - Depreciation Expense: On non-investment property On investment property Amortization Depletion Total Depreciation Expense  Expense Details - Direct Expense: Interest	
Expense Details - Depreciation Expense: On non-investment property On investment property Amortization Depletion Total Depreciation Expense  Expense Details - Direct Expense: Interest Taxes/licenses	
Expense Details - Depreciation Expense: On non-investment property On investment property Amortization Depletion Total Depreciation Expense  Expense Details - Direct Expense: Interest Taxes/licenses Occupancy Expenses	
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Expense Details - Depreciation Expense: On non-investment property On investment property Amortization Depletion Total Depreciation Expense  Expense Details - Direct Expense: Interest Taxes/licenses Occupancy Expenses Repairs & Maintenance	
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Expense Details - Depreciation Expense: On non-investment property On investment property Amortization Depletion Total Depreciation Expense  Expense Details - Direct Expense: Interest Taxes/licenses Occupancy Expenses Repairs & Maintenance Travel/conferences/meetings Printing & Publication	
Expense Details - Depreciation Expense: On non-investment property On investment property Amortization Depletion Total Depreciation Expense  Expense Details - Direct Expense: Interest Taxes/licenses Occupancy Expenses Repairs & Maintenance Travel/conferences/meetings Printing & Publication Advertising	
Expense Details - Depreciation Expense: On non-investment property On investment property Amortization Depletion Total Depreciation Expense  Expense Details - Direct Expense: Interest Taxes/licenses Occupancy Expenses Repairs & Maintenance Travel/conferences/meetings Printing & Publication Advertising Insurance	
Expense Details - Depreciation Expense: On non-investment property On investment property Amortization Depletion Total Depreciation Expense  Expense Details - Direct Expense: Interest Taxes/licenses Occupancy Expenses Repairs & Maintenance Travel/conferences/meetings Printing & Publication Advertising Insurance Utilities	
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Expense Details - Depreciation Expense: On non-investment property On investment property Amortization Depletion Total Depreciation Expense  Expense Details - Direct Expense: Interest Taxes/licenses Occupancy Expenses Repairs & Maintenance Travel/conferences/meetings Printing & Publication Advertising Insurance Utilities Supplies Other expenses	

Form <b>990</b>	Two Year Co	mparison Report		2021 & 2022
	For calendar year 2022, or tax year beginning	09/01/22 ending	08/31/23	

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Taxpayer Identification Number

Na	ime			İ	Taxpay	er Identification Number
	Park City Performances				94-2	2773017
			2021	2022		Differences
	1. Contributions, gifts, grants	1,	1,724,296	1,240	,593	-483,703
	2. Membership dues and assessments	2.				
	3. Government contributions and grants	3.	652,921	235	5,000	-417,921
9	4. Program service revenue	4.	2,280,171	3,156	,145	875,974
<u> </u>	5. Investment income	5.	12,204	46	5,809	34,605
	6. Proceeds from tax exempt bonds	6.				I .
تة <u>من</u> ــــــــــــــــــــــــــــــــــــ	7. Net gain or (loss) from sale of assets other than inventory	7.				
	8. Net income or (loss) from fundraising events	8.		·		
	9. Net income or (loss) from garning	9.				
	10. Net gain or (loss) on sales of inventory	10.				
	11. Other revenue	11,	327,180	229	788	-97,392
	12. Total revenue. Add lines 1 through 11	12.	4,996,772	4,908	3,335	-88,437
	13. Grants and similar amounts paid	13.				
	14. Benefits paid to or for members	14.				
S.	15. Compensation of officers, directors, trustees, etc.	15.	146,604	149	000,	2,396
v,	16. Salaries, other compensation, and employee benefits	16.	1,214,509	1,705	,761	491,252
9	17. Professional fundraising fees	17.				
	18. Other professional fees	18.	247,403	237	,486	-9,917
ம்	19. Occupancy, rent, utilities, and maintenance	19.	88,699	51	.,398	-37,301
	20. Depreciation and Depletion	20,	296,850	302	,486	5,636
	21. Other expenses	21.	2,490,490	2,466	,887	-23,603
	22. Total expenses. Add lines 13 through 21	22.	4,484,555	4,913	,018	428,463
	23. Excess or (Deficit). Subtract line 22 from line 12	23.	512,217	-4	, 683	-516,900
•	24. Total exempt revenue	24.	4,996,772	4,908	,335	-88,437
_	25. Total unrelated revenue	25.				
Ęį	26. Total excludable revenue	26.	2,619,555	3,432	,742	813,187
E	27. Total assets	27,	3,694,107	3,939	,055	244,948
يَّةِ	28. Total liabilities	. 28.	1,462,411	1,640	,030	
<u>-</u>	29. Retained earnings	29.	2,231,696	2,299	,025	67,329
Other	30. Number of voting members of governing body	30.	9	8		
õ	31. Number of independent voting members of governing body	31.	9	8		
	32. Number of employees	32.	54	71		
	33. Number of volunteers	33.	50	75		

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Form 990		Tax R	Tax Return History			2022
Name Park City	Performances				Employ 94-	Employer Identification Number 94-2773017
	2018	2019	2020	2024	2022	FCUC
Contributions, gifts, grants	1,838,997	1,736,236	2,229,449	2,377,217	1,475,593	
Membership dues	. !			0	1	
Program service revenue	2,137,049	1,306,034	134' (ZT	7,780,17	3,156,145	
capital year of toos Investment income	4,250	5,827	6,047	12,204	46,809	
Fundraising revenue (income/loss)					- Accordance	
Gaming revenue (incorne/loss)	- 1					
Other revenue		-			ı ►	
Total revenue	4,045,817	3,175,932	2,445,235	4,996,772	4,908,335	
Grants and similar amounts paid						
Benefits paid to or for members					******	
Compensation of officers, etc.	144,000		149,000	146,604	149,000	
Other compensation	920,900	879,830	676,533	1,214,509	1,705,761	
Professional fees	117,036	189,473	90,582	247,403	237,486	
Occupancy costs		102,172	98, 599	88,699	51,398	
Depreciation and depletion	66	70,983		296,850		
Other expenses	,354,	,900,	320,250	2,490,490		
Total expenses	3, 683, 994	. •		4,484,555	4,913,018	
Excess or (Deficit)	361,823	32,669	1,110,271	512,217	-4,683	
ı		!			:	
Total exempt revenue	4,045,817	3,175,932	2,445,235	4,996,772	4,908,335	
lotal unrelated revenue					- 1	
Total excludable revenue	2,206,820			2,619,555	3,432,742	
Total Assets	1,652,013	1,550,164		3,694,107	939	
Total Liabilities	1,063,871	929,421	1,397,753	1,462,411	1,640,030	
Net Fund Balances	588,142	620,743		2,231,696	2,299,025	

EGYPTIANTHE Park City Performances 7/15/2024 10:50 AM Federal Statements 94-2773017 FYE: 8/31/2023-----**Tax-Exempt Dividends from Securities** Description Unrelated Exclusion Postal Acquired after InState
Business Code Code 6/30/75 Muni (\$ or %) Amount Interest and Dividends 46,809 46,809 Total

4-18-19-19

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	Fund Raising				Fund Raising	).	, ,		2,	
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loyee)	Managel Gene	St.	S.		Manager	W)			W.	
ervice (Non-emp	ogram ervice	168	181,239	er Expenses	ogram ervice		7,933	70.6	314,534	
ees for S	.⊈ w	·ch	v-	¥	ŢΩ	ω-			-w-	
X, Line 11g - Other Fe	Total Expenses	\$ 225,564 9,071 2,851	\$ 237,486	990, Part IX, Line 24e	Total Expenses	\$ 90,980 81,914 79,884 67,603	25.20 25.20 25.20 25.20 25.20 25.20	6,557 706	91/8 \$ 352,539	
orm 990, Part				Form						
	Description	ct Labor ct Labor sional Services	otal		Description	nance sions Expense es	ships and Dues e Props totalons	g Expenses	Lxpense otal	
	FYE: 8/31/2023  Form 990, Part IX, Line 11q - Other Fees for Service (Non-employee)	Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)  Total Program Management & Service General	Eorm 990, Part IX, Line 11g - Other Fees for Service (Non-employee)           Description         Total         Program         Management & Expenses         F           or         Expenses         Service         General         F           or         \$ 225,564         \$ 172,168         \$ 53,396         \$           Services         2,851         2,851         \$         \$	Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)           Description         Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)         Fund Ranagement & Fund Service (Service)         Fund Raising           \$ 225,564         \$ 172,168         \$ 53,396         \$ 59,071         \$ 53,396         \$ 52,851           ervices         \$ 237,486         \$ 181,239         \$ 56,247         \$ 56,247         \$ 56,247	Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)           Description         Total         Program         Management & Fund Service         Fund General           1	Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)           Description         Total         Program         Management & Fund General General Service         Fund Raising           ervices         \$ 225,564 \$ 172,168 \$ 53,396 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,851 \$ 5,	Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)	Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)   Fund	Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)   Fun     Description	Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

 $|\psi\rangle = (s^{-1/4})^{-1/4} = \frac{1}{4} e^{-\frac{1}{4} (s^{-1} + s^{-1})^{-1/4}}$ 

7/15/2024 10:50 AM 235,000 ,240,593 2,481,821 674,324 46,809 229, 788 ,475,593 229,788 202,954 Amount Amount Amount .07-C) Schedule A, Part II, Line 12 - Current year Schedule A, Part II, Line 1(e) Schedule A, Part II, Line 8(e) Federal Statements Description Description Description Government Grants or Contributions Other EGYPTIANTHE Park City Performances Production Revenue Education Programs/Youtheatre Interest and Dividends Theater Rental 94-2773017 FYE: 8/31/2023 Total Tota1 Total

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