

Form **990**  
Department of the Treasury  
Internal Revenue Service

# Return of Organization Exempt From Income Tax

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

Do not enter social security numbers on this form as it may be made public.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047  
**2019**  
Open to Public Inspection

**A** For the **2019** calendar year, or tax year beginning **09-01-2019**, and ending **08-31-2020**

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Final return/terminated  
 Amended return  
 Application pending

**C** Name of organization: **FRACTURED ATLAS INC**  
 Doing business as: \_\_\_\_\_  
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite: **228 PARK AVENUE SOUTH 56651**  
 City or town, state or province, country, and ZIP or foreign postal code: **NEW YORK, NY 10003**

**D** Employer identification number: **11-3451703**

**E** Telephone number: **(212) 277-8020**

**G** Gross receipts \$ **30,022,949**

**F** Name and address of principal officer: **RUSSELL WILLIS TAYLOR**

**H(a)** Is this a group return for subordinates?  Yes  No  
**H(b)** Are all subordinates included?  Yes  No  
 If "No," attach a list. (see instructions)  
**H(c)** Group exemption number ▶ \_\_\_\_\_

**I** Tax-exempt status:  501(c)(3)  501(c) ( ) ◀ (insert no.)  4947(a)(1) or  527

**J** Website: ▶ **WWW.FRACTUREDATLAS.ORG**

**K** Form of organization:  Corporation  Trust  Association  Other ▶ \_\_\_\_\_

**L** Year of formation: **2003** **M** State of legal domicile: **NY**

## Part I Summary

**1** Briefly describe the organization's mission or most significant activities:  
**THE MISSION OF FRACTURED ATLAS IS TO MAKE THE JOURNEY FROM INSPIRATION TO LIVING PRACTICE MORE ACCESSIBLE AND EQUITABLE FOR ARTISTS AND CREATIVES.**

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

|  |           |           |
|--|-----------|-----------|
| <b>3</b> Number of voting members of the governing body (Part VI, line 1a)             | <b>3</b>  | <b>8</b>  |
| <b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) | <b>4</b>  | <b>8</b>  |
| <b>5</b> Total number of individuals employed in calendar year 2019 (Part V, line 2a)  | <b>5</b>  | <b>37</b> |
| <b>6</b> Total number of volunteers (estimate if necessary)                            | <b>6</b>  |           |
| <b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12         | <b>7a</b> | <b>0</b>  |
| <b>7b</b> Net unrelated business taxable income from Form 990-T, line 39               | <b>7b</b> |           |

|   | Prior Year | Current Year |
|---|------------|--------------|
| <b>8</b> Contributions and grants (Part VIII, line 1h)                                      | 27,451,046 | 24,587,730   |
| <b>9</b> Program service revenue (Part VIII, line 2g)                                       | 920,385    | 599,750      |
| <b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)                     | 1,051,685  | 546,003      |
| <b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)          | 1,692      | 409          |
| <b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)  | 29,424,808 | 25,733,892   |
| <b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3)                  | 22,705,214 | 19,607,169   |
| <b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)                     |            | 0            |
| <b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) | 3,070,003  | 2,923,364    |
| <b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)                    |            | 0            |
| <b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ 806,992                |            |              |
| <b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)                      | 2,027,608  | 1,486,961    |
| <b>18</b> Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)         | 27,802,825 | 24,017,494   |
| <b>19</b> Revenue less expenses. Subtract line 18 from line 12                              | 1,621,983  | 1,716,398    |

|  | Beginning of Current Year | End of Year |
|--|---------------------------|-------------|
| <b>20</b> Total assets (Part X, line 16)                             | 13,454,794                | 15,069,281  |
| <b>21</b> Total liabilities (Part X, line 26)                        | 529,194                   | 38,862      |
| <b>22</b> Net assets or fund balances. Subtract line 21 from line 20 | 12,925,600                | 15,030,419  |

## 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.

**Sign Here**

Signature of officer: \_\_\_\_\_ Date: **2020-12-21**

**TIM CYNOVA CO-CEO/BOARD MEMBER**  
Type or print name and title

**Paid Preparer Use Only**

Print/Type preparer's name: \_\_\_\_\_ Preparer's signature: \_\_\_\_\_ Date: **2021-01-26**

Firm's name ▶ **MOSES & SCHREIBER LLP** Check  if self-employed PTIN: **P01318254**

Firm's address ▶ **ONE HUNTINGTON QUADRANGLE SUITE 450** Firm's EIN ▶ **13-1971216**

**MELVILLE, NY 11747** Phone no. (516) 352-7700

**Part III Statement of Program Service Accomplishments**

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

**1** Briefly describe the organization's mission:

THE MISSION OF FRACTURED ATLAS IS TO MAKE THE JOURNEY FROM INSPIRATION TO LIVING PRACTICE MORE ACCESSIBLE AND EQUITABLE FOR ARTISTS AND CREATIVES.

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  No

If "Yes," describe these new services on Schedule O.

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes  No

If "Yes," describe these changes on Schedule O.

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

**4a** (Code: ) (Expenses \$ 21,199,958 including grants of \$ 19,607,170 ) (Revenue \$ 21,753 )

See Additional Data

**4b** (Code: ) (Expenses \$ 277,585 including grants of \$ ) (Revenue \$ 179,650 )

See Additional Data

**4c** (Code: ) (Expenses \$ 677,635 including grants of \$ ) (Revenue \$ 210,000 )

See Additional Data

(Code: ) (Expenses \$ 449,507 including grants of \$ ) (Revenue \$ 85,779 )

OTHER PROGRAMS AND SERVICES: FRACTURED ATLAS TECHNOLOGY-BASED PROGRAM, SPACEFINDER, A CLOUD-BASED APPLICATION PROVIDING A COMPREHENSIVE ONLINE DATABASE OF SPACE LISTINGS.

**4d** Other program services (Describe in Schedule O.)  
(Expenses \$ 449,507 including grants of \$ ) (Revenue \$ 85,779 )

**4e Total program service expenses** ▶ 22,604,685

**Part IV Checklist of Required Schedules**

|            |   | Yes | No |
|------------|---|-----|----|
| <b>1</b>   | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A   | Yes |    |
| <b>2</b>   | Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?   | Yes |    |
| <b>3</b>   | 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  |     | No |
| <b>4</b>   | <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II   | Yes |    |
| <b>5</b>   | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III   |     | No |
| <b>6</b>   | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I  |     | No |
| <b>7</b>   | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II  |     | No |
| <b>8</b>   | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III   |     | No |
| <b>9</b>   | 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             |     | No |
| <b>10</b>  | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V  |     | No |
| <b>11</b>  | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.   |     |    |
| <b>11a</b> | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI   |     | No |
| <b>11b</b> | Did the organization report an amount for investments—other securities—in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII   |     | No |
| <b>11c</b> | Did the organization report an amount for investments—program related—in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII   |     | No |
| <b>11d</b> | 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  |     | No |
| <b>11e</b> | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X   |     | No |
| <b>11f</b> | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X  |     | No |
| <b>12a</b> | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII  | Yes |    |
| <b>12b</b> | Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional   | Yes |    |
| <b>13</b>  | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E   |     | No |
| <b>14a</b> | Did the organization maintain an office, employees, or agents outside of the United States?   |     | No |
| <b>14b</b> | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV | Yes |    |
| <b>15</b>  | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV  |     | No |
| <b>16</b>  | 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  | Yes |    |
| <b>17</b>  | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)   |     | No |
| <b>18</b>  | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II  |     | No |
| <b>19</b>  | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III  |     | No |
| <b>20a</b> | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H   |     | No |
| <b>20b</b> | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  |     |    |
| <b>21</b>  | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II   | Yes |    |

**Part IV Checklist of Required Schedules (continued)**

|            |  | Yes     | No |
|------------|--|---------|----|
| <b>22</b>  | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> . . . . .   | 22 Yes  |    |
| <b>23</b>  | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> . . . . .  | 23 Yes  |    |
| <b>24a</b> | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> . . . . .  | 24a     | No |
| <b>b</b>   | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .  | 24b     |    |
| <b>c</b>   | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .   | 24c     |    |
| <b>d</b>   | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . . .  | 24d     |    |
| <b>25a</b> | <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> . . . . .   | 25a     | No |
| <b>b</b>   | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> . . . . .   | 25b     | No |
| <b>26</b>  | Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> . . . . .   | 26      | No |
| <b>27</b>  | Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> . . . . . | 27      | No |
| <b>28</b>  | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):  |         |    |
| <b>a</b>   | A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .  | 28a Yes |    |
| <b>b</b>   | A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .   | 28b     | No |
| <b>c</b>   | A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .   | 28c Yes |    |
| <b>29</b>  | Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . . .  | 29 Yes  |    |
| <b>30</b>  | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . .  | 30 Yes  |    |
| <b>31</b>  | Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>  | 31      | No |
| <b>32</b>  | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .  | 32      | No |
| <b>33</b>  | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> . . . . .  | 33      | No |
| <b>34</b>  | Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> . . . . .  | 34 Yes  |    |
| <b>35a</b> | Did the organization have a controlled entity within the meaning of section 512(b)(13)?  | 35a Yes |    |
| <b>b</b>   | If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .   | 35b Yes |    |
| <b>36</b>  | <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .   | 36      | No |
| <b>37</b>  | 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? <i>If "Yes," complete Schedule R, Part VI</i> . . . . .   | 37      | No |
| <b>38</b>  | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O. . . . .   | 38 Yes  |    |

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

|           |  | Yes      | No |
|-----------|--|----------|----|
| <b>1a</b> | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable . . . . .   | 1a 1,590 |    |
| <b>b</b>  | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . . . . .  | 1b 0     |    |
| <b>c</b>  | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . . | 1c       | No |

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Main form area containing questions 2a through 16, including sub-questions like 2b, 3a, 3b, 4a, 4b, 5a, 5b, 5c, 6a, 6b, 7a, 7b, 7c, 7d, 7e, 7f, 7g, 7h, 8, 9a, 9b, 10a, 10b, 11a, 11b, 12a, 12b, 13a, 13b, 13c, 14a, 14b, 15, and 16.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI



Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?; 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body?; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

Table with 3 columns: Question, Yes, No. Rows include: 17 List the states with which a copy of this Form 990 is required to be filed; 18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website, Another's website, Upon request, Other (explain in Schedule O); 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.; 20 State the name, address, and telephone number of the person who possesses the organization's books and records: FRACTURED ATLAS INC 228 PARK AVENUE SOUTH 56651 NEW YORK, NY 10003 (212) 277-8020

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

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

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

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See 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 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

| (A)<br>Name and title                        | (B)<br>Average hours per week (list any hours for related organizations below dotted line) | (C)<br>Position (do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |         | (D)<br>Reportable compensation from the organization (W-2/1099-MISC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|--|--|---|-----------------------|---------|--------------|------------------------------|---------|--|---|---|
|  |  | Individual trustee or director  | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former  |  |   |   |
| (1) SHAWN ANDERSON<br>CTO/BOARD ME           | 40.00  | X   |                       | X       |              |                              | 170,420 | 0  | 8,521   |   |
| (2) TIM CYNNOVA<br>CO-CEO/BOARD              | 40.00  | X   |                       | X       |              |                              | 164,543 | 0  | 8,227   |   |
| (3) PALLAVI SHARMA<br>CPO/BOARD ME           | 40.00  | X   |                       | X       |              |                              | 170,420 | 0  | 0   |   |
| (4) LAUREN RUFFIN<br>CERO/BOARD M            | 40.00  | X   |                       | X       |              |                              | 164,543 | 0  | 0   |   |
| (5) RAMPHIS CASTRO<br>BOARD MEMBER           |  | X   |                       |         |              |                              | 0       | 0  | 0   |   |
| (6) MUKTI KHAIRE<br>BOARD MEMBER             |  | X   |                       |         |              |                              | 0       | 0  | 0   |   |
| (7) CHRISTOPHER J MACKIE PHD<br>BOARD MEMBER |  | X   |                       |         |              |                              | 0       | 0  | 0   |   |
| (8) ELIZABETH SCOTT<br>TREASURER             |  | X   |                       | X       |              |                              | 0       | 0  | 0   |   |
| (9) HOLLY SIDFORD<br>VICE CHAIR              |  | X   |                       | X       |              |                              | 0       | 0  | 0   |   |
| (10) E ANDREW TAYLOR<br>BOARD MEMBER         |  | X   |                       |         |              |                              | 0       | 0  | 0   |   |
| (11) RUSSELL WILLIS TAYLOR<br>CHAIR          |  | X   |                       | X       |              |                              | 0       | 0  | 0   |   |
| (12) LISA YANCEY<br>SECRETARY                |  | X   |                       | X       |              |                              | 0       | 0  | 0   |   |
|  |  |   |                       |         |              |                              |         |  |   |   |
|  |  |   |                       |         |              |                              |         |  |   |   |
|  |  |   |                       |         |              |                              |         |  |   |   |
|  |  |   |                       |         |              |                              |         |  |   |   |

**Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** *(continued)*

| (A)<br>Name and title | (B)<br>Average hours per week (list any hours for related organizations below dotted line) | (C)<br>Position (do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |        | (D)<br>Reportable compensation from the organization (W-2/1099-MISC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|-----------------------|--|---|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
|                       |  | Individual trustee or director  | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former |  |   |   |
|                       |  |   |                       |         |              |                              |        |  |   |   |
|                       |  |   |                       |         |              |                              |        |  |   |   |
|                       |  |   |                       |         |              |                              |        |  |   |   |
|                       |  |   |                       |         |              |                              |        |  |   |   |
|                       |  |   |                       |         |              |                              |        |  |   |   |
|                       |  |   |                       |         |              |                              |        |  |   |   |
|                       |  |   |                       |         |              |                              |        |  |   |   |
|                       |  |   |                       |         |              |                              |        |  |   |   |
|                       |  |   |                       |         |              |                              |        |  |   |   |
|                       |  |   |                       |         |              |                              |        |  |   |   |
|                       |  |   |                       |         |              |                              |        |  |   |   |
|                       |  |   |                       |         |              |                              |        |  |   |   |
|                       |  |   |                       |         |              |                              |        |  |   |   |
|                       |  |   |                       |         |              |                              |        |  |   |   |
|                       |  |   |                       |         |              |                              |        |  |   |   |
|                       |  |   |                       |         |              |                              |        |  |   |   |
|                       |  |   |                       |         |              |                              |        |  |   |   |
|                       |  |   |                       |         |              |                              |        |  |   |   |
|                       |  |   |                       |         |              |                              |        |  |   |   |
|                       |  |   |                       |         |              |                              |        |  |   |   |
|                       |  |   |                       |         |              |                              |        |  |   |   |
|                       |  |   |                       |         |              |                              |        |  |   |   |
|                       |  |   |                       |         |              |                              |        |  |   |   |
|                       |  |   |                       |         |              |                              |        |  |   |   |
|                       |  |   |                       |         |              |                              |        |  |   |   |
|                       |  |   |                       |         |              |                              |        |  |   |   |
|                       |  |   |                       |         |              |                              |        |  |   |   |

|  |   |         |        |
|--|---|---------|--------|
| <b>1b Sub-Total</b> . . . . .  | ▶ |         |        |
| <b>c Total from continuation sheets to Part VII, Section A</b> . . . . . | ▶ |         |        |
| <b>d Total (add lines 1b and 1c)</b> . . . . .                           | ▶ | 669,926 | 16,748 |

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ **4**

|  | Yes | No |
|--|-----|----|
| <b>3</b> Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> . . . . .  |     | No |
| <b>4</b> 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? <i>If "Yes," complete Schedule J for such individual</i> . . . . . | Yes |    |
| <b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> . . . . .                       |     | No |

**Section B. Independent Contractors**

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

| (A)<br>Name and business address | (B)<br>Description of services | (C)<br>Compensation |
|----------------------------------|--------------------------------|---------------------|
|                                  |                                |                     |
|                                  |                                |                     |
|                                  |                                |                     |
|                                  |                                |                     |
|                                  |                                |                     |

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶



**Part VIII Statement of Revenue**

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

|   |  |   | (A)<br>Total revenue | (B)<br>Related or<br>exempt<br>function<br>revenue | (C)<br>Unrelated<br>business<br>revenue | (D)<br>Revenue<br>excluded from<br>tax under sections<br>512 - 514 |  |
|---|--|---|----------------------|--|---|--|--|
| <b>Contributions, Gifts, Grants and Other Similar Amounts</b>                 | <b>1a</b> Federated campaigns . . . . .  | <b>1a</b>   |                      |  |   |  |  |
|   | <b>b</b> Membership dues . . . . .   | <b>1b</b>   | 728,001              |  |   |  |  |
|   | <b>c</b> Fundraising events . . . . .  | <b>1c</b>   |                      |  |   |  |  |
|   | <b>d</b> Related organizations   | <b>1d</b>   |                      |  |   |  |  |
|   | <b>e</b> Government grants (contributions)   | <b>1e</b>   | 1,021,519            |  |   |  |  |
|   | <b>f</b> All other contributions, gifts, grants, and similar amounts not included above  | <b>1f</b>   | 22,838,210           |  |   |  |  |
|   | <b>g</b> Noncash contributions included in lines 1a - 1f:\$  | <b>1g</b>   | 844,333              |  |   |  |  |
|   | <b>h Total.</b> Add lines 1a-1f . . . . .  |   | 24,587,730           |  |   |  |  |
| <b>Program Service Revenue</b>  | <b>2a</b> PROGRAM SERVICE FEES   | Business Code   | 497,599              | 497,599  |   |  |  |
|   | <b>b</b> NON DEDUCTIBLE PORTION OF CON   |   | 102,151              | 102,151  |   |  |  |
|   | <b>c</b>   |   |                      |  |   |  |  |
|   | <b>d</b>   |   |                      |  |   |  |  |
|   | <b>e</b>   |   |                      |  |   |  |  |
|   | <b>f</b> All other program service revenue.  |   |                      |  |   |  |  |
|   | <b>g Total.</b> Add lines 2a-2f. . . . .   |   | 599,750              |  |   |  |  |
| <b>Other Revenue</b>  | <b>3</b> Investment income (including dividends, interest, and other similar amounts) . . . . .  |   | 191,364              |  |   | 191,364  |  |
|   | <b>4</b> Income from investment of tax-exempt bond proceeds  |   |                      |  |   |  |  |
|   | <b>5</b> Royalties . . . . .   |   |                      |  |   |  |  |
|   | <b>6a</b> Gross rents  | (i) Real  | (ii) Personal        |  |   |  |  |
|   |  | <b>6a</b>   |                      |  |   |  |  |
|   |  | <b>b</b> Less: rental expenses                        | <b>6b</b>            |  |   |  |  |
|   |  | <b>c</b> Rental income or (loss)                      | <b>6c</b>            |  |   |  |  |
|   | <b>d</b> Net rental income or (loss) . . . . .   |   |                      |  |   |  |  |
|   | <b>7a</b> Gross amount from sales of assets other than inventory   | (i) Securities  | (ii) Other           | 4,643,696  |   |  |  |
|   |  | <b>7a</b>   |                      |  |   |  |  |
|   |  | <b>b</b> Less: cost or other basis and sales expenses | <b>7b</b>            | 4,258,148  | 30,909                                  |  |  |
|   |  | <b>c</b> Gain or (loss)                               | <b>7c</b>            | 385,548  | -30,909                                 |  |  |
|   | <b>d</b> Net gain or (loss) . . . . .  |   | 354,639              | 354,639  |   |  |  |
|   | <b>8a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 . . . . . |   |                      |  |   |  |  |
|   |  | <b>8a</b>   |                      |  |   |  |  |
| <b>b</b> Less: direct expenses . . . . .                                      | <b>8b</b>  |   |                      |  |   |  |  |
| <b>c</b> Net income or (loss) from fundraising events . . . . .               |  |   |                      |  |   |  |  |
| <b>9a</b> Gross income from gaming activities. See Part IV, line 19 . . . . . |  |   |                      |  |   |  |  |
|   | <b>9a</b>  |   |                      |  |   |  |  |
| <b>b</b> Less: direct expenses . . . . .                                      | <b>9b</b>  |   |                      |  |   |  |  |
| <b>c</b> Net income or (loss) from gaming activities . . . . .                |  |   |                      |  |   |  |  |
| <b>10a</b> Gross sales of inventory, less returns and allowances . . . . .    |  |   |                      |  |   |  |  |
|   | <b>10a</b>   |   |                      |  |   |  |  |
| <b>b</b> Less: cost of goods sold . . . . .                                   | <b>10b</b>   |   |                      |  |   |  |  |
| <b>c</b> Net income or (loss) from sales of inventory . . . . .               |  |   |                      |  |   |  |  |
| Miscellaneous Revenue   | Business Code  |   |                      |  |   |  |  |
| <b>11a</b> MISCELLANEOUS  |  | 409   | 409                  |  |   |  |  |
| <b>b</b>  |  |   |                      |  |   |  |  |
| <b>c</b>  |  |   |                      |  |   |  |  |
| <b>d</b> All other revenue . . . . .  |  |   |                      |  |   |  |  |
| <b>e Total.</b> Add lines 11a-11d . . . . .                                   |  | 409   |                      |  |   |  |  |
| <b>12 Total revenue.</b> See instructions . . . . .                           |  | 25,733,892  | 954,798              |  | 191,364                                 |  |  |

**Part IX Statement of Functional Expenses**

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

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

| <b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>   | <b>(A)</b><br>Total expenses | <b>(B)</b><br>Program service expenses | <b>(C)</b><br>Management and general expenses | <b>(D)</b><br>Fundraising expenses |
|---|------------------------------|--|---|------------------------------------|
| <b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . . . . .   | 12,499,407                   | 12,499,407                             |   |                                    |
| <b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22 . . . . .  | 7,029,964                    | 7,029,964                              |   |                                    |
| <b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16. . . . .  | 77,798                       | 77,798                                 |   |                                    |
| <b>4</b> Benefits paid to or for members . . . . .  |                              |  |   |                                    |
| <b>5</b> Compensation of current officers, directors, trustees, and key employees . . . . .   |                              |  |   |                                    |
| <b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .  |                              |  |   |                                    |
| <b>7</b> Other salaries and wages . . . . .   | 2,488,865                    | 1,617,762                              | 373,330                                       | 497,773                            |
| <b>8</b> Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions) . . . . .  | 86,071                       | 55,946                                 | 12,911  | 17,214                             |
| <b>9</b> Other employee benefits . . . . .  | 169,677                      | 110,290                                | 25,451  | 33,936                             |
| <b>10</b> Payroll taxes . . . . .   | 178,751                      | 116,188                                | 26,813  | 35,750                             |
| <b>11</b> Fees for services (non-employees):  |                              |  |   |                                    |
| <b>a</b> Management . . . . .   |                              |  |   |                                    |
| <b>b</b> Legal . . . . .  | 44,320                       | 31,239                                 | 5,606   | 7,475                              |
| <b>c</b> Accounting . . . . .   | 16,100                       | 10,465                                 | 2,415   | 3,220                              |
| <b>d</b> Lobbying . . . . .   |                              |  |   |                                    |
| <b>e</b> Professional fundraising services. See Part IV, line 17  |                              |  |   |                                    |
| <b>f</b> Investment management fees . . . . .   |                              |  |   |                                    |
| <b>g</b> Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)   | 507,966                      | 393,399                                | 49,427  | 65,140                             |
| <b>12</b> Advertising and promotion . . . . .   | 128,869                      | 84,593                                 | 18,975  | 25,301                             |
| <b>13</b> Office expenses . . . . .   | 19,591                       | 13,221                                 | 2,730   | 3,640                              |
| <b>14</b> Information technology . . . . .  |                              |  |   |                                    |
| <b>15</b> Royalties . . . . .   |                              |  |   |                                    |
| <b>16</b> Occupancy . . . . .   | 140,206                      | 91,134                                 | 21,031  | 28,041                             |
| <b>17</b> Travel . . . . .  | 28,745                       | 21,893                                 | 2,937   | 3,915                              |
| <b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .  |                              |  |   |                                    |
| <b>19</b> Conferences, conventions, and meetings . . . . .  |                              |  |   |                                    |
| <b>20</b> Interest . . . . .  |                              |  |   |                                    |
| <b>21</b> Payments to affiliates . . . . .  |                              |  |   |                                    |
| <b>22</b> Depreciation, depletion, and amortization . . . . .   | 26,461                       | 17,199                                 | 3,970   | 5,292                              |
| <b>23</b> Insurance . . . . .   | 14,399                       | 9,359                                  | 2,160   | 2,880                              |
| <b>24</b> Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)                                       |                              |  |   |                                    |
| <b>a</b> SERVICE CHARGES & PROCESS  | 322,728                      | 264,999                                | 24,741  | 32,988                             |
| <b>b</b> TELECOM & INTERNET   | 107,591                      | 71,760                                 | 15,356  | 20,475                             |
| <b>c</b> DUES & SUBSCRIPTIONS   | 98,830                       | 66,371                                 | 13,911  | 18,548                             |
| <b>d</b> LICENSES AND PERMITS   | 15,884                       | 11,395                                 | 1,924   | 2,565                              |
| <b>e</b> All other expenses   | 15,271                       | 10,303                                 | 2,129   | 2,839                              |
| <b>25</b> Total functional expenses. Add lines 1 through 24e  | 24,017,494                   | 22,604,685                             | 605,817                                       | 806,992                            |
| <b>26</b> Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). |                              |  |   |                                    |

**Part X Balance Sheet**

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

|   |  | (A)<br>Beginning of year |            | (B)<br>End of year |
|---|--|--------------------------|------------|--------------------|
| <b>Assets</b>   | <b>1</b> Cash—non-interest-bearing . . . . .   | 2,588,748                | <b>1</b>   | 2,674,035          |
|   | <b>2</b> Savings and temporary cash investments . . . . .  |                          | <b>2</b>   |                    |
|   | <b>3</b> Pledges and grants receivable, net . . . . .  |                          | <b>3</b>   |                    |
|   | <b>4</b> Accounts receivable, net . . . . .  | 221,668                  | <b>4</b>   | 159,432            |
|   | <b>5</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons . . . . .  |                          | <b>5</b>   |                    |
|   | <b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) . . . . .   |                          | <b>6</b>   |                    |
|   | <b>7</b> Notes and loans receivable, net . . . . .   |                          | <b>7</b>   |                    |
|   | <b>8</b> Inventories for sale or use . . . . .   |                          | <b>8</b>   |                    |
|   | <b>9</b> Prepaid expenses and deferred charges . . . . .   |                          | <b>9</b>   |                    |
|   | <b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D   | <b>10a</b>               |            |                    |
|   | <b>b</b> Less: accumulated depreciation  | <b>10b</b>               | 46,244     | <b>10c</b>         |
|   | <b>11</b> Investments—publicly traded securities . . . . .   | 9,312,300                | <b>11</b>  | 11,711,396         |
|   | <b>12</b> Investments—other securities. See Part IV, line 11 . . . . .   |                          | <b>12</b>  |                    |
|   | <b>13</b> Investments—program-related. See Part IV, line 11 . . . . .  |                          | <b>13</b>  |                    |
|   | <b>14</b> Intangible assets . . . . .  | 466,259                  | <b>14</b>  | 455,134            |
|   | <b>15</b> Other assets. See Part IV, line 11 . . . . .   | 819,575                  | <b>15</b>  | 69,284             |
| <b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .   | 13,454,794   | <b>16</b>                | 15,069,281 |                    |
| <b>Liabilities</b>  | <b>17</b> Accounts payable and accrued expenses . . . . .  | 326,694                  | <b>17</b>  | 38,862             |
|   | <b>18</b> Grants payable . . . . .   |                          | <b>18</b>  |                    |
|   | <b>19</b> Deferred revenue . . . . .   |                          | <b>19</b>  |                    |
|   | <b>20</b> Tax-exempt bond liabilities . . . . .  |                          | <b>20</b>  |                    |
|   | <b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D  |                          | <b>21</b>  |                    |
|   | <b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons . . . . . |                          | <b>22</b>  |                    |
|   | <b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .   |                          | <b>23</b>  |                    |
|   | <b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .   |                          | <b>24</b>  |                    |
| <b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D | 202,500  | <b>25</b>                |            |                    |
| <b>26 Total liabilities.</b> Add lines 17 through 25 . . . . .  | 529,194  | <b>26</b>                | 38,862     |                    |
| <b>Net Assets or Fund Balances</b>  | <b>Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.</b>   |                          |            |                    |
|   | <b>27</b> Net assets without donor restrictions . . . . .  | -165,707                 | <b>27</b>  | 295,277            |
|   | <b>28</b> Net assets with donor restrictions . . . . .   | 13,091,307               | <b>28</b>  | 14,735,142         |
|   | <b>Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.</b>  |                          |            |                    |
|   | <b>29</b> Capital stock or trust principal, or current funds . . . . .   |                          | <b>29</b>  |                    |
|   | <b>30</b> Paid-in or capital surplus, or land, building or equipment fund . . . . .  |                          | <b>30</b>  |                    |
|   | <b>31</b> Retained earnings, endowment, accumulated income, or other funds   |                          | <b>31</b>  |                    |
| <b>32</b> Total net assets or fund balances . . . . .   | 12,925,600   | <b>32</b>                | 15,030,419 |                    |
| <b>33</b> Total liabilities and net assets/fund balances . . . . .  | 13,454,794   | <b>33</b>                | 15,069,281 |                    |

**Part XI Reconciliation of Net Assets**

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

|           |  |           |            |
|-----------|--|-----------|------------|
| <b>1</b>  | Total revenue (must equal Part VIII, column (A), line 12)  | <b>1</b>  | 25,733,892 |
| <b>2</b>  | Total expenses (must equal Part IX, column (A), line 25)   | <b>2</b>  | 24,017,494 |
| <b>3</b>  | Revenue less expenses. Subtract line 2 from line 1   | <b>3</b>  | 1,716,398  |
| <b>4</b>  | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))                      | <b>4</b>  | 12,925,600 |
| <b>5</b>  | Net unrealized gains (losses) on investments   | <b>5</b>  | 388,421    |
| <b>6</b>  | Donated services and use of facilities   | <b>6</b>  | 50,247     |
| <b>7</b>  | Investment expenses  | <b>7</b>  |            |
| <b>8</b>  | Prior period adjustments   | <b>8</b>  |            |
| <b>9</b>  | Other changes in net assets or fund balances (explain in Schedule O)   | <b>9</b>  | -50,247    |
| <b>10</b> | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) | <b>10</b> | 15,030,419 |

**Part XII Financial Statements and Reporting**

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

- 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 in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?  
 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?  
 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:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- c** If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

|           | Yes | No |
|-----------|-----|----|
| <b>2a</b> |     | No |
| <b>2b</b> | Yes |    |
| <b>2c</b> | Yes |    |
| <b>3a</b> |     | No |
| <b>3b</b> |     |    |

## Additional Data

**Software ID:**

**Software Version:**

**EIN:** 11-3451703

**Name:** FRACTURED ATLAS INC

Form 990 (2019)

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**Form 990, Part III, Line 4a:**

FRACTURED ATLAS, INC. CURRENTLY SERVES AS FISCAL SPONSOR TO OVER 3,750 ART GROUPS AND INDEPENDENT ARTISTS IN ALL DISCIPLINES ACROSS THE COUNTRY. BEYOND THE ANNUAL MEMBERSHIP DUES, THERE IS NO ADDITIONAL FEE TO APPLY, AND THE PROGRAM CHARGES A LOW 8% ADMIN FEE ON ALL FUNDS RAISED. CHARACTERIZED BY EFFICIENT ONLINE ACCESS AND ARTISTIC AUTONOMY, FRACTURED ATLAS SPONSORSHIP PROGRAM GOES BEYOND BASIC FISCAL OVERSIGHT TO PROVIDE A VARIETY OF TECHNICAL ASSISTANCE TOOLS THAT BUILD CAPACITY AND SUSTAINABILITY AMONG EMERGING ARTISTS AND ART ORGANIZATIONS.

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**Form 990, Part III, Line 4b:**

PROCESSING CONSULTATION/NO OBJECTION LETTERS FOR O & P VISAS FOR INDIVIDUALS APPLYING TO WORK AS ARTISTS IN THE UNITED STATES.

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**Form 990, Part III, Line 4c:**

ARTFULLY IS AN ONLINE SYSTEM TO MANAGE TICKETS, DONATIONS, AND CONTACTS. IT'S A SIMPLE, STREAMLINED WAY TO ARTISTS AND ARTS ORGANIZATIONS TO KEEP TRACK OF THEIR EVENTS AND CONNECT WITH PEOPLE WHO SUPPORT THEIR WORK.

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**SCHEDULE A**  
(Form 990 or 990-EZ)

**Public Charity Status and Public Support**  
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.  
▶ Attach to Form 990 or Form 990-EZ.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047  
**2019**  
**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

**Name of the organization**  
FRACTURED ATLAS INC

**Employer identification number**  
11-3451703

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

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

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2  A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9  An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:
- 10  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
  - f Enter the number of supported organizations . . . . . \_\_\_\_\_
  - g Provide the following information about the supported organization(s).

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



**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization failed to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

| Calendar year (or fiscal year beginning in) ▶ |  | (a) 2015   | (b) 2016   | (c) 2017   | (d) 2018   | (e) 2019   | (f) Total   |
|---|--|------------|------------|------------|------------|------------|-------------|
| <b>1</b>                                      | Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . . . .  | 19,997,281 | 23,201,947 | 24,974,010 | 27,451,046 | 24,587,730 | 120,212,014 |
| <b>2</b>                                      | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .  |            |            |            |            |            |             |
| <b>3</b>                                      | The value of services or facilities furnished by a governmental unit to the organization without charge.. . . .  |            |            |            |            |            |             |
| <b>4</b>                                      | <b>Total.</b> Add lines 1 through 3  | 19,997,281 | 23,201,947 | 24,974,010 | 27,451,046 | 24,587,730 | 120,212,014 |
| <b>5</b>                                      | The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f). . . . . |            |            |            |            |            |             |
| <b>6</b>                                      | <b>Public support.</b> Subtract line 5 from line 4.  |            |            |            |            |            | 120,212,014 |

**Section B. Total Support**

| Calendar year (or fiscal year beginning in) ▶ |  | (a) 2015   | (b) 2016   | (c) 2017   | (d) 2018   | (e) 2019   | (f) Total   |
|---|--|------------|------------|------------|------------|------------|-------------|
| <b>7</b>                                      | Amounts from line 4. . . . .   | 19,997,281 | 23,201,947 | 24,974,010 | 27,451,046 | 24,587,730 | 120,212,014 |
| <b>8</b>                                      | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . . | 165,591    | 142,677    | 190,836    | 215,107    | 191,364    | 905,575     |
| <b>9</b>                                      | Net income from unrelated business activities, whether or not the business is regularly carried on . . . . .                             |            |            |            |            |            |             |
| <b>10</b>                                     | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). . . . .                                 |            |            |            |            |            |             |
| <b>11</b>                                     | <b>Total support.</b> Add lines 7 through 10   |            |            |            |            |            | 121,117,589 |
| <b>12</b>                                     | Gross receipts from related activities, etc. (see instructions) . . . . .  |            |            |            |            | <b>12</b>  | 1,522,236   |

**13 First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . .

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

|           |  |           |          |
|-----------|--|-----------|----------|
| <b>14</b> | Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) . . . . . | <b>14</b> | 99.250 % |
| <b>15</b> | Public support percentage for 2018 Schedule A, Part II, line 14 . . . . .                        | <b>15</b> | 99.230 % |

- 16a 33 1/3% support test—2019.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . .
- b 33 1/3% support test—2018.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . .
- 17a 10%-facts-and-circumstances test—2019.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . .
- b 10%-facts-and-circumstances test—2018.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . .
- 18 Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . .

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

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

**Section A. Public Support**

| Calendar year<br>(or fiscal year beginning in) ▶ |  | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
|--|--|----------|----------|----------|----------|----------|-----------|
| <b>1</b>   | Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .   |          |          |          |          |          |           |
| <b>2</b>   | Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose |          |          |          |          |          |           |
| <b>3</b>   | Gross receipts from activities that are not an unrelated trade or business under section 513 . . . . .   |          |          |          |          |          |           |
| <b>4</b>   | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. . .   |          |          |          |          |          |           |
| <b>5</b>   | The value of services or facilities furnished by a governmental unit to the organization without charge  |          |          |          |          |          |           |
| <b>6</b>   | <b>Total.</b> Add lines 1 through 5  |          |          |          |          |          |           |
| <b>7a</b>  | Amounts included on lines 1, 2, and 3 received from disqualified persons   |          |          |          |          |          |           |
| <b>b</b>   | Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.          |          |          |          |          |          |           |
| <b>c</b>   | Add lines 7a and 7b. . . . .   |          |          |          |          |          |           |
| <b>8</b>   | <b>Public support.</b> (Subtract line 7c from line 6.)   |          |          |          |          |          |           |

**Section B. Total Support**

| Calendar year<br>(or fiscal year beginning in) ▶ |   | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
|--|---|----------|----------|----------|----------|----------|-----------|
| <b>9</b>   | Amounts from line 6. . . . .  |          |          |          |          |          |           |
| <b>10a</b>                                       | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. . . |          |          |          |          |          |           |
| <b>b</b>   | Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.                            |          |          |          |          |          |           |
| <b>c</b>   | Add lines 10a and 10b.  |          |          |          |          |          |           |
| <b>11</b>  | Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.        |          |          |          |          |          |           |
| <b>12</b>  | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . .                           |          |          |          |          |          |           |
| <b>13</b>  | <b>Total support.</b> (Add lines 9, 10c, 11, and 12.) . . . . .   |          |          |          |          |          |           |

**14 First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here.** . . . . .

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

|           |  |           |  |
|-----------|--|-----------|--|
| <b>15</b> | Public support percentage for 2019 (line 8, column (f) divided by line 13, column (f)) . . . . . | <b>15</b> |  |
| <b>16</b> | Public support percentage from 2018 Schedule A, Part III, line 15 . . . . .                      | <b>16</b> |  |

**Section D. Computation of Investment Income Percentage**

|           |  |           |  |
|-----------|--|-----------|--|
| <b>17</b> | Investment income percentage for <b>2019</b> (line 10c, column (f) divided by line 13, column (f)) . . . . . | <b>17</b> |  |
| <b>18</b> | Investment income percentage from <b>2018</b> Schedule A, Part III, line 17 . . . . .                        | <b>18</b> |  |

**19a 33 1/3% support tests—2019.** 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—2018.** 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 . . . . .

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

**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

|            |  | Yes | No |
|------------|--|-----|----|
| <b>1</b>   | Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>   |     |    |
|            | <b>1</b>   |     |    |
| <b>2</b>   | Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>  |     |    |
|            | <b>2</b>   |     |    |
| <b>3a</b>  | Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>   |     |    |
|            | <b>3a</b>  |     |    |
| <b>b</b>   | Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>  |     |    |
|            | <b>3b</b>  |     |    |
| <b>c</b>   | Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>   |     |    |
|            | <b>3c</b>  |     |    |
| <b>4a</b>  | Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>   |     |    |
|            | <b>4a</b>  |     |    |
| <b>b</b>   | Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>   |     |    |
|            | <b>4b</b>  |     |    |
| <b>c</b>   | Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>  |     |    |
|            | <b>4c</b>  |     |    |
| <b>5a</b>  | Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i> |     |    |
|            | <b>5a</b>  |     |    |
| <b>b</b>   | <b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?   |     |    |
|            | <b>5b</b>  |     |    |
| <b>c</b>   | <b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?  |     |    |
|            | <b>5c</b>  |     |    |
| <b>6</b>   | Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>   |     |    |
|            | <b>6</b>   |     |    |
| <b>7</b>   | Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) .</i>   |     |    |
|            | <b>7</b>   |     |    |
| <b>8</b>   | Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>   |     |    |
|            | <b>8</b>   |     |    |
| <b>9a</b>  | Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>  |     |    |
|            | <b>9a</b>  |     |    |
| <b>b</b>   | Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>   |     |    |
|            | <b>9b</b>  |     |    |
| <b>c</b>   | Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>  |     |    |
|            | <b>9c</b>  |     |    |
| <b>10a</b> | Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>   |     |    |
|            | <b>10a</b>   |     |    |
| <b>b</b>   | Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).</i>  |     |    |
|            | <b>10b</b>   |     |    |

**Part IV Supporting Organizations** (continued)

|           |   | Yes | No |
|-----------|---|-----|----|
| <b>11</b> | Has the organization accepted a gift or contribution from any of the following persons?   |     |    |
| <b>a</b>  | A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization? |     |    |
| <b>b</b>  | A family member of a person described in (a) above?   |     |    |
| <b>c</b>  | A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>  |     |    |

**Section B. Type I Supporting Organizations**

|          |  | Yes | No |
|----------|--|-----|----|
| <b>1</b> | Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>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 directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i> |     |    |
| <b>2</b> | Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>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.</i>  |     |    |

**Section C. Type II Supporting Organizations**

|          |   | Yes | No |
|----------|---|-----|----|
| <b>1</b> | 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)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i> |     |    |

**Section D. All Type III Supporting Organizations**

|          |  | Yes | No |
|----------|--|-----|----|
| <b>1</b> | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? |     |    |
| <b>2</b> | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>  |     |    |
| <b>3</b> | By reason of the relationship described in (2), 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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>  |     |    |

**Section E. Type III Functionally-Integrated Supporting Organizations**

|          |  |     |    |
|----------|--|-----|----|
| <b>1</b> | Check the box next to the method that the organization used to satisfy the Integral Part Test during the year ( <b>see instructions</b> ):   |     |    |
| <b>a</b> | <input type="checkbox"/> The organization satisfied the Activities Test. Complete <b>line 2</b> below.   |     |    |
| <b>b</b> | <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.  |     |    |
| <b>c</b> | <input type="checkbox"/> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see instructions)   |     |    |
| <b>2</b> | Activities Test. <b>Answer (a) and (b) below.</b>  |     |    |
| <b>a</b> | Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i> | Yes | No |
| <b>b</b> | Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>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.</i>  |     |    |
| <b>3</b> | Parent of Supported Organizations. <b>Answer (a) and (b) below.</b>  |     |    |
| <b>a</b> | Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>  |     |    |
| <b>b</b> | Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>  |     |    |

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

- 1**  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

| <b>Section A - Adjusted Net Income</b>  |  | (A) Prior Year | (B) Current Year<br>(optional) |
|---|--|----------------|--------------------------------|
| <b>1</b>                                | Net short-term capital gain  | <b>1</b>       |                                |
| <b>2</b>                                | Recoveries of prior-year distributions   | <b>2</b>       |                                |
| <b>3</b>                                | Other gross income (see instructions)  | <b>3</b>       |                                |
| <b>4</b>                                | Add lines 1 through 3  | <b>4</b>       |                                |
| <b>5</b>                                | Depreciation and depletion   | <b>5</b>       |                                |
| <b>6</b>                                | 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) | <b>6</b>       |                                |
| <b>7</b>                                | Other expenses (see instructions)  | <b>7</b>       |                                |
| <b>8</b>                                | <b>Adjusted Net Income</b> (subtract lines 5, 6 and 7 from line 4)   | <b>8</b>       |                                |
| <b>Section B - Minimum Asset Amount</b> |  | (A) Prior Year | (B) Current Year<br>(optional) |
| <b>1</b>                                | Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):  | <b>1</b>       |                                |
| <b>a</b>                                | Average monthly value of securities  | <b>1a</b>      |                                |
| <b>b</b>                                | Average monthly cash balances  | <b>1b</b>      |                                |
| <b>c</b>                                | Fair market value of other non-exempt-use assets   | <b>1c</b>      |                                |
| <b>d</b>                                | <b>Total</b> (add lines 1a, 1b, and 1c)  | <b>1d</b>      |                                |
| <b>e</b>                                | <b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI):  |                |                                |
| <b>2</b>                                | Acquisition indebtedness applicable to non-exempt use assets   | <b>2</b>       |                                |
| <b>3</b>                                | Subtract line 2 from line 1d   | <b>3</b>       |                                |
| <b>4</b>                                | Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).  | <b>4</b>       |                                |
| <b>5</b>                                | Net value of non-exempt-use assets (subtract line 4 from line 3)   | <b>5</b>       |                                |
| <b>6</b>                                | Multiply line 5 by .035  | <b>6</b>       |                                |
| <b>7</b>                                | Recoveries of prior-year distributions   | <b>7</b>       |                                |
| <b>8</b>                                | <b>Minimum Asset Amount</b> (add line 7 to line 6)   | <b>8</b>       |                                |
| <b>Section C - Distributable Amount</b> |  |                | Current Year                   |
| <b>1</b>                                | Adjusted net income for prior year (from Section A, line 8, Column A)  | <b>1</b>       |                                |
| <b>2</b>                                | Enter 85% of line 1  | <b>2</b>       |                                |
| <b>3</b>                                | Minimum asset amount for prior year (from Section B, line 8, Column A)   | <b>3</b>       |                                |
| <b>4</b>                                | Enter greater of line 2 or line 3  | <b>4</b>       |                                |
| <b>5</b>                                | Income tax imposed in prior year   | <b>5</b>       |                                |
| <b>6</b>                                | <b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)   | <b>6</b>       |                                |
| <b>7</b>                                | <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)                                 |                |                                |

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** (continued)

| <b>Section D - Distributions</b>   | <b>Current Year</b> |
|--|---------------------|
| <b>1</b> Amounts paid to supported organizations to accomplish exempt purposes   |                     |
| <b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity             |                     |
| <b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations   |                     |
| <b>4</b> Amounts paid to acquire exempt-use assets   |                     |
| <b>5</b> Qualified set-aside amounts (prior IRS approval required)   |                     |
| <b>6</b> Other distributions (describe in <b>Part VI</b> ). See instructions   |                     |
| <b>7 Total annual distributions.</b> Add lines 1 through 6.  |                     |
| <b>8</b> Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions |                     |
| <b>9</b> Distributable amount for 2019 from Section C, line 6  |                     |
| <b>10</b> Line 8 amount divided by Line 9 amount   |                     |

| <b>Section E - Distribution Allocations</b><br>(see instructions)  | <b>(i)</b><br><b>Excess Distributions</b> | <b>(ii)</b><br><b>Underdistributions</b><br><b>Pre-2019</b> | <b>(iii)</b><br><b>Distributable</b><br><b>Amount for 2019</b> |
|--|---|---|--|
| <b>1</b> Distributable amount for 2019 from Section C, line 6  |   |   |  |
| <b>2</b> Underdistributions, if any, for years prior to 2019 (reasonable cause required-- explain in <b>Part VI</b> ). See instructions.   |   |   |  |
| <b>3</b> Excess distributions carryover, if any, to 2019:  |   |   |  |
| <b>a</b> From 2014. . . . .  |   |   |  |
| <b>b</b> From 2015. . . . .  |   |   |  |
| <b>c</b> From 2016. . . . .  |   |   |  |
| <b>d</b> From 2017. . . . .  |   |   |  |
| <b>e</b> From 2018. . . . .  |   |   |  |
| <b>f Total</b> of lines 3a through e   |   |   |  |
| <b>g</b> Applied to underdistributions of prior years  |   |   |  |
| <b>h</b> Applied to 2019 distributable amount  |   |   |  |
| <b>i</b> Carryover from 2014 not applied (see instructions)  |   |   |  |
| <b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from 3f.   |   |   |  |
| <b>4</b> Distributions for 2019 from Section D, line 7:  |   |   |  |
| \$   |   |   |  |
| <b>a</b> Applied to underdistributions of prior years  |   |   |  |
| <b>b</b> Applied to 2019 distributable amount  |   |   |  |
| <b>c</b> Remainder. Subtract lines 4a and 4b from 4.   |   |   |  |
| <b>5</b> Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in <b>Part VI</b> . See instructions. |   |   |  |
| <b>6</b> Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in <b>Part VI</b> . See instructions.                        |   |   |  |
| <b>7 Excess distributions carryover to 2020.</b> Add lines 3j and 4c.  |   |   |  |
| <b>8</b> Breakdown of line 7:  |   |   |  |
| <b>a</b> Excess from 2015. . . . .   |   |   |  |
| <b>b</b> Excess from 2016. . . . .   |   |   |  |
| <b>c</b> Excess from 2017. . . . .   |   |   |  |
| <b>d</b> Excess from 2018. . . . .   |   |   |  |
| <b>e</b> Excess from 2019. . . . .   |   |   |  |

## Additional Data

**Software ID:**

**Software Version:**

**EIN:** 11-3451703

**Name:** FRACTURED ATLAS INC

**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).

**Facts And Circumstances Test**

**SCHEDULE C**  
(Form 990 or 990-EZ)  
  
Department of the Treasury  
Internal Revenue Service

**Political Campaign and Lobbying Activities**  
For Organizations Exempt From Income Tax Under section 501(c) and section 527  
  
▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.  
▶Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047  
  
**2019**  
**Open to Public Inspection**

**If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then**

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

**If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then**

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

**If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then**

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

|   |  |
|---|--|
| Name of the organization<br>FRACTURED ATLAS INC | Employer identification number<br>11-3451703 |
|---|--|

**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

**1** Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")

**2** Political campaign activity expenditures (see instructions) ..... ▶ \$ \_\_\_\_\_

**3** Volunteer hours for political campaign activities (see instructions) .....

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

**1** Enter the amount of any excise tax incurred by the organization under section 4955 ..... ▶ \$ \_\_\_\_\_

**2** Enter the amount of any excise tax incurred by organization managers under section 4955 ..... ▶ \$ \_\_\_\_\_

**3** If the organization incurred a section 4955 tax, did it file Form 4720 for this year? .....  Yes  No

**4a** Was a correction made? .....  Yes  No

**b** If "Yes," describe in Part IV.

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

**1** Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_

**2** Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_

**3** Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b..... ▶ \$ \_\_\_\_\_

**4** Did the filing organization file **Form 1120-POL** for this year? .....  Yes  No

**5** Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

| (a) Name | (b) Address | (c) EIN | (d) Amount paid from filing organization's funds. If none, enter -0-. | (e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-. |
|----------|-------------|---------|---|--|
| 1        |             |         |   |  |
| 2        |             |         |   |  |
| 3        |             |         |   |  |
| 4        |             |         |   |  |
| 5        |             |         |   |  |
| 6        |             |         |   |  |



**Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

- A** Check  if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check  if the filing organization checked box A and "limited control" provisions apply.

| <b>Limits on Lobbying Expenditures</b><br>(The term "expenditures" means amounts paid or incurred.)  | (a) Filing organization's totals                                       | (b) Affiliated group totals |
|--|--|-----------------------------|
| <b>1a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying) .....   |  |                             |
| <b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying) .....   |  |                             |
| <b>c</b> Total lobbying expenditures (add lines 1a and 1b) .....   |  |                             |
| <b>d</b> Other exempt purpose expenditures .....   |  |                             |
| <b>e</b> Total exempt purpose expenditures (add lines 1c and 1d) .....   |  |                             |
| <b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.  |  |                             |
| <b>If the amount on line 1e, column (a) or (b) is:</b>   | <b>The lobbying nontaxable amount is:</b>                              |                             |
| Not over \$500,000   | 20% of the amount on line 1e.  |                             |
| Over \$500,000 but not over \$1,000,000  | \$100,000 plus 15% of the excess over \$500,000.                       |                             |
| Over \$1,000,000 but not over \$1,500,000  | \$175,000 plus 10% of the excess over \$1,000,000.                     |                             |
| Over \$1,500,000 but not over \$17,000,000   | \$225,000 plus 5% of the excess over \$1,500,000.                      |                             |
| Over \$17,000,000  | \$1,000,000.   |                             |
| <b>g</b> Grassroots nontaxable amount (enter 25% of line 1f) .....   |  |                             |
| <b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0- .....   |  |                             |
| <b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0- .....   |  |                             |
| <b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ..... | <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> |                             |

**4-Year Averaging Period Under Section 501(h)**  
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

**Lobbying Expenditures During 4-Year Averaging Period**

| Calendar year (or fiscal year beginning in)                      | (a) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) Total |
|--|----------|----------|----------|----------|-----------|
| <b>2a</b> Lobbying nontaxable amount                             | 2,000    |          |          |          | 2,000     |
| <b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))    |          |          |          |          | 3,000     |
| <b>c</b> Total lobbying expenditures                             |          |          |          |          |           |
| <b>d</b> Grassroots nontaxable amount                            | 600      |          |          |          | 600       |
| <b>e</b> Grassroots ceiling amount (150% of line 2d, column (e)) |          |          |          |          | 900       |
| <b>f</b> Grassroots lobbying expenditures                        |          |          |          |          |           |

**Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

|  | (a) |    | (b)    |
|--|-----|----|--------|
|  | Yes | No | Amount |
| <b>1</b> During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: |     |    |        |
| <b>a</b> Volunteers? .....   |     |    |        |
| <b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? .....  |     |    |        |
| <b>c</b> Media advertisements? .....   |     |    |        |
| <b>d</b> Mailings to members, legislators, or the public? .....  |     |    |        |
| <b>e</b> Publications, or published or broadcast statements? .....   |     |    |        |
| <b>f</b> Grants to other organizations for lobbying purposes? .....  |     |    |        |
| <b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body? .....   |     |    |        |
| <b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .....   |     |    |        |
| <b>i</b> Other activities? .....   |     |    |        |
| <b>j</b> Total. Add lines 1c through 1i .....  |     |    |        |
| <b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? .....  |     |    |        |
| <b>b</b> If "Yes," enter the amount of any tax incurred under section 4912 .....   |     |    |        |
| <b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .....  |     |    |        |
| <b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? .....  |     |    |        |

**Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

|  | Yes      | No |
|--|----------|----|
| <b>1</b> Were substantially all (90% or more) dues received nondeductible by members? .....                      | <b>1</b> |    |
| <b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less? .....                 | <b>2</b> |    |
| <b>3</b> Did the organization agree to carry over lobbying and political expenditures from the prior year? ..... | <b>3</b> |    |

**Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."**

|   |           |  |
|---|-----------|--|
| <b>1</b> Dues, assessments and similar amounts from members .....   | <b>1</b>  |  |
| <b>2</b> Section 162(e) nondeductible lobbying and political expenditures <b>(do not include amounts of political expenses for which the section 527(f) tax was paid).</b>  |           |  |
| <b>a</b> Current year .....   | <b>2a</b> |  |
| <b>b</b> Carryover from last year .....   | <b>2b</b> |  |
| <b>c</b> Total .....  | <b>2c</b> |  |
| <b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .  | <b>3</b>  |  |
| <b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? ..... | <b>4</b>  |  |
| <b>5</b> Taxable amount of lobbying and political expenditures (see instructions) .....   | <b>5</b>  |  |

**Part IV Supplemental Information**

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

| Return Reference             | Explanation  |
|------------------------------|--|
| SCHEDULE C, PART I-A, LINE 1 | IN PRIOR YEARS, FRACTURED ATLAS WORKED THROUGH LOBBY EFFORTS AT THE NEW YORK CITY AND NEW YORK STATE LEVEL TO EDUCATE POLICYMAKERS ABOUT THE IMPORTANCE OF CULTURAL SECTOR INFRASTRUCTURE AND FUNDING ON LOCAL, STATE, AND FEDERAL LEVELS. WE HAVE LOBBIED FOR POLICIES AND LEGISLATION THAT WILL HELP ARTISTS AND ARTS ORGANIZATIONS MAKE WORK AND CONTRIBUTE TO THEIR COMMUNITIES. DURING THIS FISCAL YEAR, FRACTURED ATLAS DID NOT WORK WITH ANY LOBBYING SERVICES. |

**SCHEDULE D**  
(Form 990)  
  
Department of the Treasury  
Internal Revenue Service

# Supplemental Financial Statements

OMB No. 1545-0047  
**2019**  
**Open to Public Inspection**

▶ 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.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

**Name of the organization**  
FRACTURED ATLAS INC

**Employer identification number**  
11-3451703

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

|   | (a) Donor advised funds | (b) Funds and other accounts |
|---|-------------------------|------------------------------|
| 1 Total number at end of year . . . . .             |                         |                              |
| 2 Aggregate value of contributions to (during year) |                         |                              |
| 3 Aggregate value of grants from (during year)      |                         |                              |
| 4 Aggregate value at end of year . . . . .          |                         |                              |

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . .  Yes  No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? . . . . .  Yes  No

**Part II Conservation Easements.**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or education)  Preservation of an historically important land area

Protection of natural habitat  Preservation of a certified historic structure

Preservation of open space

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

|  | Held at the End of the Year |
|--|-----------------------------|
| a Total number of conservation easements . . . . .   | 2a                          |
| b Total acreage restricted by conservation easements . . . . .   | 2b                          |
| c Number of conservation easements on a certified historic structure included in (a) . . . . .   | 2c                          |
| d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register . . . . . | 2d                          |

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

4 Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? . . . . .  Yes  No

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

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? . . . . .  Yes  No

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

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 . . . . . ▶ \$ \_\_\_\_\_

(ii) Assets included in Form 990, Part X . . . . . ▶ \$ \_\_\_\_\_

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1 . . . . . ▶ \$ \_\_\_\_\_

b Assets included in Form 990, Part X . . . . . ▶ \$ \_\_\_\_\_

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a**  Public exhibition
  - b**  Scholarly research
  - c**  Preservation for future generations
  - d**  Loan or exchange programs
  - e**  Other .....
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . .  **Yes**  **No**

**Part IV Escrow and Custodial Arrangements.**

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

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? . . . . .  **Yes**  **No**
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- |  | Amount    |
|--|-----------|
| <b>c</b> Beginning balance . . . . .             | <b>1c</b> |
| <b>d</b> Additions during the year . . . . .     | <b>1d</b> |
| <b>e</b> Distributions during the year . . . . . | <b>1e</b> |
| <b>f</b> Ending balance . . . . .                | <b>1f</b> |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . .  **Yes**  **No**
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII . . . .

**Part V Endowment Funds.**

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

|   | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four years back |
|---|------------------|----------------|--------------------|----------------------|---------------------|
| <b>1a</b> Beginning of year balance . . . . .                     |                  |                |                    |                      |                     |
| <b>b</b> Contributions . . . . .                                  |                  |                |                    |                      |                     |
| <b>c</b> Net investment earnings, gains, and losses               |                  |                |                    |                      |                     |
| <b>d</b> Grants or scholarships . . . . .                         |                  |                |                    |                      |                     |
| <b>e</b> Other expenditures for facilities and programs . . . . . |                  |                |                    |                      |                     |
| <b>f</b> Administrative expenses . . . . .                        |                  |                |                    |                      |                     |
| <b>g</b> End of year balance . . . . .                            |                  |                |                    |                      |                     |

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment ▶ .....
  - b** Permanent endowment ▶ .....
  - c** Temporarily restricted endowment ▶ .....
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |  | Yes           | No |
|--|---------------|----|
| <b>(i)</b> unrelated organizations . . . . .   | <b>3a(i)</b>  |    |
| <b>(ii)</b> related organizations . . . . .  | <b>3a(ii)</b> |    |
| <b>b</b> If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? . . . . . | <b>3b</b>     |    |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

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

| Description of property         | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|---------------------------------|--------------------------------------|---------------------------------|------------------------------|----------------|
| <b>1a</b> Land . . . . .        |                                      |                                 |                              |                |
| <b>b</b> Buildings . . . . .    |                                      |                                 |                              |                |
| <b>c</b> Leasehold improvements |                                      |                                 |                              |                |
| <b>d</b> Equipment . . . . .    |                                      |                                 |                              |                |
| <b>e</b> Other . . . . .        |                                      |                                 |                              |                |

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

**Part VII Investments—Other Securities.**

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

| (a) Description of security or category<br>(including name of security)   | (b) Book value | (c) Method of valuation:<br>Cost or end-of-year market value |
|---|----------------|--|
| (1) Financial derivatives . . . . .                                       |                |  |
| (2) Closely-held equity interests . . . . .                               |                |  |
| (3) Other _____   |                |  |
| (A)   |                |  |
| (B)   |                |  |
| (C)   |                |  |
| (D)   |                |  |
| (E)   |                |  |
| (F)   |                |  |
| (G)   |                |  |
| (H)   |                |  |
| <b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.) |                |  |

**Part VIII Investments—Program Related.**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

| (a) Description of investment  | (b) Book value | (c) Method of valuation:<br>Cost or end-of-year market value |
|--|----------------|--|
| (1)  |                |  |
| (2)  |                |  |
| (3)  |                |  |
| (4)  |                |  |
| (5)  |                |  |
| (6)  |                |  |
| (7)  |                |  |
| (8)  |                |  |
| (9)  |                |  |
| <b>Total.</b> (Column (b) must equal Form 990, Part X, col.(B) line 13.) |                |  |

**Part IX Other Assets.**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

| (a) Description  | (b) Book value |
|--|----------------|
| (1)  |                |
| (2)  |                |
| (3)  |                |
| (4)  |                |
| (5)  |                |
| (6)  |                |
| (7)  |                |
| (8)  |                |
| (9)  |                |
| <b>Total.</b> (Column (b) must equal Form 990, Part X, col.(B) line 15.) |                |

**Part X Other Liabilities.**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

| (a) Description of liability   | (b) Book value |
|--|----------------|
| <b>1.</b> (1) Federal income taxes                                       |                |
| (2)  |                |
| (3)  |                |
| (4)  |                |
| (5)  |                |
| (6)  |                |
| (7)  |                |
| (8)  |                |
| (9)  |                |
| <b>Total.</b> (Column (b) must equal Form 990, Part X, col.(B) line 25.) |                |

**2.** Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

|          |  |           |          |                     |
|----------|--|-----------|----------|---------------------|
| <b>1</b> | Total revenue, gains, and other support per audited financial statements . . . . .                       |           | <b>1</b> | 26,172,560          |
| <b>2</b> | Amounts included on line 1 but not on Form 990, Part VIII, line 12:                                      |           |          |                     |
| <b>a</b> | Net unrealized gains (losses) on investments . . . . .   | <b>2a</b> | 388,421  |                     |
| <b>b</b> | Donated services and use of facilities . . . . .   | <b>2b</b> | 50,247   |                     |
| <b>c</b> | Recoveries of prior year grants . . . . .  | <b>2c</b> |          |                     |
| <b>d</b> | Other (Describe in Part XIII.) . . . . .   | <b>2d</b> |          |                     |
| <b>e</b> | Add lines <b>2a</b> through <b>2d</b> . . . . .  |           |          | <b>2e</b> 438,668   |
| <b>3</b> | Subtract line <b>2e</b> from line <b>1</b> . . . . .   |           |          | <b>3</b> 25,733,892 |
| <b>4</b> | Amounts included on Form 990, Part VIII, line 12, but not on line 1:                                     |           |          |                     |
| <b>a</b> | Investment expenses not included on Form 990, Part VIII, line 7b . . . . .                               | <b>4a</b> |          |                     |
| <b>b</b> | Other (Describe in Part XIII.) . . . . .   | <b>4b</b> |          |                     |
| <b>c</b> | Add lines <b>4a</b> and <b>4b</b> . . . . .  |           |          | <b>4c</b>           |
| <b>5</b> | Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.) . . . . . |           |          | <b>5</b> 25,733,892 |

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

|          |   |           |          |                     |
|----------|---|-----------|----------|---------------------|
| <b>1</b> | Total expenses and losses per audited financial statements . . . . .                                      |           | <b>1</b> | 24,067,741          |
| <b>2</b> | Amounts included on line 1 but not on Form 990, Part IX, line 25:   |           |          |                     |
| <b>a</b> | Donated services and use of facilities . . . . .  | <b>2a</b> | 50,247   |                     |
| <b>b</b> | Prior year adjustments . . . . .  | <b>2b</b> |          |                     |
| <b>c</b> | Other losses . . . . .  | <b>2c</b> |          |                     |
| <b>d</b> | Other (Describe in Part XIII.) . . . . .  | <b>2d</b> |          |                     |
| <b>e</b> | Add lines <b>2a</b> through <b>2d</b> . . . . .   |           |          | <b>2e</b> 50,247    |
| <b>3</b> | Subtract line <b>2e</b> from line <b>1</b> . . . . .  |           |          | <b>3</b> 24,017,494 |
| <b>4</b> | Amounts included on Form 990, Part IX, line 25, but not on line 1:  |           |          |                     |
| <b>a</b> | Investment expenses not included on Form 990, Part VIII, line 7b . . . . .                                | <b>4a</b> |          |                     |
| <b>b</b> | Other (Describe in Part XIII.) . . . . .  | <b>4b</b> |          |                     |
| <b>c</b> | Add lines <b>4a</b> and <b>4b</b> . . . . .   |           |          | <b>4c</b>           |
| <b>5</b> | Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.) . . . . . |           |          | <b>5</b> 24,017,494 |

**Part XIII Supplemental Information**

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

| Return Reference | Explanation |  |
|------------------|-------------|--|
|------------------|-------------|--|

**Part XIII** **Supplemental Information (continued)**

| Return Reference | Explanation |
|------------------|-------------|
|------------------|-------------|

**SCHEDULE F  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Statement of Activities Outside the United States**

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.  
▶ Attach to Form 990.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2019**

**Open to Public Inspection**

Name of the organization  
FRACTURED ATLAS INC

**Employer identification number**  
11-3451703

**Part I** **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

- 1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3** Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

| (a) Region  | (b) Number of offices in the region | (c) Number of employees, agents, and independent contractors in the region | (d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service(s) in the region | (f) Total expenditures for and investments in the region |
|---|-------------------------------------|--|--|--|--|
| See Add'l Data  |                                     |  |  |  |  |
|   |                                     |  |  |  |  |
|   |                                     |  |  |  |  |
|   |                                     |  |  |  |  |
| <b>3a</b> Sub-total . . . . .                               | 10                                  | 10   |  |  | 73,998   |
| <b>b</b> Total from continuation sheets to Part I . . . . . |                                     |  |  |  |  |
| <b>c Totals</b> (add lines 3a and 3b)                       | 10                                  | 10   |  |  | 73,998   |



**Part II Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

| 1 (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of noncash assistance | (h) Description of noncash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|----------------------------|--|------------|----------------------|--------------------------|---------------------------------|----------------------------------|---------------------------------------|---|
|                            |  |            |                      |                          |                                 |                                  |                                       |   |
|                            |  |            |                      |                          |                                 |                                  |                                       |   |
|                            |  |            |                      |                          |                                 |                                  |                                       |   |
|                            |  |            |                      |                          |                                 |                                  |                                       |   |

- 2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . ▶ \_\_\_\_\_
- 3 Enter total number of other organizations or entities . . . . . ▶ \_\_\_\_\_



**Part IV Foreign Forms**

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* . . . . .  Yes  No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* . . . . .  Yes  No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)* . . . . .  Yes  No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* .  Yes  No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* . . . . .  Yes  No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990).* . . . . .  Yes  No

**Part V Supplemental Information**

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

**990 Schedule F, Supplemental Information**

| Return Reference                      | Explanation  |
|---------------------------------------|--|
| SCHEDULE F, PAGE 1,<br>PART I, LINE 3 | CANADA 4,386 0 COLUMBIA 330 0 ISRAEL 10,400 0 UNITED KINGDOM 22,916 0 SLOVENIA 2,740 0 PUERTO RICO 4,660 0<br>SWEDEN 856 0 SPAIN 10 0 ITALY 27,600 0 NETHERLANDS 100 0 |

## 990 Schedule F, Supplemental Information

| Return Reference           | Explanation   |
|----------------------------|---|
| SCHEDULE F, PAGE 5, PART V | WHETHER THE FUNDED ARTIST IS OUTSIDE OR INSIDE THE UNITED STATES, THE PROCEDURE IS THE SAME. FRACTURED ATLAS REQUIRES SUPPORT FROM THE ARTIST FOR GRANT MONEY RELEASED TO THE ARTIST. |

## Additional Data

**Software ID:**

**Software Version:**

**EIN:** 11-3451703

**Name:** FRACTURED ATLAS INC

### Form 990 Schedule F Part I - Activities Outside The United States

| (a) Region | (b) Number of offices in the region | (c) Number of employees or agents in region | (d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service(s) in region | (f) Total expenditures for region |
|------------|-------------------------------------|---|--|--|-----------------------------------|
| CANADA     | 1                                   | 1   | GRANTS TO RECIPIENT  |  | 4,386                             |
| COLUMBIA   | 1                                   | 1   | GRANTS TO RECIPIENT  |  | 330                               |

**Form 990 Schedule F Part I - Activities Outside The United States**

| (a) Region     | (b) Number of offices in the region | (c) Number of employees or agents in region | (d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service(s) in region | (f) Total expenditures for region |
|----------------|-------------------------------------|---|--|--|-----------------------------------|
| ISRAEL         | 1                                   | 1   | GRANTS TO RECIPIENT  |  | 10,400                            |
| UNITED KINGDOM | 1                                   | 1   | GRANTS TO RECIPIENT  |  | 22,916                            |

**Form 990 Schedule F Part I - Activities Outside The United States**

| (a) Region  | (b) Number of offices in the region | (c) Number of employees or agents in region | (d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service(s) in region | (f) Total expenditures for region |
|-------------|-------------------------------------|---|--|--|-----------------------------------|
| SLOVENIA    | 1                                   | 1   | GRANTS TO RECIPIENT  |  | 2,740                             |
| PUERTO RICO | 1                                   | 1   | GRANTS TO RECIPIENT  |  | 4,660                             |



**Form 990 Schedule F Part I - Activities Outside The United States**

| (a) Region | (b) Number of offices in the region | (c) Number of employees or agents in region | (d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service(s) in region | (f) Total expenditures for region |
|------------|-------------------------------------|---|--|--|-----------------------------------|
| SWEDEN     | 1                                   | 1   | GRANTS TO RECIPIENT  |  | 856                               |
| SPAIN      | 1                                   | 1   | GRANTS TO RECIPIENT  |  | 10                                |

**Form 990 Schedule F Part I - Activities Outside The United States**

| (a) Region  | (b) Number of offices in the region | (c) Number of employees or agents in region | (d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service(s) in region | (f) Total expenditures for region |
|-------------|-------------------------------------|---|--|--|-----------------------------------|
| ITALY       | 1                                   | 1   | GRANT TO RECIPIENT   |  | 27,600                            |
| NETHERLANDS | 1                                   | 1   | GRANT TO RECIPIENT   |  | 100                               |

**Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S**

| (a) Type of grant or assistance | (b) Region | (c) Number of recipients | (d) Amount of cash grant | (e) Manner of cash disbursement | (f) Amount of non-cash assistance | (g) Description of non-cash assistance | (h) Method of valuation (book, FMV, appraisal, other) |
|---------------------------------|------------|--------------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| GRANTS FOR PROJECTS             | CANADA     | 3                        | 8,136                    |                                 |                                   |  |   |
| GRANTS FOR PROJECTS             | COLUMBIA   | 1                        | 330                      |                                 |                                   |  |   |

**Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S**

| (a) Type of grant or assistance | (b) Region | (c) Number of recipients | (d) Amount of cash grant | (e) Manner of cash disbursement | (f) Amount of non-cash assistance | (g) Description of non-cash assistance | (h) Method of valuation (book, FMV, appraisal, other) |
|---------------------------------|------------|--------------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| GRANTS FOR PROJECTS             | ISRAEL     | 2                        | 10,400                   |                                 |                                   |  |   |
| GRANTS FOR PROJECTS             | ITALY      | 1                        | 27,600                   |                                 |                                   |  |   |

**Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S**

| (a) Type of grant or assistance | (b) Region  | (c) Number of recipients | (d) Amount of cash grant | (e) Manner of cash disbursement | (f) Amount of non-cash assistance | (g) Description of non-cash assistance | (h) Method of valuation (book, FMV, appraisal, other) |
|---------------------------------|-------------|--------------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| GRANTS FOR PROJECTS             | PUERTO RICO | 1                        | 4,660                    |                                 |                                   |  |   |
| GRANTS FOR PROJECTS             | SPAIN       | 1                        | 10                       |                                 |                                   |  |   |

**Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S**

| (a) Type of grant or assistance | (b) Region     | (c) Number of recipients | (d) Amount of cash grant | (e) Manner of cash disbursement | (f) Amount of non-cash assistance | (g) Description of non-cash assistance | (h) Method of valuation (book, FMV, appraisal, other) |
|---------------------------------|----------------|--------------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| GRANTS FOR PROJECTS             | SWEDEN         | 2                        | 856                      |                                 |                                   |  |   |
| GRANTS FOR PROJECTS             | UNITED KINGDOM | 1                        | 22,916                   |                                 |                                   |  |   |

**Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S**

| (a) Type of grant or assistance | (b) Region  | (c) Number of recipients | (d) Amount of cash grant | (e) Manner of cash disbursement | (f) Amount of non-cash assistance | (g) Description of non-cash assistance | (h) Method of valuation (book, FMV, appraisal, other) |
|---------------------------------|-------------|--------------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| GRANTS FOR PROJECTS             | NETHERLANDS | 1                        | 100                      |                                 |                                   |  |   |

Note: To capture the full content of this document as Filed, please select landscape mode (11" x 8.5") when printing.

**Schedule I (Form 990)**

**Grants and Other Assistance to Organizations, Governments and Individuals in the United States**

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.  
 Attach to Form 990.  
 Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2019**

Open to Public Inspection

Department of the Treasury  
 Internal Revenue Service  
 Name of the organization  
 FRACTURED ATLAS INC

Employer identification number  
 11-3451703

**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

| (a) Name and address of organization or government | (b) EIN | (c) IRC section (if applicable) | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of noncash assistance | (h) Purpose of grant or assistance |
|--|---------|---------------------------------|--------------------------|-----------------------------------|---|---------------------------------------|------------------------------------|
| (1) See Additional Data                            |         |                                 |                          |                                   |   |                                       |                                    |
| (2)  |         |                                 |                          |                                   |   |                                       |                                    |
| (3)  |         |                                 |                          |                                   |   |                                       |                                    |
| (4)  |         |                                 |                          |                                   |   |                                       |                                    |
| (5)  |         |                                 |                          |                                   |   |                                       |                                    |
| (6)  |         |                                 |                          |                                   |   |                                       |                                    |
| (7)  |         |                                 |                          |                                   |   |                                       |                                    |
| (8)  |         |                                 |                          |                                   |   |                                       |                                    |
| (9)  |         |                                 |                          |                                   |   |                                       |                                    |
| (10)   |         |                                 |                          |                                   |   |                                       |                                    |
| (11)   |         |                                 |                          |                                   |   |                                       |                                    |
| (12)   |         |                                 |                          |                                   |   |                                       |                                    |

|   |   |     |
|---|---|-----|
| 2 | Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . | 48  |
| 3 | Enter total number of other organizations listed in the line 1 table . . . . .                            | 990 |



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

Part III can be duplicated if additional space is needed.

| (a) Type of grant or assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of noncash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of noncash assistance |
|---------------------------------|--------------------------|--------------------------|----------------------------------|---|---------------------------------------|
| (1) FISCAL SPONSORSHIP GRANT    | 1231                     | 7,029,964                |                                  |   |                                       |
| (2)                             |                          |                          |                                  |   |                                       |
| (3)                             |                          |                          |                                  |   |                                       |
| (4)                             |                          |                          |                                  |   |                                       |
| (5)                             |                          |                          |                                  |   |                                       |
| (6)                             |                          |                          |                                  |   |                                       |
| (7)                             |                          |                          |                                  |   |                                       |

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

| Return Reference                   | Explanation  |
|------------------------------------|--|
| SCHEDULE I, PAGE 1, PART I, LINE 2 | FRACTURED ATLAS REVIEWS INDIVIDUAL EXPENDITURES AND FUND RELEASE REQUESTS TO ENSURE COMPLIANCE WITH PROJECT PARAMETERS AND CHARITABLE MISSION. |

## Additional Data

**Software ID:**  
**Software Version:**  
**EIN:** 11-3451703  
**Name:** FRACTURED ATLAS INC

### Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| (a) Name and address of organization or government                   | (b) EIN    | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| 23 ELEPHANTS THEATRE COMPANY<br>PO BOX 1939<br>SAN ANSELMO, CA 94979 | 81-5011533 |                               | 11,939                   |                                   |   |  |                                    |
| 2D4D<br>7080 SW TIERRA DEL MAR DRIVE<br>BEAVERTON, OR 97007          | 83-2697631 |                               | 15,178                   |                                   |   |  |                                    |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                           | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| 8-BALL COMMUNITY INC<br>59 EAST 4TH ST<br>APT 7E<br>NEW YORK, NY 10003              | 81-3963763     |                                      | 11,837                          |  |  |   |   |
| A CAPPELLA ACADEMY<br>1880 CENTURY PARK EAST<br>SUITE 1600<br>LOS ANGELES, CA 90067 | 46-2987726     |                                      | 9,074                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                           | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| A MZUNGU FILM LLC<br>86 HORATIO ST<br>3D<br>NEW YORK, NY 10014                      | 81-0814793     |                                      | 11,415                          |  |  |   |   |
| A NIGHT OF FIREFLIES PRODUCTIONS<br>3254 34TH STREET 2ND FLOOR<br>ASTORIA, NY 11106 | 45-4662666     |                                      | 8,800                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government         | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| A&A BALLET<br>310 S MICHIGAN AVENUE<br>1904<br>CHICAGO, IL 60604  | 81-3341406     |                                      | 31,168                          |  |  |   |   |
| ACTING FOR KIDS AND TEENS<br>1633 NW GLISAN<br>PORTLAND, OR 97209 | 82-4589746     |                                      | 5,305                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                          | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| ACTIVE VERB LLC ERIN COLLEEN BUCKL<br>427 6TH STREET<br>4<br>BROOKLYN, NY 11215    | 84-4064951     |                                      | 19,370                          |  |  |   |   |
| ACTOR'S EXPRESS INC<br>887 WEST MARIETTA STREET<br>SUITE J-10<br>ATLANTA, GA 30318 | 58-1808173     |                                      | 7,821                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                  | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| ADAM MARKS INC<br>720 FORT WASHINGTON AVE<br>APT 1F<br>NEW YORK, NY 10040  | 83-1833137     |                                      | 6,584                           |  |  |   |   |
| AFRO HOUSE PRODUCTIONS<br>LLC<br>4431 HARCOURT ROAD<br>BALTIMORE, MD 21214 | 45-3950242     |                                      | 22,284                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government               | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| AH FILMS<br>2146 SW HARBOR PLACE<br>PORTLAND, OR 97201                  | 81-0964058     |                                      | 5,775                           |  |  |   |   |
| AI FOR THE PEOPLE<br>666 HANCOCK STREET<br>APT 1F<br>BROOKLYN, NY 11233 | 84-3671638     |                                      | 18,400                          |  |  |   |   |



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                    | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| ALOFT DANCE<br>3428 W MCLEAN<br>CHICAGO, IL 60647                            | 27-2819500     |                                      | 29,546                          |  |  |   |   |
| ALOHA FRIDAY GALLERY LLC<br>3212 LOULU STREET<br>UPPER<br>HONOLULU, HI 96822 | 81-4030388     |                                      | 8,078                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                                     | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| AMBASSABURGH MICROARTS<br>DBA PHILLT<br>12121 FRANKSTOWN AVE<br>PITTSBURGH, PA 15235          | 84-4019533     |                                      | 13,414                          |  |  |   |   |
| AMERICAN ABSTRACT ARTISTS<br>C/O GARY GOLKIN<br>594 BROADWAY SUITE 1102<br>NEW YORK, NY 10012 | 13-3389638     |                                      | 43,384                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government           | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| ANGELA HARRIELL<br>235 LEONARD STREET<br>4L<br>BROOKLYN, NY 11211   | 27-2792860     |                                      | 6,348                           |  |  |   |   |
| ANNA FRANTS<br>901 BRICKELL KEY BLVD<br>APT 3705<br>MIAMI, FL 33131 | 57-9173318     |                                      | 281,659                         |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                                      | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| APOYONLINE - ASSOCIATION FOR HERITA<br>11712 STONEWOOD LANE<br>ROCKVILLE, MD 20852             | 26-3676026     |                                      | 14,700                          |  |  |   |   |
| AREA CAPITAL LLC DBA THE WORLD AROU<br>65 EAST 55TH STREET<br>33RD FLOOR<br>NEW YORK, NY 10022 | 82-2963029     |                                      | 48,924                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government              | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| ARKANSASSTAGED<br>129 S GREGG<br>FAYETTEVILLE, AR 72701                | 81-4970940     |                                      | 19,811                          |  |  |   |   |
| AROESTE MUSIC LLC<br>57 GREEN RIVER VALLEY<br>ROAD<br>ALFORD, MA 01230 | 80-0009833     |                                      | 17,176                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                      | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| ART HANDLER MAGAZINE LLC<br>29 HALSEY STREET<br>APT 4<br>BROOKLYN, NY 11216    | 47-1633687     |                                      | 11,219                          |  |  |   |   |
| ARTICULATE THEATRE COMPANY LLC<br>379 LEFFERTS AVE<br>6A<br>BROOKLYN, NY 11225 | 46-4891932     |                                      | 16,150                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                       | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| ARTISAN GALLERY 218 LLC<br>218 5TH STREET<br>DES MOINES, IA 50265               | 47-5022557     |                                      | 5,589                           |  |  |   |   |
| ARTISTIC DREAMS<br>INTERNATIONAL INC<br>2753 BROADWAY 167<br>NEW YORK, NY 10025 | 45-2558520     |                                      | 9,200                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| ARTISTS AT PLAY LLC<br>PO BOX 572<br>ALHAMBRA, CA 91802                   | 46-5445311     |                                      | 5,717                           |  |  |   |   |
| ARTRAGEOUS WITH NATE LLC<br>326 N KENYON AVENUE<br>INDIANAPOLIS, IN 46219 | 45-5261857     |                                      | 48,950                          |  |  |   |   |



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| ARTS FOR ALL ABILITIES CONSORTIUM L<br>262 W 107 STREET<br>1C<br>NEW YORK, NY 10025 | 81-4976214     |                                      | 12,451                          |  |  |   |   |
| ARTSBLACK LLC<br>1099 PARKER<br>UNIT 2<br>DETROIT, MI 48214                         | 81-4397217     |                                      | 45,521                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| AS BALLET NEW YORK LTD<br>300 W 38TH ST<br>2E<br>NEW YORK, NY 10018          | 45-3031889     |                                      | 18,328                          |  |  |   |   |
| ASBURY PARK DANCE<br>FESTIVAL<br>96 FRANKLIN AVENUE<br>OCEAN GROVE, NJ 07756 | 83-3232264     |                                      | 10,932                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                               | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| ASPIRING YOUNG ARTISTS PROJECT<br>1324 SOUTH CLEVELAND STREET<br>PHILADELPHIA, PA 19146 | 81-2971664     |                                      | 5,985                           |  |  |   |   |
| ASSOCIATION OF ARTS ADMINISTRATION<br>37 KNEELAND STREET<br>CRANSTON, RI 02905          | 95-3416945     |                                      | 35,000                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| ASYLUM FILM<br>2425 GOLDEN RAIN ROAD<br>APARTMENT 3<br>WALNUT CREEK, CA 94595 | 84-2460592     |                                      | 9,300                           |  |  |   |   |
| ATLANTA ART PAPERS INC<br>PO BOX 5748<br>ATLANTA, GA 31107                    | 58-1404850     |                                      | 7,625                           |  |  |   |   |

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| ATLANTA CHAMBER PLAYERS INC<br>PO BOX 5438<br>ATLANTA, GA 31107                 | 58-1280281     |                                      | 5,002                           |  |  |   |   |
| ATLANTA CONTEMPORARY ART CENTER INC<br>535 MEANS STREET NW<br>ATLANTA, GA 30318 | 58-1174492     |                                      | 13,534                          |  |  |   |   |

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| ATLANTA PRESERVATION CENTER INC<br>327 ST PAUL AVENUE<br>ATLANTA, GA 30312            | 58-1387857     |                                      | 5,286                           |  |  |   |   |
| ATLANTA YOUNG SINGERS OF CALLANWOLD<br>1085 PONCE DE LEON AVENUE<br>ATLANTA, GA 30306 | 58-1249295     |                                      | 8,079                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| AUTOMAT LLC<br>319 N 11TH STREET<br>2I<br>PHILADELPHIA, PA 19107 | 47-3556508     |                                      | 5,232                           |  |  |   |   |
| AZILIA FILMS LLC<br>P O BOX 853<br>COLUMBUS, GA 31902            | 81-3556400     |                                      | 13,500                          |  |  |   |   |

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| BABOON BABOON LLC<br>2261 MOUNTAIN OAK DR<br>LOS ANGELES, CA 90068        | 84-2629660     |                                      | 46,500                          |  |  |   |   |
| BALLET AND BEYOND NYC INC<br>309 W 75TH ST<br>APT 5<br>NEW YORK, NY 10023 | 81-1705519     |                                      | 15,933                          |  |  |   |   |



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| <b>(a)</b> Name and address of organization or government       | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| BARCLAY BRASS<br>412 MARIETTA PL NW<br>WASHINGTON, DC 20011     | 81-1496387     |                                      | 9,862                           |  |  |   |   |
| BATTLE SOUNDS INC<br>68 JAY STREET<br>711<br>BROOKLYN, NY 11201 | 11-3487488     |                                      | 51,357                          |  |  |   |   |

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| BE MUSIC LLC DBA<br>CONSENSES<br>150 LAKE VIEW AVENUE<br>CAMBRIDGE, MA 02138  | 27-2938893     |                                      | 64,836                          |  |  |   |   |
| BENJAMIN HOLLIDAY<br>WARDELL<br>3508 W DIVERSEY AVE<br>2<br>CHICAGO, IL 60647 | 82-3773043     |                                      | 19,059                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                         | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| BESPOKEPLAYS LLC<br>9622 OLYMPIC BLVD<br>BEVERLY HILLS, CA 90212                  | 83-2002656     |                                      | 6,372                           |  |  |   |   |
| BEYOND CATEGORY<br>PRODUCTIONS LLC<br>739 MILFORD STREET<br>LOS ANGELES, CA 90042 | 82-5183409     |                                      | 19,328                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government              | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| BGSQD<br>113 HENRY ST<br>19<br>NEW YORK, NY 10002                      | 46-0848189     |                                      | 5,116                           |  |  |   |   |
| BIELLO MARTIN STUDIO LLC<br>148 N 3RD STREET<br>PHILADELPHIA, PA 19106 | 22-3928886     |                                      | 5,492                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                    | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| BIRCH HOUSE IMMERSIVE LLC<br>4838 N DAMEN AVE<br>UNIT 1<br>CHICAGO, IL 60625 | 37-1176311     |                                      | 5,345                           |  |  |   |   |
| BLACK THEATRE COMMONS<br>PO BOX 773<br>NEW YORK, NY 10108                    | 82-3372634     |                                      | 30,800                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                         | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| BLACK WOMXN FLOURISH LLC<br>2410 N CHARLES STREET<br>APT 2<br>BALTIMORE, MD 21218 | 85-0699007     |                                      | 7,225                           |  |  |   |   |
| BLOOMBARS<br>3222 11TH STREET NW<br>WASHINGTON, DC 20001                          | 27-0287369     |                                      | 15,800                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government  | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| BMOREART LLC<br>648 REGESTER AVENUE<br>BALTIMORE, MD 21212 | 46-2443453     |                                      | 226,090                         |  |  |   |   |
| BMOREART LLC<br>648 REGESTER AVENUE<br>BALTIMORE, MD 21212 | 46-2443453     |                                      | 19,490                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                  | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| BOSTON FESTIVAL ORCHESTRA<br>59A STRATHMORE RD APT 2<br>BRIGHTON, MA 02135 | 84-3601675     |                                      | 6,629                           |  |  |   |   |
| BRAIN CHANGE FILM LLC<br>422 ST MARKS AVE<br>BROOKLYN, NY 11238            | 80-3379871     |                                      | 29,697                          |  |  |   |   |



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                     | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| BRAND RENEWABLE LLC<br>6420 MAGENTA LANE<br>AUSTIN, TX 78739                  | 84-2453807     |                                      | 8,881                           |  |  |   |   |
| BROADWAY CHAMBER PLAYERS INC<br>101 W12TH STREET<br>10T<br>NEW YORK, NY 10011 | 46-4697187     |                                      | 9,452                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                             | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| BROOKLYN METAL WORKS<br>640 DEAN ST<br>FLOOR 2<br>BROOKLYN, NY 11238                  | 27-1417593     |                                      | 10,400                          |  |  |   |   |
| BROWN GIRL RECOVERY LLC<br>780 CONCOURSE VILLAGE<br>WEST<br>APT 9J<br>BRONX, NY 10451 | 81-5313698     |                                      | 95,690                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government  | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| BUILD-A-BAND MUSIC EDUCATION INC<br>545 LINCOLN HIGHWAY<br>BENNER BUILDING 2FLOOR<br>COATESVILLE, PA 19320 | 27-3013255     |                                      | 7,384                           |  |  |   |   |
| BUILDING BETTER PEOPLE PRODUCTIONS<br>PO BOX 5912<br>ANNAPOLIS, MD 21403                                   | 47-5127921     |                                      | 6,931                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                   | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| BUILDING PERFORMANCE WORKSHOP<br>PO BOX 87024<br>ATLANTA, GA 30337          | 26-4205528     |                                      | 9,305                           |  |  |   |   |
| BULLY MOVIE OUTREACH INC<br>38 MESEROLE STREET APT 2D<br>BROOKLYN, NY 11206 | 45-5570588     |                                      | 10,000                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| BULLY MOVIE OUTREACH INC<br>18 W 27TH ST 2ND FLOOR<br>NEW YORK, NY 10023 | 45-5570588     |                                      | 5,500                           |  |  |   |   |
| BURIED SEED PRODUCTIONS<br>3090 KING ST<br>BERKELEY, CA 94703            | 84-2592461     |                                      | 16,705                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government           | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| BURNAWAY INC<br>928 PONCE DE LEON AVENUE<br>NE<br>ATLANTA, GA 30306 | 27-1057775     |                                      | 6,003                           |  |  |   |   |
| CABINET OF CURIOSITY<br>211 S TAYLOR<br>OAK PARK, IL 60302          | 83-1316132     |                                      | 22,400                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government            | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| CAFE CIII LLC<br>103 WAVERLY PLACE<br>NEW YORK, NY 10011             | 13-4092564     |                                      | 13,250                          |  |  |   |   |
| CAPE DANCE FESTIVAL LLC<br>710 WARBURTON AVE 4D<br>YONKERS, NY 10701 | 46-2792328     |                                      | 14,034                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                 | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| CARDINAL LLC<br>1758 PARK AVENUE<br>BALTIMORE, MD 21217                   | 82-1595562     |                                      | 9,233                           |  |  |   |   |
| CASTLE OF OUR SKINS INC<br>7 BOWDOIN AVE<br>APT B<br>DORCHESTER, MA 02121 | 83-4164245     |                                      | 38,264                          |  |  |   |   |



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                   | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| CHAIR-O-PLANE MUSIC INC<br>400 WEST 43RD STREET<br>7M<br>NEW YORK, NY 10036 | 86-1100404     |                                      | 14,020                          |  |  |   |   |
| CHAPEL THEATER LLC<br>4107 SE HARRISON ST<br>MILWAUKIE, OR 97222            | 82-1455728     |                                      | 11,615                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| CHILDREN'S MUSEUM OF ATLANTA INC<br>275 CENTENNIAL OLYMPIC PARK DRIVE N<br>ATLANTA, GA 30313 | 58-1785484     |                                      | 5,100                           |  |  |   |   |
| CHOCONUT CREEK INC<br>PO BOX 517<br>TIVOLI, NY 12583   | 20-8501190     |                                      | 6,000                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| CINEVECTOR LLC<br>281 LEFFERTS AVENUE<br>2ND FLOOR<br>BROOKLYN, NY 11225 | 83-3332223     |                                      | 9,913                           |  |  |   |   |
| CIRCUSENSE<br>423 ATLANTIC AVE<br>1E<br>BROOKLYN, NY 11217               | 81-4566698     |                                      | 21,375                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| CLAPPING HANDS<br>3348 ALSTON CHAPEL ROAD<br>PITTSBORO, NC 27312             | 47-4098979     |                                      | 20,145                          |  |  |   |   |
| CLOCKS IN MOTION<br>PERCUSSION INC<br>1218 BAY RIDGE RD<br>MADISON, WI 53716 | 46-1481171     |                                      | 5,909                           |  |  |   |   |

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| COMBUSTION COLLECTIVE LLC<br>7 DEKALB AVE<br>APT 8H<br>BROOKLYN, NY 11201 | 83-1109888     |                                      | 11,719                          |  |  |   |   |
| COMMOTION - COMMUNITY IN MOTION<br>6704 WEIMER DRIVE<br>RALEIGH, NC 27617 | 84-4005067     |                                      | 7,211                           |  |  |   |   |

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| COMPLEXIONS PRODUCTIONS INC<br>22 WILSON DRIVE<br>NEW ROCHELLE, NY 10801   | 82-0836029     |                                      | 46,727                          |  |  |   |   |
| CONSTELLATIONS CHAMBER CONCERTS<br>1768 LANG PL NE<br>WASHINGTON, DC 20002 | 84-2885513     |                                      | 9,050                           |  |  |   |   |

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| COOPER-HEWITT NATIONAL DESIGN MUSE<br>2 EAST 91ST ST<br>NEW YORK, NY 10128 | 53-0206027     |                                      | 243,168                         |  |  |   |   |
| CREATENET STUDIO LLC<br>223 SECOND AVENUE<br>APT 3K<br>NEW YORK, NY 10003  | 47-3862048     |                                      | 16,590                          |  |  |   |   |

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| CREATIVE CATALYST LLC<br>434 BRODERICK STREET<br>SAN FRANCISCO, CA 94117 | 84-3329306     |                                      | 10,580                          |  |  |   |   |
| CREATIVE WRITING INC<br>12438 KILLION ST<br>VALLEY VILLAGE, CA 91607     | 95-4643017     |                                      | 13,500                          |  |  |   |   |



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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| CRENSHAW DAIRY MART LLC<br>8623 S CRENSHAW BLVD<br>INGLEWOOD, CA 90350 | 84-3149208     |                                      | 105,365                         |  |  |   |   |
| CRITICAL FREQUENCY LLC<br>PO BOX 277<br>KINGS BEACH, CA 96143          | 82-4661886     |                                      | 28,100                          |  |  |   |   |

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| CROCODILE RIVER MUSIC & MEDIA LLC<br>44 PORTLAND STREET<br>7TH FLOOR<br>WORCESTER, MA 01608 | 90-0762449     |                                      | 148,065                         |  |  |   |   |
| CULTUREHOUSE INCORPORATED<br>30 WALNUT STREET<br>SOMERVILLE, MA 02143                       | 84-2003390     |                                      | 31,907                          |  |  |   |   |

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| CULTUREHOUSE<br>INCORPORATED<br>30 WALNUT STREET<br>SOMERVILLE, MA 02143 | 84-2003390     |                                      | 5,382                           |  |  |   |   |
| CUTTIE PRODUCTIONS LLC<br>PO BOX 36120<br>DETROIT, MI 48236              | 45-2401295     |                                      | 9,862                           |  |  |   |   |

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| DADS GARAGE INC<br>569 EZZARD STREET SE<br>ATLANTA, GA 30312       | 58-2244770     |                                      | 6,736                           |  |  |   |   |
| DAFNISON MUSIC INC<br>5129 VAN BUREN STREET<br>HOLLYWOOD, FL 33021 | 26-2523288     |                                      | 33,145                          |  |  |   |   |

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| DANCE CANVAS INC<br>171 AUBURN AVENUE<br>ATLANTA, GA 30303 | 26-2425825     |                                      | 9,701                           |  |  |   |   |
| DANCE KIDS INC<br>PO BOX 6225<br>CARMEL, CA 93921          | 77-0334683     |                                      | 29,601                          |  |  |   |   |

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| DANSE THEATRE SURREALITY INC<br>5906 41ST AVE<br>APT 3<br>WOODSIDE, NY 11377    | 84-2174148     |                                      | 23,017                          |  |  |   |   |
| DARK STAR FROM HARLEM LLC<br>432 EAST 88TH STREET APT 408<br>NEW YORK, NY 10128 | 82-3203389     |                                      | 6,987                           |  |  |   |   |

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| <b>(a)</b> Name and address of organization or government                             | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| DEATH OF CLASSICAL LLC<br>4615 CENTER BOULEVARD<br>1908<br>LONG ISLAND CITY, NY 11109 | 83-2344591     |                                      | 25,625                          |  |  |   |   |
| DIE JIM CROW INC<br>636 KOSCIUSZKO ST<br>3R<br>BROOKLYN, NY 11221                     | 83-2361185     |                                      | 7,284                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                   | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| DIGITAL PILGRIM PRODUCTIONS LLC<br>139 MARVIN AVENUE<br>UNIONDALE, NY 11553 | 83-4486757     |                                      | 8,487                           |  |  |   |   |
| DIMENSIONAL DANCE LLC<br>32 FOXCROFT RUN<br>AVON, CT 06001                  | 61-1782218     |                                      | 9,198                           |  |  |   |   |



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                           | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| DIRECTORS GATHERING<br>3308 W QUEEN LN<br>PHILADELPHIA, PA 19129                    | 46-5215656     |                                      | 14,078                          |  |  |   |   |
| DISABILITY DANCE WORKS<br>LLC ALICE J<br>3995 PAGE MILL ROAD<br>LOS ALTOS, CA 94022 | 47-3772433     |                                      | 41,815                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| DNAWORKS LLC<br>1617 PARK PLACE AVE<br>SUITE 110<br>FORT WORTH, TX 76110 | 26-3181751     |                                      | 64,416                          |  |  |   |   |
| DO GOOD LLC<br>368 BROADWAY<br>512<br>NEW YORK, NY 10013                 | 47-2522555     |                                      | 54,671                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government             | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| DONKEYSADDLE PROJECTS<br>LLC<br>5932 42ND AVE SW<br>SEATTLE, WA 98136 | 30-1157615     |                                      | 94,362                          |  |  |   |   |
| DPICT LLC<br>117 WEST ST<br>EASTHAMPTON, MA 01027                     | 30-0663414     |                                      | 6,500                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| DRAG OUT THE VOTE<br>210 LEE BARTON DRIVE<br>STE 515<br>AUSTIN, TX 78704 | 84-4397686     |                                      | 20,804                          |  |  |   |   |
| DRAW TO HELP<br>77 BLUE DIAMOND LANE<br>COLUMBUS, NC 28722               | 32-0587483     |                                      | 5,544                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                    | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| EARSPEACE ENSEMBLE<br>2101 NELSON ST<br>RALEIGH, NC 27610                    | 81-3685131     |                                      | 14,703                          |  |  |   |   |
| EARTH AND AIR STRING<br>ORCHESTRA<br>33775 REDBRIDGE LANE<br>SOLON, OH 44139 | 83-2515222     |                                      | 5,500                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government   | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| ECLECTIC BREW<br>215A CARROLL STREET SE<br>ATLANTA, GA 30312  | 27-0359275     |                                      | 147,853                         |  |  |   |   |
| EDDIE ADAMS WORKSHOP<br>ORGANIZATION<br>POB 499<br>247 JEFFERSONVILLE NORTH<br>BRANCH ROA<br>JEFFERSONVILLE, NY 12748 | 83-4540185     |                                      | 29,381                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                                 | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| EDGE IN MOTION PRODUCTIONS LLC<br>318 WEST 47TH STREET<br>5TH FLOOR<br>NEW YORK, NY 10036 | 82-2633375     |                                      | 11,073                          |  |  |   |   |
| EIDIA HOUSE INC<br>426 EAST 9TH STREET 1C<br>NEW YORK, NY 10009                           | 56-2420211     |                                      | 15,706                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government      | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| ELISION PRODUCTIONS<br>3401 E VIA PALOMITA<br>TUCSON, AZ 85718 | 81-4094804     |                                      | 46,810                          |  |  |   |   |
| ELISION PRODUCTIONS<br>3401 E VIA PALOMITA<br>TUCSON, AZ 85718 | 81-4094804     |                                      | 7,098                           |  |  |   |   |



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government              | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| ELMIRA RAHIM<br>9400 NATIONAL BLVD<br>5<br>LOS ANGELES, CA 90034       | 83-2894882     |                                      | 7,904                           |  |  |   |   |
| ELYSIAN CAMERATA<br>1109 WALLACE DRIVE<br>FORT WASHINGTON, PA<br>19034 | 45-5104443     |                                      | 8,800                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government        | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| ENACT INC<br>630 NINTH AVENUE<br>SUITE 305<br>NEW YORK, NY 10036 | 13-3422660     |                                      | 14,172                          |  |  |   |   |
| ENCOURAGE MEDIA LLC<br>11 HALES ROAD<br>WESTPORT, CT 06880       | 83-1813057     |                                      | 18,798                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government       | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| ENDELCLOCK INC<br>411 ST JOHNS PL7<br>BROOKLYN, NY 11238        | 45-5491500     |                                      | 11,511                          |  |  |   |   |
| ENDLESS FIELD<br>72 ELMORE AVE<br>CROTON ON HUDSON, NY<br>10520 | 82-3876073     |                                      | 12,794                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government    | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| ENTER GRACE YOGA<br>311 WEST 127TH 406<br>NEW YORK, NY 10027 | 46-3649450     |                                      | 6,600                           |  |  |   |   |
| ESPERANZA DANCE PROJECT<br>PO BOX 90064<br>TUCSON, AZ 85752  | 82-2280520     |                                      | 15,180                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| EUREKA ENSEMBLE CORPORATION<br>3 GERRYS LANDING ROAD<br>CAMBRIDGE, MA 02138 | 81-4063626     |                                      | 28,365                          |  |  |   |   |
| EVIDENCE INC<br>1368 FULTON STREET<br>BROOKLYN, NY 11216                    | 11-3334921     |                                      | 7,200                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| FAITH MATTERS NETWORK LLC<br>PO BOX 120801<br>NASHVILLE, TN 37212 | 82-1994801     |                                      | 454,584                         |  |  |   |   |
| FILM ETC LLC<br>89-19 89 AVENUE<br>WOODHAVEN, NY 11421            | 46-1264876     |                                      | 7,000                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| FIREBOYS LLC<br>3785 PARKDALE ROAD<br>CLEVELAND HEIGHTS, OH<br>44121 | 81-3178560     |                                      | 10,712                          |  |  |   |   |
| FLEMING CONSULTING INC<br>10 RUTGERS ST<br>8H<br>NEW YORK, NY 10002  | 46-1795631     |                                      | 71,522                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| FLUX PROJECTS INC<br>575 BOULEVARD 30<br>ATLANTA, GA 30312  | 27-0347975     |                                      | 11,676                          |  |  |   |   |
| FOUNDATION FOR DIVERSITY<br>IN THE ART<br>APT 1D<br>255 WEST 108TH STREET<br>NEW YORK, NY 100252919 | 83-0687806     |                                      | 14,910                          |  |  |   |   |



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                     | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| FOUNDATION FOR DIVERSITY<br>IN THE ART<br>170 DARLING ROAD<br>SALEM, CT 06420 | 83-0687806     |                                      | 12,910                          |  |  |   |   |
| FOXHOG PRODUCTIONS<br>220 EAST 73RD STREET<br>5G<br>NEW YORK, NY 10021        | 81-0735143     |                                      | 43,799                          |  |  |   |   |

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| FREE RANGE HUMANS INC<br>145 WICOMICO CT<br>NEW MARKET, MD 21774               | 84-5014680     |                                      | 18,553                          |  |  |   |   |
| GARY INTERNATIONAL BLACK<br>FILM FESTI<br>6515 52ND AVE S<br>SEATTLE, WA 98118 | 27-3892089     |                                      | 8,955                           |  |  |   |   |

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| GAS GALLERY LLC<br>715 S NORMANDIE AVE<br>APT 405<br>LOS ANGELES, CA 90005 | 82-2549536     |                                      | 8,300                           |  |  |   |   |
| GATHERING ROOTS RETREAT LLC<br>2201 S MAIN ST APT 103<br>SEATTLE, WA 98144 | 84-3594171     |                                      | 34,214                          |  |  |   |   |

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| <b>(a)</b> Name and address of organization or government                                   | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| GEORGIA LAWYERS FOR THE ARTS<br>887 W MARIETTA STREET NW<br>SUITE J-10<br>ATLANTA, GA 30318 | 51-0141509     |                                      | 13,646                          |  |  |   |   |
| GLASS CEILINGS LLC<br>9730 HAYVENHURST AVE<br>NORTHRIDGE, CA 91343                          | 84-2249521     |                                      | 24,732                          |  |  |   |   |

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| GLO ATL INC<br>1054 KIRKWOOD AVE SE<br>ATLANTA, GA 30316                              | 27-0272642     |                                      | 9,387                           |  |  |   |   |
| GLORY EDIM WELL-READ<br>BLACK GIRL L<br>165 COURT STREET<br>208<br>BROOKLYN, NY 11201 | 81-4165668     |                                      | 7,300                           |  |  |   |   |

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| GOSTIA LLC<br>411 14TH AVE E<br>SEATTLE, WA 98112                       | 47-3724089     |                                      | 20,054                          |  |  |   |   |
| GRIFFIN THEATRE<br>CHRISTOPHER EVERET<br>142 BANFF ST<br>BEAR, DE 19701 | 84-2838224     |                                      | 10,649                          |  |  |   |   |

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| GRX IMMERSIVE LABS<br>17412 VENTURA BLVD<br>550<br>ENCINO, CA 91316                                | 83-1695649     |                                      | 81,682                          |  |  |   |   |
| GUAYAKI SUSTAINABLE<br>RAINFOREST PROJ<br>6782 SEBASTOPOL AVE<br>SUITE 100<br>SEBASTOPOL, CA 95472 | 77-0560794     |                                      | 23,726                          |  |  |   |   |

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| HAMLET ISN'T DEAD<br>425 E 75TH ST<br>1A<br>NEW YORK, NY 10021         | 46-2231944     |                                      | 8,597                           |  |  |   |   |
| HAPPENSTANCE THEATER INC<br>12718 VEIRS MILL RD<br>ROCKVILLE, MD 20853 | 20-4639247     |                                      | 34,640                          |  |  |   |   |



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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| HARLEM DANCE CLUB INC<br>2816 8TH AVE<br>6M<br>NEW YORK, NY 10039 | 82-1630347     |                                      | 8,060                           |  |  |   |   |
| HARLEM9 INC<br>141 WEST 128TH STREET<br>3<br>NEW YORK, NY 10027   | 47-4120850     |                                      | 14,000                          |  |  |   |   |

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| HARMONY IMAGE PRODUCTIONS INC<br>217 PELHAM ROAD<br>PHILADELPHIA, PA 19119 | 23-2916456     |                                      | 22,600                          |  |  |   |   |
| HARRISON HOUSE MUSIC ARTS & ECOLOG<br>PO BOX 416<br>JOSHUA TREE, CA 92252  | 81-2849984     |                                      | 116,947                         |  |  |   |   |

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| HELIAND CONSORT<br>PO BOX 15<br>300 BIRCH WAY<br>BAKERSFIELD, VT 05441             | 46-2943281     |                                      | 6,100                           |  |  |   |   |
| HIC INCIPIT PESTIS<br>PRODUCTIONS<br>117 PACIFIC ST<br>APT 4<br>BROOKLYN, NY 11201 | 84-3000413     |                                      | 7,715                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                             | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| HIP ENTERPRISES LLC<br>PO BOX 90645<br>SANTA BARBARA, CA 93190                        | 56-2507526     |                                      | 8,800                           |  |  |   |   |
| HOLD FOR SCOOTER FILMS<br>LLC<br>1227 PARK AVENUE<br>APT 8<br>BALTIMORE, MD 212174135 | 83-3670099     |                                      | 7,940                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                                 | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| HOLD YOUR HORSES FILMS LLC<br>4211 LATONA AVE NE<br>SEATTLE, WA 98105                     | 83-3109052     |                                      | 18,322                          |  |  |   |   |
| HOPE DIES LAST & MORIAH PATERSON<br>8435 NE GLISAN STREET<br>MSC547<br>PORTLAND, OR 97220 | 47-4084872     |                                      | 8,000                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                            | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| HORIZON THEATRE COMPANY<br>INCORPORATE<br>1083 AUSTIN AVENUE NE<br>ATLANTA, GA 30307 | 58-1576913     |                                      | 19,448                          |  |  |   |   |
| HORSE TRADE THEATRE<br>GROUP<br>85 E 4TH ST<br>NEW YORK CITY, NY 10003               | 13-4031477     |                                      | 10,400                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                                    | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| HUBBUB INC<br>377 S HARRISON STREET<br>11B<br>EAST ORANGE, NJ 07018                          | 22-3437756     |                                      | 32,787                          |  |  |   |   |
| HUNGER AND THIRST<br>THEATRE COLLECTIV<br>215 E 96TH STREET<br>APT 15Q<br>NEW YORK, NY 10128 | 45-5017669     |                                      | 40,437                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government   | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| HUP PRODUCTIONS LLC<br>126 THOMAS ST<br>CRANFORD, NJ 07016  | 47-5232985     |                                      | 7,700                           |  |  |   |   |
| IAMRESIDENCY<br>2030 DELLWOOD AVE<br>JACKSONVILLE, FL 32204 | 82-1184793     |                                      | 9,300                           |  |  |   |   |



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                               | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| IBIS PRODUCTIONS INC<br>64 NORMAN AVENUE 2<br>64 NORMAN AVE APT 2<br>BROOKLYN, NY 11222 | 20-4884141     |                                      | 40,400                          |  |  |   |   |
| IDEAS UNITED LLC<br>200 ARIZONA AVE<br>SUITE 104<br>ATLANTA, GA 30307                   | 83-2989310     |                                      | 160,800                         |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| IDEAS UNITED LLC<br>200 ARIZONA AVENUE<br>NORTHEAST SUITE<br>ATLANTA, GA 30307 | 83-2989310     |                                      | 196,730                         |  |  |   |   |
| INCEPTION TO EXHIBITION<br>300 W 145TH ST<br>5S<br>NEW YORK, NY 10039          | 27-2581567     |                                      | 12,900                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government        | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| INDIANRAGA INC<br>ONE BROADWAY 14TH FLOOR<br>CAMBRIDGE, MA 02142 | 46-0621928     |                                      | 31,068                          |  |  |   |   |
| INDIGO ARTS ALLIANCE<br>PO BOX 3652<br>PORTLAND, ME 04104        | 83-1809512     |                                      | 7,061                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government     | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| INNOVOCATIVE THEATRE<br>18120 FALL CREEK DR<br>LUTZ, FL 33558 | 82-1351467     |                                      | 6,157                           |  |  |   |   |
| INSPIRED MASSES<br>40 ELSON RD<br>WALTHAM, MA 02451           | 84-2141217     |                                      | 6,100                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| IRVINE MUSIC FESTIVAL<br>4790 IRVINE BLVD<br>107-617<br>IRVINE, CA 92620 | 47-2261319     |                                      | 9,670                           |  |  |   |   |
| JOSHUA WILLIAM GELB<br>618 E 9TH STREET<br>APT 4E<br>NEW YORK, NY 10009  | 11-7684915     |                                      | 19,755                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                     | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| KATIES ART PROJECT INC<br>410 E BROADWAY<br>APT 5C<br>LONG BEACH, NY 11561    | 37-1886344     |                                      | 6,255                           |  |  |   |   |
| KENDALL SQUARE ORCHESTRA<br>INC<br>28 HOLYOKE RD<br>2<br>SOMERVILLE, MA 02144 | 83-3633860     |                                      | 32,782                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government             | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| KID'S CANVAS INC<br>1433 DEKALB AVE<br>BROOKLYN, NY 11237             | 27-3335011     |                                      | 24,250                          |  |  |   |   |
| KIOSK GALLERY LLC<br>2509 SW BLAZING STAR PL<br>LEES SUMMIT, MO 64081 | 46-1763545     |                                      | 12,070                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| KLAUSNER-LAZARIDIS<br>19-09 21ST RD 2ND FL<br>ASTORIA, NY 11105                    | 83-1450657     |                                      | 6,847                           |  |  |   |   |
| KLEIN & ALVAREZ<br>PRODUCTIONS LLC<br>3910 LINCOLN ROAD<br>INDIANANPOLIS, IN 46228 | 47-5364070     |                                      | 13,475                          |  |  |   |   |



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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| LAKESIDE SHAKESPEARE THEATRE<br>3501 N HOYNE 2<br>CHICAGO, IL 60618 | 20-2012033     |                                      | 7,583                           |  |  |   |   |
| LAST BITE FILMS LLC<br>1595 MASSEY POINTE LANE<br>MEMPHIS, TN 38120 | 83-3416989     |                                      | 11,502                          |  |  |   |   |

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| LAURA BARAN<br>501 W 52ND ST<br>4A<br>NEW YORK, NY 10019   | 14-9669685     |                                      | 6,672                           |  |  |   |   |
| LAURA TAYLOR<br>2656 SUNDANCE CT<br>WALNUT CREEK, CA 94598 | 46-5064817     |                                      | 24,978                          |  |  |   |   |

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| LAUREN RUFFIN<br>324 12TH ST NW<br>ALBUQUERQUE, NM 87102                         | 83-2230474     |                                      | 192,068                         |  |  |   |   |
| LEFT SIDE UP FILMS LLC<br>2301 41ST STREET NW<br>APT 301<br>WASHINGTON, DC 20007 | 38-2945755     |                                      | 12,000                          |  |  |   |   |

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| <b>(a)</b> Name and address of organization or government                    | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| LEGACY CONNECTIONS FILMS<br>2057-A GREEN BAY ROAD<br>HIGHLAND PARK, IL 60035 | 26-4368591     |                                      | 14,478                          |  |  |   |   |
| LEGENDARY PRODUCTIONS<br>218 GRANT ST<br>REDLANDS, CA 92373                  | 82-3737158     |                                      | 15,133                          |  |  |   |   |

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| LEST WE FORGET THE MISSION LLC<br>8243 CATTAIL DRIVE<br>LONGMONT, CO 80503                 | 81-2256295     |                                      | 80,761                          |  |  |   |   |
| LIBERATION THEATRE COMPANY<br>1855 ADAM CLAYTON POWELL JR BLVD<br>1C<br>NEW YORK, NY 10026 | 22-2762164     |                                      | 10,440                          |  |  |   |   |

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| LIKEU<br>23 SOUTH PORTLAND AVE 3<br>BROOKLYN, NY 11217                                 | 27-4555121     |                                      | 30,853                          |  |  |   |   |
| LISTENING ROOM NETWORK<br>LLC<br>300 FOURTH AVE S<br>528<br>SAINT PETERSBURG, FL 33701 | 46-4775296     |                                      | 23,127                          |  |  |   |   |

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| LITTLE SPOON BIG SPOON PRODUCTIONS<br>33-25 90TH STREET<br>UNIT 3C<br>JACKSON HEIGHTS, NY 11372 | 81-3151047     |                                      | 16,282                          |  |  |   |   |
| LITTLE YUD VENTURES INC<br>1450 CHURCH STREET NW<br>APT 402<br>WASHINGTON, DC 20005             | 81-4849168     |                                      | 92,354                          |  |  |   |   |

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| LIZ LERMAN LLC<br>6424 E GREENWAY PKWY<br>SUITE 100<br>SCOTTSDALE, AZ 852542045 | 45-2311062     |                                      | 206,916                         |  |  |   |   |
| LOVE PRODUCTIONS RECORDS<br>527 W 149TH ST<br>NEW YORK, NY 10031                | 26-4803555     |                                      | 23,682                          |  |  |   |   |



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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| M3EP INC<br>213 SOMERSET RD<br>NORWOOD, NJ 07648                                    | 45-4669892     |                                      | 86,781                          |  |  |   |   |
| MACI DUFFY PRODUCTIONS INC<br>429 WEST 154TH STREET<br>APT 32<br>NEW YORK, NY 10032 | 83-1893586     |                                      | 19,575                          |  |  |   |   |

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| MACK-MADE DBA BRIDGE ARTS FESTIVAL<br>199 BROADWAY<br>BAYONNE, NJ 07002 | 81-2305319     |                                      | 6,284                           |  |  |   |   |
| MADBOOTS DANCE INC<br>321 79TH STREET<br>5<br>NORTH BERGEN, NJ 07047    | 47-4146324     |                                      | 15,397                          |  |  |   |   |

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| MANNING MUSIC AND ARTS<br>758 GILMAN<br>BERKELEY, CA 94710                   | 26-4314012     |                                      | 5,005                           |  |  |   |   |
| MANUAL CINEMA LLC<br>2020 N CALIFORNIA AVE<br>STE 7-229<br>CHICAGO, IL 60647 | 46-1827152     |                                      | 20,043                          |  |  |   |   |

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| MARGOT FONTEYN ACADEMY OF BALLET I<br>5640 NORTH WILLIAMSON VALLEY ROAD<br>PRESCOTT, AZ 86301 | 84-3841262     |                                      | 93,940                          |  |  |   |   |
| MAXWELL FILMWORKS<br>3224 CAMARIE AVE<br>MIDLAND, TX 79705                                    | 46-2264395     |                                      | 16,719                          |  |  |   |   |

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| MICHELLE FILM LLC<br>78 TEN EYCK STREET<br>2B<br>BROOKLYN, NY 11206              | 84-2506688     |                                      | 27,003                          |  |  |   |   |
| MICRO LLC<br>445 HUMBOLDT STREET<br>APT 1 GARDEN APARTMENT<br>BROOKLYN, NY 11211 | 81-4935296     |                                      | 323,051                         |  |  |   |   |

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| MILES MCAFEE<br>315 EMPIRE BLVD<br>250367<br>BROOKLYN, NY 11225 | 47-2222531     |                                      | 26,443                          |  |  |   |   |
| MINT INC<br>PO BOX 5528<br>ATLANTA, GA 31107                    | 71-1011962     |                                      | 11,533                          |  |  |   |   |

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| MOUNT MO<br>29 AVENUE B<br>APARTMENT 4A<br>NEW YORK, NY 10009               | 83-3308626     |                                      | 6,993                           |  |  |   |   |
| MOVEMENT MIGRATION LLC<br>14311 REESE BLVD A2 307<br>HUNTERSVILLE, NC 28078 | 82-3664217     |                                      | 10,912                          |  |  |   |   |

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| <b>(a)</b> Name and address of organization or government                        | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| MULTISTAGES THEATRE INC<br>344 WEST 87TH STREET<br>NEW YORK, NY 10024            | 46-1664579     |                                      | 6,359                           |  |  |   |   |
| MUSEUM OF CONTEMPORARY<br>ART OF GEORG<br>75 BENNETT STREET<br>ATLANTA, GA 30309 | 58-2562811     |                                      | 8,994                           |  |  |   |   |



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| MUSICIVIC INC<br>68 N RIDGE AVE<br>AMBLER, PA 19002       | 83-1335015     |                                      | 8,770                           |  |  |   |   |
| MUSICIVIC INC<br>68 N RIDGE AVE<br>AMBLER, PA 19002       | 83-1335015     |                                      | 35,104                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                   | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| MYTH COMPLEX ART HOUSE<br>LLC<br>205 21ST AVE SE<br>ST PETERSBURG, FL 33705 | 47-1780993     |                                      | 41,000                          |  |  |   |   |
| NAPOLEON RECORDS LLC<br>PO BOX 11825<br>PORTLAND, OR 97211                  | 45-1488267     |                                      | 14,998                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                        | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| NATIONAL BLACK ARTS FESTIVAL INC<br>1429 FAIRMONT AVE STE J<br>ATLANTA, GA 30318 | 58-1736780     |                                      | 6,227                           |  |  |   |   |
| NATIONAL MUSEUM OF THE AMERICAN IND<br>ONE BOWLING GREEN<br>NEW YORK, NY 10004   | 53-0206027     |                                      | 7,356                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                                       | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| NATURE THEATER OF OKLAHOMA LLC<br>2728 THOMSON AVENUE<br>UNIT 817<br>LONG ISLAND CITY, NY 11101 | 45-2207312     |                                      | 57,339                          |  |  |   |   |
| NEOSHO MUSIC INC DBA BORROMEO MUSI<br>PO BOX 661389<br>LOS ANGELES, CA 90066                    | 82-3055986     |                                      | 10,827                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                     | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| NETA RGV<br>512 S 9TH ST<br>APT D<br>MCALLEN, TX 78501                        | 84-2803344     |                                      | 14,000                          |  |  |   |   |
| NEW CIRCLE THEATRE<br>COMPANY INC<br>140 WEST 44TH ST 2<br>NEW YORK, NY 10024 | 82-2130860     |                                      | 6,450                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                        | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| NEW MOVEMENT<br>COLLABORATIVE LLC<br>18 NEPONSET AVENUE<br>ROSLINDALE, MA 02131  | 47-4493232     |                                      | 31,404                          |  |  |   |   |
| NEW MUSIC RADIO LLC<br>447 FORT WASHINGTON<br>AVENUE<br>56<br>NEW YORK, NY 10033 | 82-3794258     |                                      | 18,342                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| NEW PLAZA CINEMA INC<br>142 WEST END AVENUE<br>27L<br>NEW YORK, NY 10023 | 36-4905957     |                                      | 20,541                          |  |  |   |   |
| NEXT EDGE ARTS INC<br>406 FRANK ST<br>RALEIGH, NC 27604                  | 84-3535421     |                                      | 15,217                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                      | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| NICJOY ENTERPRISES LLC<br>PO BOX 6413<br>HILLSBOROUGH, NJ 08844                | 20-3555389     |                                      | 7,134                           |  |  |   |   |
| NORMAL AVE PRODUCTIONS LLC<br>31-53 35TH STREET<br>APT 3R<br>ASTORIA, NY 11106 | 82-0650354     |                                      | 5,952                           |  |  |   |   |



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                          | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| NORWALK METROPOLITAN YOUTH BALLET<br>96 INWOOD ROAD<br>TRUMBULL, CT 06611          | 46-4991269     |                                      | 114,716                         |  |  |   |   |
| NOVA EARTH INSTITUTE<br>13918 E MISSISSIPPI AVE<br>SUITE 60015<br>AURORA, CO 80012 | 81-1197618     |                                      | 13,871                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government        | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| OBB SOUND LLC<br>155 N LA PEER DRIVE<br>WEST HOLLYWOOD, CA 90048 | 84-2072549     |                                      | 23,250                          |  |  |   |   |
| OCELOT<br>500 MERCER ST<br>FLOR 2<br>SEATTLE, WA 98109           | 83-1614625     |                                      | 13,202                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                  | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| OCTAVIA PROJECT INC<br>402 GRAND AVE<br>2<br>BROOKLYN, NY 11238            | 83-3975000     |                                      | 13,415                          |  |  |   |   |
| OFF CENTER PRODUCTIONS<br>315 FLATBUSH AVENUE<br>103<br>BROOKLYN, NY 11217 | 43-1991105     |                                      | 20,714                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government              | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| OMNIDAWN CORPORATIO<br>1632 ELM AVE<br>RICHMOND, CA 948051614          | 68-0424529     |                                      | 28,587                          |  |  |   |   |
| ORANGE BLUE GROUP LLC<br>315 FLATBUSH AVE<br>418<br>BROOKLYN, NY 11217 | 81-4209829     |                                      | 543,765                         |  |  |   |   |

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| <b>(a)</b> Name and address of organization or government                              | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| OUT OF HAND THEATER INC<br>675 PONCE DE LEON AVENUE<br>SUITE 8500<br>ATLANTA, GA 30308 | 58-2619780     |                                      | 11,770                          |  |  |   |   |
| OYE GROUP INC<br>1080 WYCKOFF AVE<br>A06<br>RIDGEWOOD, NY 11385                        | 81-0963322     |                                      | 26,009                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government          | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| PAPERS PLEASE INC<br>3605 TILDEN STREET NW<br>WASHINGTON, DC 20008 | 83-1227096     |                                      | 13,524                          |  |  |   |   |
| PARADYM ACADEMY INC<br>91 CHAPMAN ST<br>NEW BRITAIN, CT 06051      | 81-3737797     |                                      | 46,175                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                          | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| PARENT ARTIST ADVOCACY LEAGUE FOR T<br>2230 S JUNIPER ST<br>PHILADELPHIA, PA 19148 | 82-2042582     |                                      | 6,322                           |  |  |   |   |
| PARRIS PICTURES<br>838 GREENWICH STREET<br>4C<br>NEW YORK, NY 10014                | 47-1751207     |                                      | 10,000                          |  |  |   |   |

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| PATIENT FORWARD LLC<br>1169 GREENE AVE<br>APT 1<br>BROOKLYN, NY 11221                    | 84-1873597     |                                      | 268,518                         |  |  |   |   |
| PEARLARTS STUDIOS LLC<br>201 NORTH BRADDOCK AVENUE<br>STUDIO 614<br>PITTSBURGH, PA 15208 | 46-1122709     |                                      | 8,500                           |  |  |   |   |



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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| PERFORMING ARTS STRATEGIES<br>6636 WILKINS AVENUE<br>PITTSBURGH, PA 15217     | 38-3842779     |                                      | 115,088                         |  |  |   |   |
| PERSIMMON TREE INC<br>1600 SE 15TH ST<br>APT 212<br>FORT LAUDERDALE, FL 33316 | 82-4873168     |                                      | 12,479                          |  |  |   |   |

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| PHILADELPHIA ARGENTINE TANGO SCHOOL<br>2030 FRANKFORD AVE<br>PHILADELPHIA, PA 19125   | 80-0515661     |                                      | 7,038                           |  |  |   |   |
| PHILADELPHIA WOMENS THEATRE FESTIVA<br>5009 CEDAR AVE APT 3<br>PHILADELPHIA, PA 19143 | 83-4467194     |                                      | 18,974                          |  |  |   |   |

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| PHOENIX ORCHESTRA LTD<br>1404 BEACON ST APT 4<br>BROOKLINE, MA 02446  | 47-1893398     |                                      | 16,190                          |  |  |   |   |
| PHYSICAL FESTIVAL LLC<br>1508 N DAMEN AVE<br>C4N<br>CHICAGO, IL 60622 | 82-4452556     |                                      | 18,515                          |  |  |   |   |

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| PIANOS FOR PEACE INC<br>1795 PEACHTREE STREET NE<br>ATLANTA, GA 30309 | 47-4784836     |                                      | 11,215                          |  |  |   |   |
| PIEHOLE LIVE ARTS LLC<br>244 JEFFERSON AVENUE 1<br>BROOKLYN, NY 11216 | 83-0658723     |                                      | 5,018                           |  |  |   |   |

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| PLANET CONNECTION INC<br>171 EAST 77TH ST<br>4D<br>NEW YORK, NY 10075 | 27-1848213     |                                      | 179,385                         |  |  |   |   |
| PLAYDC LLC<br>475 K STREET NW<br>UNIT 919<br>WASHINGTON, DC 20001     | 83-1317642     |                                      | 5,660                           |  |  |   |   |

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| PLAYER PIANO PRODUCTIONS LLC<br>203 BALTIC ST<br>3B<br>BROOKLYN, NY 11201 | 46-3090596     |                                      | 48,000                          |  |  |   |   |
| PLEIADES ARTS INC<br>109 E CHAPEL HILL STREET<br>DURHAM, NC 27701         | 82-1868413     |                                      | 5,176                           |  |  |   |   |

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| POLYPHONIC PRODUCTIONS<br>LLC DBA NEW<br>131 SAINT FELIX ST<br>2<br>BROOKLYN, NY 11217 | 27-4562071     |                                      | 16,094                          |  |  |   |   |
| POTLUCK PRODUCTIONS<br>NETWORKS<br>640 SOUTH VAN NESS AVE<br>SAN FRANCISCO, CA 94110   | 26-0086182     |                                      | 8,050                           |  |  |   |   |

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| PRIME PRODUCTIONS<br>8001 VICTORIA LANE<br>ST LOUIS PARK, MN 55426 | 30-1054214     |                                      | 13,170                          |  |  |   |   |
| PROJECT LEGACIES LLC<br>157 STARLING PASS<br>ASHEVILLE, NC 28804   | 82-3949607     |                                      | 22,649                          |  |  |   |   |



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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| PROJECT VOICE LLC<br>2 PRINCE STREET<br>2A<br>NEW YORK, NY 10012 | 81-3298956     |                                      | 30,328                          |  |  |   |   |
| Q CONCERTS<br>614 BEAUREGARD STREET<br>CHARLESTON, SC 29412      | 84-3936296     |                                      | 6,270                           |  |  |   |   |

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| QUANTUM DRAGON THEATRE<br>4218 GRAHAM ST<br>PLEASANTON, CA 94566 | 47-4232553     |                                      | 5,595                           |  |  |   |   |
| QUEEN MAB INC<br>53 ORVIS RD<br>ARLINGTON, MA 02474              | 83-4292735     |                                      | 14,723                          |  |  |   |   |

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| QUEER AS FUNDAMENTAL PRODUCTIONS LL<br>2324 NORTH SCHOFIELD STREET<br>PORTLAND, OR 97217 | 84-4809724     |                                      | 13,150                          |  |  |   |   |
| QUINTESSENCE OF DUST<br>101 W 90TH STREET<br>APT 10C<br>NEW YORK, NY 10024               | 84-3343430     |                                      | 13,456                          |  |  |   |   |

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| QUINTESSENTIAL PROJECT LLC<br>115 W 1ST ST<br>SANFORD, FL 32771 | 82-3492321     |                                      | 31,778                          |  |  |   |   |
| RACES Y ACCIN INC<br>301 E 22ND ST<br>11D<br>NEW YORK, NY 10010 | 66-0931439     |                                      | 10,732                          |  |  |   |   |

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| <b>(a)</b> Name and address of organization or government           | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| RAINBOW MILITIA<br>1561 HOLLY STREET<br>DENVER, CO 80220            | 82-3351502     |                                      | 7,483                           |  |  |   |   |
| RAISON D'TRE DANCE<br>PROJECT<br>19 HALO DRIVE<br>BOZEMAN, MT 59718 | 82-2850178     |                                      | 18,951                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                           | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| RANDY BACON PHOTOGRAPHY INC<br>600 W COLLEGE STREET<br>100<br>SPRINGFIELD, MO 65806 | 20-3059833     |                                      | 9,090                           |  |  |   |   |
| READING THEATER PROJECT<br>PO BOX 6712<br>READING, PA 19610                         | 71-0925966     |                                      | 24,953                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                          | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| REAP WHAT YOU SEW LLC<br>327 SAINT NICHOLAS AVE<br>STUDIO 4A<br>NEW YORK, NY 10027 | 30-0461715     |                                      | 32,466                          |  |  |   |   |
| RECOVERYDIA DIGITAL SERVICES LLC<br>11 A ST<br>DERRY, NH 03038                     | 85-0495855     |                                      | 5,480                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                      | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| RESPIRO OPERA NYC LLC<br>200 W 85TH STREET<br>2E<br>NEW YORK, NY 10024         | 83-1898632     |                                      | 5,999                           |  |  |   |   |
| RIGHTFULLY SEWN<br>1800 WYANDOTTE STREET<br>SUITE 204<br>KANSAS CITY, MO 64108 | 47-4141377     |                                      | 142,913                         |  |  |   |   |



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government     | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| RIGHTFULLY SEWN<br>1800 WYANDOTTE ST<br>KANSAS CITY, MO 64108 | 47-4141377     |                                      | 20,000                          |  |  |   |   |
| RISK IT PRODUCTIONS LLC<br>PO BOX 372<br>BETHPAGE, NY 11714   | 81-4219342     |                                      | 6,735                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                         | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| ROOM TO MOVE INC<br>1067 ALTA AVENUE NE<br>APARTMENT 6<br>ATLANTA, GA 30307       | 58-1852500     |                                      | 6,934                           |  |  |   |   |
| ROSEMARY BEACH PROPERTY OWNERS ASSO<br>P O BOX 611010<br>ROSEMARY BEACH, FL 32461 | 59-3367224     |                                      | 40,125                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government          | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| ROSY WALK LLC<br>16 GOLDBERG AVE<br>NORWICH, CT 06360              | 81-2713876     |                                      | 24,000                          |  |  |   |   |
| RUMBLEGRUMBLE INC<br>41 VARICK AVENUE<br>315<br>BROOKLYN, NY 11237 | 47-3829091     |                                      | 36,390                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                                   | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| RUNNING WATER ENTERTAINMENT<br>3500 VICKSBURG LANE NORTH<br>SUITE 135<br>PLYMOUTH, MN 55447 | 45-2678166     |                                      | 5,750                           |  |  |   |   |
| SANKOFA FILM SOCIETY<br>3815 OTHELLO STREET<br>SUITE 100 303<br>SEATTLE, WA 98118           | 84-3840258     |                                      | 6,600                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government  | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| SANTA FE ART COLONY<br>TENANTS ASSOCIA<br>2415 SOUTH SANTA FE<br>AVENUE<br>UNIT 2<br>LOS ANGELES, CA 90058 | 83-4375802     |                                      | 48,360                          |  |  |   |   |
| SARAFENN LLC<br>PO BOX 670117<br>BRONX, NY 10467   | 84-4385877     |                                      | 6,000                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                     | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| SCENA THEATRE<br>1629 K STREETNW<br>SUITE 300<br>WASHINGTON, DC 20006         | 52-1681505     |                                      | 16,407                          |  |  |   |   |
| SCIART INITIATIVE INC<br>211 MCGUINNESS BLVD<br>APT 327<br>BROOKLYN, NY 11222 | 84-1732471     |                                      | 10,667                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government           | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| SCOPE OF WORK CO<br>187 STANHOPE ST<br>APT 3R<br>BROOKLYN, NY 11237 | 82-0718228     |                                      | 53,985                          |  |  |   |   |
| SCRANTON FRINGE<br>PO BOX 1235<br>SCRANTON, PA 18501                | 47-1808438     |                                      | 8,711                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                    | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| SEMILLITA PRODUCTIONS<br>1580 1ST AVE<br>3N<br>NEW YORK, NY 10028            | 84-2902931     |                                      | 11,659                          |  |  |   |   |
| SEVEN STAGES SHAKESPEARE<br>COMPANY IN<br>PO BOX 774<br>PORTSMOUTH, NH 03802 | 47-3460410     |                                      | 7,188                           |  |  |   |   |



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                   | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| SEVENTHREEFOUR PRODUCTIONS LLC<br>100 2ND ST<br>APT 2<br>BROOKLYN, NY 11231 | 47-4951740     |                                      | 5,157                           |  |  |   |   |
| SHE SINGS PRODUCTIONS LLC<br>6598 WILLIAMSBURG BLVD<br>ARLINGTON, VA 22213  | 84-4841933     |                                      | 28,092                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                        | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| SHINE CHILDREN'S CHORUS<br>3515 SE WASHINGTON ST<br>UNIT 1<br>PORTLAND, OR 97214 | 83-2125257     |                                      | 38,466                          |  |  |   |   |
| SHOUTHOUSE INC<br>525 WYNNEWOOD RD<br>PELHAM, NY 10803                           | 83-4305924     |                                      | 9,850                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government          | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| SHUGAH WORKS<br>135 E 32ND ST<br>2<br>BROOKLYN, NY 11226           | 80-0074429     |                                      | 58,507                          |  |  |   |   |
| SIBLING RIVALRY PRESS LLC<br>PO BOX 26147<br>LITTLE ROCK, AR 72221 | 27-3167520     |                                      | 6,000                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| SINKING SHIP CREATIONS LLC<br>3237 FOURTH STREET<br>OCEANSIDE, NY 11572            | 82-3630087     |                                      | 6,400                           |  |  |   |   |
| SMARTSPACESORG<br>4001 N NEW BRAUNFELS AVENUE<br>APT 1500<br>SAN ANTONIO, TX 78209 | 26-1366145     |                                      | 5,677                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                          | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| SOL INITIATIVE LLC JACOB G PADRON<br>2254 FIFTH AVE<br>APT 1<br>NEW YORK, NY 10037 | 84-2460538     |                                      | 103,399                         |  |  |   |   |
| SOUL BOX PROJECT LLC<br>8225 SW 3RD AVE<br>PORTLAND, OR 97219                      | 83-3858783     |                                      | 33,706                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| SPARKYBOOM LLC<br>686 PROSPECT ST<br>MAPLEWOOD, NJ 07040                         | 83-2660945     |                                      | 19,611                          |  |  |   |   |
| SPECIFIC BROADS PRODUCTIONS LLC<br>33 SAINT MARKS AVE<br>4<br>BROOKLYN, NY 11217 | 46-3229617     |                                      | 7,359                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                      | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| SRI PRABHAARTLAB LLC<br>4800 HARRISON ST<br>HOLLYWOOD, FL 33021                | 81-3220641     |                                      | 9,654                           |  |  |   |   |
| STATE OF THE ART JAZZ<br>INSTITUTE<br>16 ELMWOOD CIRCLE<br>PEEKSKILL, NY 10566 | 32-0275549     |                                      | 11,090                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| STILL WATERS IN A STORM<br>286 STANHOPE STREET<br>GROUND FLOOR<br>BROOKLYN, NY 11237 | 27-1195669     |                                      | 51,075                          |  |  |   |   |
| STILLPOINTE THEATRE<br>INITIATIVE INC<br>407 EAST FEDERAL ST<br>BALTIMORE, MD 21202  | 45-2519318     |                                      | 19,339                          |  |  |   |   |



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| STRING INSIDERS<br>3409 PUEBLO DR<br>MCKINNEY, TX 75070                                 | 84-2426854     |                                      | 11,490                          |  |  |   |   |
| SUSAN BATSON<br>CONSERVATORY<br>311 WEST 43RD STREET<br>SUITE 201<br>NEW YORK, NY 10036 | 84-3104036     |                                      | 16,037                          |  |  |   |   |

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| SYDNIE L MOSLEY DANCES<br>2095 MADISON AVE<br>2A<br>NEW YORK, NY 10037              | 27-5164385     |                                      | 7,703                           |  |  |   |   |
| SYNCHRONICITY<br>PERFORMANCE GROUP<br>1389 PEACHTREE STREET NE<br>ATLANTA, GA 30309 | 58-2352047     |                                      | 8,235                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| TAK ENSEMBLE LLC<br>61-27 MADISON ST<br>3L<br>FLUSHING, NY 11385   | 46-5716517     |                                      | 14,069                          |  |  |   |   |
| TAVINE PRODUCTIONS INC<br>171 S 4TH ST<br>21<br>BROOKLYN, NY 11211 | 83-1797167     |                                      | 7,861                           |  |  |   |   |

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| TESLA QUARTET<br>1002 DITMAS AVE<br>APT 1A<br>BROOKLYN, NY 11218 | 27-4818934     |                                      | 10,443                          |  |  |   |   |
| THE ACTUAL DANCE<br>1472 PATHFINDER LANE<br>MCLEAN, VA 22101     | 46-2071626     |                                      | 6,545                           |  |  |   |   |

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| THE AMERICAN QUESTION LLC<br>2934 S RIMPAU BLVD<br>LOS ANGELES, CA 90016                 | 82-1243782     |                                      | 28,419                          |  |  |   |   |
| THE AMERICAN SAFETY COMPANY OF AMER<br>357 S FAIRFAX AVE<br>413<br>LOS ANGELES, CA 90036 | 26-0349527     |                                      | 25,224                          |  |  |   |   |

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| <b>(a)</b> Name and address of organization or government                      | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| THE ANTHROPOLOGISTS<br>100 CABRINI BLVD<br>24<br>NEW YORK, NY 10033            | 27-2215878     |                                      | 7,377                           |  |  |   |   |
| THE ARBUTUS FOUNDATION<br>INC<br>441 BROADWAY<br>FLOOR 3<br>NEW YORK, NY 10013 | 83-1802347     |                                      | 157,799                         |  |  |   |   |

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| <b>(a)</b> Name and address of organization or government                             | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| THE BALTIMORE JEWELRY CENTER<br>10 E NORTH AVENUE<br>SUITE 130<br>BALTIMORE, MD 21202 | 46-3151875     |                                      | 9,200                           |  |  |   |   |
| THE BREWING DEPT INC<br>PO BOX 1623 RADIO CITY STATION<br>NEW YORK, NY 10101          | 46-3036178     |                                      | 19,400                          |  |  |   |   |

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| THE CENTER FOR ARTS AT THE ARMORY<br>191 HIGHLAND AVE 1-C<br>SOMERVILLE, MA 02143 | 34-2056194     |                                      | 27,585                          |  |  |   |   |
| THE CONCERT TRUCK LLC<br>3102 EVERGREEN AVE FL 1<br>BALTIMORE, MD 212142335       | 81-3074584     |                                      | 6,348                           |  |  |   |   |



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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| THE DIVISION AVENUE ARTS COLLECTIVE<br>1713 S GREENFIELD CIR NE<br>APT 302<br>GRAND RAPIDS, MI 49505 | 90-1010164     |                                      | 10,279                          |  |  |   |   |
| THE EXQUISITE CORPSE COMPANY LLC<br>476 EASTERN PARKWAY<br>APT 1D<br>BROOKLYN, NY 11225              | 46-2765993     |                                      | 18,170                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                               | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| THE EXQUISITE CORPSE COMPANY LLC<br>476 EASTERN PARKWAY 1D<br>BROOKLYN, NY 11225        | 46-2765993     |                                      | 8,650                           |  |  |   |   |
| THE FAT AND GREASY CITIZENS BRIGADE<br>1702 INDEPENDENCE AVE SE<br>WASHINGTON, DC 20003 | 47-5654597     |                                      | 27,265                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                                   | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| THE FOLK MUSIC HALL OF FAME & MUSEU<br>632 FOGG STREET<br>SUITE 18<br>NASHVILLE, TN 37203   | 47-5004076     |                                      | 11,200                          |  |  |   |   |
| THE FULTON STREET COLLECTIVE INC<br>1821 W HUBBARD STREET<br>SUITE 307<br>CHICAGO, IL 60622 | 06-1655461     |                                      | 23,000                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| THE HEARTH<br>336 WEST 95TH STREET<br>52<br>NEW YORK, NY 10025  | 81-4230735     |                                      | 18,563                          |  |  |   |   |
| THE HUMANIST PROJECT<br>5 4TH ST<br>APT 2<br>BROOKLYN, NY 11231 | 46-3728382     |                                      | 7,818                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                                  | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| THE INTERNATIONAL ASSOCIATION OF SY<br>2261 MARKET STREET<br>93<br>SAN FRANCISCO, CA 94114 | 81-3263060     |                                      | 7,012                           |  |  |   |   |
| THE JOURNEY PROJECT LLC<br>343 WEST 51ST ST<br>APT 5A<br>NEW YORK, NY 10019                | 82-1704210     |                                      | 13,762                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government   | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| THE LIFE CUBE LLC<br>50 CRICKET LA<br>DOBBS FERRY, NY 10522 | 46-3249244     |                                      | 30,395                          |  |  |   |   |
| THE LOVE STORY LLC<br>187 OAK TER<br>ARDEN, NC 28704        | 81-0690741     |                                      | 5,250                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                                    | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| THE METAL SHOP<br>PERFORMANCE LAB LLC<br>1407 W WINONA ST<br>APT 3<br>CHICAGO, IL 60640      | 84-2868745     |                                      | 5,300                           |  |  |   |   |
| THE MOVEMENT THEATRE<br>COMPANY INC<br>279 WEST 117TH STREET APT<br>2Q<br>NEW YORK, NY 10026 | 47-2966845     |                                      | 26,590                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government             | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| THE MUSE BROOKLYN<br>350 MOFFAT<br>BROOKLYN, NY 11237                 | 46-0706492     |                                      | 59,988                          |  |  |   |   |
| THE NEW WILDINC<br>161 PROSPECT PARK WEST<br>3R<br>BROOKLYN, NY 11215 | 84-2161664     |                                      | 11,562                          |  |  |   |   |



**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government  | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| THE PHIL RAMONE ORCHESTRA FOR CHILD COLUMBIA UNIVERSITY STATION<br>PO BOX 250882<br>NEW YORK, NY 10025 | 84-2784720     |                                      | 10,783                          |  |  |   |   |
| THE POND THEATRE COMPANY<br>370 WASHINGTON AVENUE<br>BROOKLYN, NY 11238                                | 81-2874968     |                                      | 9,013                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                 | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| THE RESIDENT ACTING COMPANY<br>308 E 79TH ST<br>11B<br>NEW YORK, NY 10075 | 82-3767570     |                                      | 69,232                          |  |  |   |   |
| THE ROSIN BOX PROJECT INC<br>27105 BROADWAY<br>SAN DIEGO, CA 92102        | 84-4735639     |                                      | 35,441                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government      | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| THE SCRATCH LLC<br>26519 SE 22ND STREET<br>SAMMAMISH, WA 98075 | 61-1935494     |                                      | 5,375                           |  |  |   |   |
| THE SONG CAVE LLC<br>56 4TH PLACE 2<br>BROOKLYN, NY 11231      | 47-1064739     |                                      | 12,315                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| THE THEATRE COMPANY LLC<br>2315 NW OVERTON ST<br>303<br>PORTLAND, OR 97210       | 84-2240814     |                                      | 49,066                          |  |  |   |   |
| THE WESTCHESTER CENTER<br>FOR JAZZ AND<br>12 THE FARMS ROAD<br>BEDFORD, NY 10506 | 47-2943528     |                                      | 144,621                         |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government            | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| THE YELLOW HOUSE<br>577 KING STREET<br>JACKSONVILLE, FL 32204        | 35-2601953     |                                      | 48,981                          |  |  |   |   |
| THEATER IN ASYLUM<br>787 STERLING PL<br>APT 3L<br>BROOKLYN, NY 11216 | 80-0803846     |                                      | 8,068                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                      | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| THEATER WITH A VIEW LLC<br>1-50 50TH AVENUE 1238<br>LONG ISLAND CITY, NY 11101 | 84-2176344     |                                      | 11,190                          |  |  |   |   |
| THEATRE DU REVE INC<br>PO BOX 78341<br>ATLANTA, GA 30357                       | 58-2271965     |                                      | 6,775                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| THEATRE PROMETHEUS INC<br>1427 CRITTENDEN ST NW<br>WASHINGTON, DC 20011 | 83-3339891     |                                      | 7,572                           |  |  |   |   |
| THEATRICAL ANVILS LLC<br>1921 SAINT PAUL ST<br>BALTIMORE, MD 21218      | 84-3768831     |                                      | 7,595                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| THEATRICAL OUTFIT INC<br>PO BOX 1555<br>ATLANTA, GA 30301                    | 58-1524285     |                                      | 7,356                           |  |  |   |   |
| THIRD RAIL PROJECTS LLC<br>697 GRAND STREET<br>PMB 126<br>BROOKLYN, NY 11211 | 26-2158833     |                                      | 29,550                          |  |  |   |   |



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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| THREAD CONNECTS INC<br>611 W 163RD ST<br>STE 54<br>NEW YORK, NY 10032 | 84-1733014     |                                      | 34,525                          |  |  |   |   |
| THROUGH THE 4TH WALL<br>826 BASHFORD LANE<br>ALEXANDRIA, VA 22314     | 81-2027686     |                                      | 26,400                          |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| TML BROADWAY LLC<br>404 RIVERSIDE DRIVE<br>6D<br>NEW YORK, NY 10025      | 82-2640418     |                                      | 20,000                          |  |  |   |   |
| TO THE POINT DESIGN LLC<br>235 E 22ND STREET<br>2N<br>NEW YORK, NY 10010 | 27-4809780     |                                      | 13,225                          |  |  |   |   |

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| TOGETHER IN HOPE PROJECT<br>7662 WOODVIEW COURT<br>EDINA, MN 55439 | 82-3695283     |                                      | 21,407                          |  |  |   |   |
| TONAL GRACE INC<br>PO BOX 371<br>HAKALAU, HI 96710                 | 83-1584595     |                                      | 18,950                          |  |  |   |   |

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| TONAL GRACE INC<br>PO BOX 371<br>HAKALAU, HI 96710                    | 83-1584595     |                                      | 9,300                           |  |  |   |   |
| TORN PAGE INC<br>1812 W BURBANK BLVD<br>7053<br>LOS ANGELES, CA 91506 | 85-2519655     |                                      | 6,000                           |  |  |   |   |

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| TOSS IT LLC<br>204 WEST 106TH STREET APT 56<br>NEW YORK, NY 10025   | 47-4419124     |                                      | 5,255                           |  |  |   |   |
| TRANSIENT CANVAS<br>29 YALE TERRACE<br>2<br>JAMAICA PLAIN, MA 02130 | 47-4596474     |                                      | 8,150                           |  |  |   |   |

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| TRIAD- BOSTONS CHORAL COLLECTIVE<br>9 GOULD STREET<br>DANVERS, MA 01923 | 47-3887999     |                                      | 5,810                           |  |  |   |   |
| TRUE STORY PICTURES<br>316 HAWTHORNE ST<br>MEMPHIS, TN 38112            | 27-2124650     |                                      | 10,005                          |  |  |   |   |

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| UBUNTU MOTION PICTURES<br>LLC<br>530 S LAKE AVE 569<br>PASADENA, CA 91101 | 26-3533146     |                                      | 9,400                           |  |  |   |   |
| UNA INC<br>133 NEVADA ST<br>SAN FRANCISCO, CA 94110                       | 85-0835854     |                                      | 12,150                          |  |  |   |   |

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| UNLADYLIKE PRODUCTIONS<br>LLC CHARLOT<br>421 12TH STREET<br>BROOKLYN, NY 11215 | 20-2104822     |                                      | 97,492                          |  |  |   |   |
| UNSHAKABLE PRODUCTIONS<br>17613 NORWOOD ROAD<br>SANDY SPRING, MD 20860         | 83-0778130     |                                      | 16,000                          |  |  |   |   |



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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| URBAN HAIKU LLC<br>4848 NE 14TH AVE<br>PORTLAND, OR 97211                            | 81-4835980     |                                      | 5,477                           |  |  |   |   |
| URBAN YOUTH HARP<br>ENSEMBLE INC<br>3259 BRIARWOOD<br>BOULEVARD<br>ATLANTA, GA 30344 | 52-2440625     |                                      | 7,446                           |  |  |   |   |

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| VANISH ENTERPRISES LLC<br>16006 ELIZABETH ST<br>BEVERLY HILLS, MI 48025 | 81-3005955     |                                      | 49,406                          |  |  |   |   |
| VILLAGE PLAYBACK THEATRE<br>106 CLINTON STREET<br>MT VERNON, NY 10552   | 36-4573855     |                                      | 5,033                           |  |  |   |   |

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| VINCENT & THEO PRODUCTIONS LLC<br>9 KERN RAMBLE<br>UNIT B<br>AUSTIN, TX 78722 | 83-1491463     |                                      | 16,400                          |  |  |   |   |
| VITAL OPERA INC<br>87-10 34TH AVENUE 2B<br>JACKSON HEIGHTS, NY 11372          | 46-3086770     |                                      | 9,616                           |  |  |   |   |

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|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| VIVIFI FILMS LLC<br>1708-C AUGUSTA ST 319<br>GREENVILLE, SC 29605    | 83-4467749     |                                      | 7,360                           |  |  |   |   |
| VOICES FROM WAR INC<br>276 FIRST AVENUE<br>10A<br>NEW YORK, NY 10009 | 83-1974056     |                                      | 10,059                          |  |  |   |   |

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| VOXBOX INC<br>494 EAST 16TH STREET<br>BROOKLYN, NY 11226    | 81-1337008     |                                      | 12,700                          |  |  |   |   |
| WALLPLAY<br>265 CANAL ST<br>SUITE 603<br>NEW YORK, NY 10013 | 46-3285077     |                                      | 71,035                          |  |  |   |   |

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|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| WE ARE THE LOBBYISTS LLC<br>37 S 3RD ST<br>1R<br>BROOKLYN, NY 11249 | 47-4468974     |                                      | 17,123                          |  |  |   |   |
| WE ARE THE LOBBYISTS LLC<br>37 S 3RD ST<br>BROOKLYN, NY 11249       | 47-4468974     |                                      | 7,120                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government               | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| WEIRD SISTERS LLC<br>400 W43RD ST<br>8C<br>NEW YORK, NY 10036           | 42-1622330     |                                      | 10,382                          |  |  |   |   |
| WHAT'S ON LOS ANGELES<br>843 BAY STREET<br>11<br>SANTA MONICA, CA 90405 | 16-2444581     |                                      | 7,536                           |  |  |   |   |

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

| <b>(a)</b> Name and address of organization or government                    | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
|--|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| WHOLE WORLD THEATER COMPANY<br>1212 SPRING STREET NW<br>ATLANTA, GA 30309    | 58-2119605     |                                      | 6,754                           |  |  |   |   |
| WILD BANSHEE PRODUCTIONS LLC<br>64 EAST 129TH ST APT 3<br>NEW YORK, NY 10035 | 81-1335768     |                                      | 9,200                           |  |  |   |   |



| <b>Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.</b> |                |                                      |                                 |  |  |   |   |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| <b>(a)</b> Name and address of organization or government   | <b>(b)</b> EIN | <b>(c)</b> IRC section if applicable | <b>(d)</b> Amount of cash grant | <b>(e)</b> Amount of non-cash assistance | <b>(f)</b> Method of valuation (book, FMV, appraisal, other) | <b>(g)</b> Description of non-cash assistance | <b>(h)</b> Purpose of grant or assistance |
| WILLIAMSBURG INDEPENDENT<br>FILM FESTI<br>1361 MADISON AVE<br>SUITE 2E<br>NEW YORK, NY 10128                          | 27-3294550     |                                      | 5,695                           |  |  |   |   |

**Schedule J**  
(Form 990)

**Compensation Information**

OMB No. 1545-0047  
**2019**  
**Open to Public Inspection**

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](http://www.irs.gov/Form990) for instructions and the latest information.

Department of the Treasury  
Internal Revenue Service

Name of the organization  
FRACTURED ATLAS INC

Employer identification number  
11-3451703

**Part I Questions Regarding Compensation**

|  | Yes   | No   |  |  |   |   |   |  |  |  |
|--|---|--|--|--|---|---|---|--|--|--|
| <p><b>1a</b> 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.</p> <table border="0"> <tr> <td><input type="checkbox"/> First-class or charter travel</td> <td><input type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input type="checkbox"/> Tax idemnification and gross-up payments</td> <td><input type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table> | <input type="checkbox"/> First-class or charter travel                              | <input type="checkbox"/> Housing allowance or residence for personal use | <input type="checkbox"/> Travel for companions               | <input type="checkbox"/> Payments for business use of personal residence | <input type="checkbox"/> Tax idemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees              | <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |  |  |
| <input type="checkbox"/> First-class or charter travel   | <input type="checkbox"/> Housing allowance or residence for personal use            |  |  |  |   |   |   |  |  |  |
| <input type="checkbox"/> Travel for companions   | <input type="checkbox"/> Payments for business use of personal residence            |  |  |  |   |   |   |  |  |  |
| <input type="checkbox"/> Tax idemnification and gross-up payments  | <input type="checkbox"/> Health or social club dues or initiation fees              |  |  |  |   |   |   |  |  |  |
| <input type="checkbox"/> Discretionary spending account  | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)            |  |  |  |   |   |   |  |  |  |
| <p><b>b</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 explain</p>   | <b>1b</b>   |  |  |  |   |   |   |  |  |  |
| <p><b>2</b> Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?</p>   | <b>2</b>  |  |  |  |   |   |   |  |  |  |
| <p><b>3</b> Indicate which, if any, of the following the filing 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.</p> <table border="0"> <tr> <td><input type="checkbox"/> Compensation committee</td> <td><input type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input type="checkbox"/> Independent compensation consultant</td> <td><input checked="" type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input type="checkbox"/> Form 990 of other organizations</td> <td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>   | <input type="checkbox"/> Compensation committee                                     | <input type="checkbox"/> Written employment contract                     | <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study         | <input type="checkbox"/> Form 990 of other organizations          | <input checked="" type="checkbox"/> Approval by the board or compensation committee |   |  |  |  |
| <input type="checkbox"/> Compensation committee  | <input type="checkbox"/> Written employment contract                                |  |  |  |   |   |   |  |  |  |
| <input type="checkbox"/> Independent compensation consultant   | <input checked="" type="checkbox"/> Compensation survey or study                    |  |  |  |   |   |   |  |  |  |
| <input type="checkbox"/> Form 990 of other organizations   | <input checked="" type="checkbox"/> Approval by the board or compensation committee |  |  |  |   |   |   |  |  |  |
| <p><b>4</b> 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:</p> <p><b>a</b> Receive a severance payment or change-of-control payment?</p> <p><b>b</b> Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p> <p><b>c</b> Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p>   | <b>4a</b>   | No   |  |  |   |   |   |  |  |  |
|  | <b>4b</b>   | No   |  |  |   |   |   |  |  |  |
|  | <b>4c</b>   | No   |  |  |   |   |   |  |  |  |
| <p><b>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</b></p> <p><b>5</b> 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:</p> <p><b>a</b> The organization?</p> <p><b>b</b> Any related organization?</p> <p>If "Yes," on line 5a or 5b, describe in Part III.</p>   | <b>5a</b>   | No   |  |  |   |   |   |  |  |  |
|  | <b>5b</b>   | No   |  |  |   |   |   |  |  |  |
| <p><b>6</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:</p> <p><b>a</b> The organization?</p> <p><b>b</b> Any related organization?</p> <p>If "Yes," on line 6a or 6b, describe in Part III.</p>  | <b>6a</b>   | No   |  |  |   |   |   |  |  |  |
|  | <b>6b</b>   | No   |  |  |   |   |   |  |  |  |
| <p><b>7</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.</p>   | <b>7</b>  | No   |  |  |   |   |   |  |  |  |
| <p><b>8</b> Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.</p>   | <b>8</b>  | No   |  |  |   |   |   |  |  |  |
| <p><b>9</b> If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>   | <b>9</b>  |  |  |  |   |   |   |  |  |  |



**Part III**    **Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

| <b>Return Reference</b> | <b>Explanation</b> |
|-------------------------|--------------------|
|-------------------------|--------------------|

Schedule L (Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No. 1545-0047

2019

Open to Public Inspection

Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury Internal Revenue Service

Name of the organization FRACTURED ATLAS INC

Employer identification number

11-3451703

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

Table with 5 columns: (a) Name of disqualified person, (b) Relationship between disqualified person and organization, (c) Description of transaction, (d) Corrected? (Yes/No)

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958.
3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization.

Part II Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

Table with 9 columns: (a) Name of interested person, (b) Relationship with organization, (c) Purpose of loan, (d) Loan to or from the organization (To/From), (e) Original principal amount, (f) Balance due, (g) In default? (Yes/No), (h) Approved by board or committee? (Yes/No), (i) Written agreement? (Yes/No)

Total \$

Part III Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

Table with 5 columns: (a) Name of interested person, (b) Relationship between interested person and the organization, (c) Amount of assistance, (d) Type of assistance, (e) Purpose of assistance

**Part IV Business Transactions Involving Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

| (a) Name of interested person        | (b) Relationship between interested person and the organization | (c) Amount of transaction | (d) Description of transaction | (e) Sharing of organization's revenues? |    |
|--------------------------------------|---|---------------------------|--------------------------------|---|----|
|                                      |   |                           |                                | Yes                                     | No |
| (1) EXPONENTIAL CREATIVE VENTURE INC | MAJORITY OWNER  |                           | CAPITAL CONTRIBUTION           |   | No |
|                                      |   |                           |                                |   |    |
|                                      |   |                           |                                |   |    |
|                                      |   |                           |                                |   |    |
|                                      |   |                           |                                |   |    |

**Part V Supplemental Information**

Provide additional information for responses to questions on Schedule L (see instructions).

| Return Reference | Explanation |
|------------------|-------------|
|                  |             |

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2019**

▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**  
 ▶ **Attach to Form 990.**  
 ▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
FRACTURED ATLAS INC

Employer identification number  
11-3451703

**Part I Types of Property**

|   | (a)<br>Check if applicable | (b)<br>Number of contributions or items contributed | (c)<br>Noncash contribution amounts reported on Form 990, Part VIII, line 1g | (d)<br>Method of determining noncash contribution amounts |
|---|----------------------------|---|--|---|
| <b>1</b> Art—Works of art . . . . .   | X                          | 1   | 498  | FAIR MARKET VALUE   |
| <b>2</b> Art—Historical treasures . . . . .                                 |                            |   |  |   |
| <b>3</b> Art—Fractional interests . . . . .                                 |                            |   |  |   |
| <b>4</b> Books and publications . . . . .                                   | X                          |   | 1,933  | FAIR MARKET VALUE   |
| <b>5</b> Clothing and household goods . . . . .                             |                            |   |  |   |
| <b>6</b> Cars and other vehicles . . . . .                                  |                            |   |  |   |
| <b>7</b> Boats and planes . . . . .   |                            |   |  |   |
| <b>8</b> Intellectual property . . . . .                                    |                            |   |  |   |
| <b>9</b> Securities—Publicly traded . . . . .                               | X                          | 20  | 623,520  | FAIR MARKET VALUE   |
| <b>10</b> Securities—Closely held stock . . . . .                           |                            |   |  |   |
| <b>11</b> Securities—Partnership, LLC, or trust interests . . . . .         |                            |   |  |   |
| <b>12</b> Securities—Miscellaneous . . . . .                                |                            |   |  |   |
| <b>13</b> Qualified conservation contribution—Historic structures . . . . . |                            |   |  |   |
| <b>14</b> Qualified conservation contribution—Other . . . . .               |                            |   |  |   |
| <b>15</b> Real estate—Residential . . . . .                                 |                            |   |  |   |
| <b>16</b> Real estate—Commercial . . . . .                                  |                            |   |  |   |
| <b>17</b> Real estate—Other . . . . .                                       |                            |   |  |   |
| <b>18</b> Collectibles . . . . .  |                            |   |  |   |
| <b>19</b> Food inventory . . . . .  | X                          | 12  | 2,292  | FAIR MARKET VALUE   |
| <b>20</b> Drugs and medical supplies . . . . .                              |                            |   |  |   |
| <b>21</b> Taxidermy . . . . .   |                            |   |  |   |
| <b>22</b> Historical artifacts . . . . .                                    |                            |   |  |   |
| <b>23</b> Scientific specimens . . . . .                                    |                            |   |  |   |
| <b>24</b> Archeological artifacts . . . . .                                 |                            |   |  |   |
| <b>25</b> Other ▶ ( <u>COMPUTERS</u> ) . . . . .                            | X                          | 6   | 171,766  | FAIR MARKET VALUE   |
| FURN & . . . . .  | X                          | 25  | 42,670   | FAIR MARKET VALUE   |
| <b>26</b> Other ▶ ( <u>SUPPLIES</u> ) . . . . .                             |                            |   |  |   |
| SHOW . . . . .  | X                          | 2   | 320  | FAIR MARKET VALUE   |
| <b>27</b> Other ▶ ( <u>TICKETS</u> ) . . . . .                              |                            |   |  |   |
| GIFT . . . . .  | X                          | 15  | 1,334  | FAIR MARKET VALUE   |
| <b>28</b> Other ▶ ( <u>CERTIFICAT</u> ) . . . . .                           |                            |   |  |   |

**29** Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

|  | Yes | No |
|--|-----|----|
| <b>30a</b> During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? . . . . . |     | No |
| <b>b</b> If "Yes," describe the arrangement in Part II.  |     |    |
| <b>31</b> Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?   |     | No |
| <b>32a</b> Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . .  |     | No |
| <b>b</b> If "Yes," describe in Part II.  |     |    |
| <b>33</b> If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.   |     |    |

**Part II** **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

| Return Reference | Explanation |
|------------------|-------------|
|------------------|-------------|



**SCHEDULE O**  
(Form 990 or 990-EZ)**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2019****Open to Public Inspection**

Department of the Treasury

Name of the organization

FRACTURED ATLAS INC

Employer identification number

11-3451703

**990 Schedule O, Supplemental Information**

| Return Reference                    | Explanation  |
|-------------------------------------|--|
| FORM 990, PAGE 2, PART III, LINE 4D | OTHER PROGRAMS AND SERVICES: FRACTURED ATLAS TECHNOLOGY-BASED PROGRAM, SPACEFINDER, A CLOUD-BASED APPLICATION PROVIDING A COMPREHENSIVE ONLINE DATABASE OF SPACE LISTINGS. |

# 990 Schedule O, Supplemental Information

| Return Reference                             | Explanation   |
|--|---|
| FORM 990,<br>PAGE 6,<br>PART VI,<br>LINE 11B | TAX RETURN IS SENT TO ORGANIZATION FOR THE GOVERNING BODY TO REVIEW BEFORE SIGNING AND SENDING TO THE GOVERNMENT. |

**990 Schedule O, Supplemental Information**

| <b>Return Reference</b>                      | <b>Explanation</b>   |
|--|--|
| FORM 990,<br>PAGE 6,<br>PART VI,<br>LINE 12C | PURSUANT WITH THE ORGANIZATION'S FORMAL CONFLICTS OF INTEREST POLICY ADOPTED BY THE BOARD OF DIRECTORS ON APRIL 30, 2005, ANY DIRECTOR, PRINCIPAL OFFICER, OR MEMBER OF A COMMITTEE WITH BOARD DELEGATED POWERS WHO HAS A DIRECT OR INDIRECT FINANCIAL INTEREST HAS A DUTY TO DISCLOSE TO THE BOARD OF DIRECTORS ANY ACTUAL OR POSSIBLE CONFLICT OF INTEREST. THE POLICY CLEARLY OUTLINES PROCEDURES FOR ADDRESSING THE CONFLICT OF INTEREST AND REPERCUSSIONS FOR VIOLATING OF THE POLICY. DISCLOSED CONFLICTS OF INTEREST ARE MONITORED ON A PERIODIC BASIS AS OUTLINED IN THE POLICY. |

**990 Schedule O, Supplemental Information**

| <b>Return Reference</b>                      | <b>Explanation</b> |
|--|--------------------|
| FORM 990,<br>PAGE 6,<br>PART VI,<br>LINE 15A | APPROVED BY BOARD  |

**990 Schedule O, Supplemental Information**

| <b>Return Reference</b>                      | <b>Explanation</b>  |
|--|---|
| FORM 990,<br>PAGE 6,<br>PART VI,<br>LINE 15B | IN 2014 AND 2015, THE ORGANIZATION'S BOARD OF DIRECTORS AND EXECUTIVE STAFF CONTRACTED QUANTT ASSOCIATES TO CONDUCT STAFF COMPENSATION STUDIES TO ASSIST FRACTURED ATLAS IN SETTING COMPENSATION THAT IS COMPETITIVE WITH THE MARKET AND MEETS APPLICABLE IRS STANDARDS. THE FIRST PHASE EVALUATED SENIOR STAFF COMPENSATION. THE SECOND PHASE EXAMINED JUNIOR STAFF AND SOFTWARE DEVELOPER COMPENSATION. |

# 990 Schedule O, Supplemental Information

| Return Reference                            | Explanation   |
|---|---|
| FORM 990,<br>PAGE 6,<br>PART VI,<br>LINE 17 | LOUISIANA, MASSACHUSETTS, MARYLAND, MAINE, MICHIGAN, MINNESOTA, MISSISSIPPI, NORTH CAROLINA, NORTH DAKOTA, NEW HAMPSHIRE, NEW JERSEY, NEW MEXICO, NEVADA, NEW YORK, OHIO, OKLAHOMA, OREGON, PENNSYLVANIA, RHODE ISLAND, SOUTH CAROLINA, TENNESSEE, UTAH, VIRGINIA, WEST VIRGINIA, WASHINGTON, WISCONSIN |

## 990 Schedule O, Supplemental Information

| Return Reference                            | Explanation   |
|---|---|
| FORM 990,<br>PAGE 6,<br>PART VI,<br>LINE 19 | GOVERNING DOCUMENTS, FINANCIAL STATEMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST, AT FRACTURED ATLAS' OFFICE. |

## 990 Schedule O, Supplemental Information

| Return Reference     | Explanation   |
|----------------------|---|
| FORM 990,<br>PART XI | BOARD REVIEWS FINANCIAL STATEMENTS AND APPROVES BEFORE THEY ARE BOUND AND SENT. |



**990 Schedule O, Supplemental Information**

| <b>Return Reference</b>         | <b>Explanation</b>         |
|---------------------------------|----------------------------|
| FORM 990,<br>PART XI,<br>LINE 9 | DONATED LEGAL FEES -50,247 |

**SCHEDULE R  
(Form 990)**

**Related Organizations and Unrelated Partnerships**

OMB No. 1545-0047

**2019**

**Open to Public Inspection**

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.**  
 ▶ **Attach to Form 990.**  
 ▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
FRACTURED ATLAS INC

**Employer identification number**  
11-3451703

**Part I Identification of Disregarded Entities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

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

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

| (a)<br>Name, address, and EIN of related organization | (b)<br>Primary activity | (c)<br>Legal domicile (state or foreign country) | (d)<br>Exempt Code section | (e)<br>Public charity status (if section 501(c)(3)) | (f)<br>Direct controlling entity | (g)<br>Section 512(b)(13) controlled entity? |    |
|---|-------------------------|--|----------------------------|---|----------------------------------|--|----|
|   |                         |  |                            |   |                                  | Yes  | No |
|   |                         |  |                            |   |                                  |  |    |
|   |                         |  |                            |   |                                  |  |    |
|   |                         |  |                            |   |                                  |  |    |
|   |                         |  |                            |   |                                  |  |    |
|   |                         |  |                            |   |                                  |  |    |
|   |                         |  |                            |   |                                  |  |    |

**Part III Identification of Related Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

| (a)<br>Name, address, and EIN of<br>related organization | (b)<br>Primary<br>activity | (c)<br>Legal<br>domicile<br>(state<br>or<br>foreign<br>country) | (d)<br>Direct<br>controlling<br>entity | (e)<br>Predominant<br>income(related,<br>unrelated,<br>excluded from<br>tax under<br>sections 512-<br>514) | (f)<br>Share of<br>total income | (g)<br>Share of<br>end-of-year<br>assets | (h)<br>Disproportionate<br>allocations? |    | (i)<br>Code V-UBI<br>amount in box<br>20 of<br>Schedule K-1<br>(Form 1065) | (j)<br>General or<br>managing<br>partner? |    | (k)<br>Percentage<br>ownership |
|--|----------------------------|---|--|--|---------------------------------|--|---|----|--|---|----|--------------------------------|
|  |                            |   |  |  |                                 |  | Yes                                     | No |  | Yes                                       | No |                                |
|  |                            |   |  |  |                                 |  |   |    |  |   |    |                                |
|  |                            |   |  |  |                                 |  |   |    |  |   |    |                                |
|  |                            |   |  |  |                                 |  |   |    |  |   |    |                                |
|  |                            |   |  |  |                                 |  |   |    |  |   |    |                                |
|  |                            |   |  |  |                                 |  |   |    |  |   |    |                                |
|  |                            |   |  |  |                                 |  |   |    |  |   |    |                                |
|  |                            |   |  |  |                                 |  |   |    |  |   |    |                                |

**Part IV Identification of Related Organizations Taxable as a Corporation or Trust.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

| (a)<br>Name, address, and EIN of<br>related organization  | (b)<br>Primary activity | (c)<br>Legal<br>domicile<br>(state or foreign<br>country) | (d)<br>Direct controlling<br>entity | (e)<br>Type of entity<br>(C corp, S corp,<br>or trust) | (f)<br>Share of total<br>income | (g)<br>Share of end-of-<br>year<br>assets | (h)<br>Percentage<br>ownership | (i)<br>Section 512(b)<br>(13) controlled<br>entity? |    |
|---|-------------------------|---|-------------------------------------|--|---------------------------------|---|--------------------------------|---|----|
|   |                         |   |                                     |  |                                 |   |                                | Yes   | No |
| <b>(1)</b> EXPONENTIAL CREATIVITY VENTURES IN<br><br>1063 ULUOPIHI LOOP<br>KAILUA, HI 96734<br>82-4197795 | INVESTING               | NY  | N/A                                 |  |                                 |   |                                |   | No |
|   |                         |   |                                     |  |                                 |   |                                |   |    |
|   |                         |   |                                     |  |                                 |   |                                |   |    |
|   |                         |   |                                     |  |                                 |   |                                |   |    |
|   |                         |   |                                     |  |                                 |   |                                |   |    |
|   |                         |   |                                     |  |                                 |   |                                |   |    |
|   |                         |   |                                     |  |                                 |   |                                |   |    |
|   |                         |   |                                     |  |                                 |   |                                |   |    |
|   |                         |   |                                     |  |                                 |   |                                |   |    |

**Part V Transactions With Related Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

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

|  | Yes | No |
|--|-----|----|
| <b>1</b> During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? |     |    |
| <b>a</b> Receipt of <b>(i)</b> interest, <b>(ii)</b> annuities, <b>(iii)</b> royalties, or <b>(iv)</b> rent from a controlled entity . . . . .               |     | No |
| <b>b</b> Gift, grant, or capital contribution to related organization(s) . . . . .   | Yes |    |
| <b>c</b> Gift, grant, or capital contribution from related organization(s) . . . . .   |     | No |
| <b>d</b> Loans or loan guarantees to or for related organization(s) . . . . .  | Yes |    |
| <b>e</b> Loans or loan guarantees by related organization(s) . . . . .   | Yes |    |
| <b>f</b> Dividends from related organization(s) . . . . .  |     | No |
| <b>g</b> Sale of assets to related organization(s) . . . . .   |     | No |
| <b>h</b> Purchase of assets from related organization(s) . . . . .   |     | No |
| <b>i</b> Exchange of assets with related organization(s) . . . . .   |     | No |
| <b>j</b> Lease of facilities, equipment, or other assets to related organization(s) . . . . .  |     | No |
| <b>k</b> Lease of facilities, equipment, or other assets from related organization(s) . . . . .  |     | No |
| <b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) . . . . .  |     | No |
| <b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) . . . . .   |     | No |
| <b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . . . .   |     | No |
| <b>o</b> Sharing of paid employees with related organization(s) . . . . .  |     | No |
| <b>p</b> Reimbursement paid to related organization(s) for expenses . . . . .  |     | No |
| <b>q</b> Reimbursement paid by related organization(s) for expenses . . . . .  |     | No |
| <b>r</b> Other transfer of cash or property to related organization(s) . . . . .   | Yes |    |
| <b>s</b> Other transfer of cash or property from related organization(s) . . . . .   |     | No |

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

| (a)<br>Name of related organization | (b)<br>Transaction type (a-s) | (c)<br>Amount involved | (d)<br>Method of determining amount involved |
|-------------------------------------|-------------------------------|------------------------|--|
| (1) EXPONENTIAL CREATIVE VENTURES   | C                             | 2,110,000              | AS PER CONTRIBUTION AGRMT                    |
|                                     |                               |                        |  |
|                                     |                               |                        |  |
|                                     |                               |                        |  |
|                                     |                               |                        |  |
|                                     |                               |                        |  |



**Part VII**    **Supplemental Information**

Provide additional information for responses to questions on Schedule R. (see instructions).

| <b>Return Reference</b> | <b>Explanation</b> |
|-------------------------|--------------------|
|                         |                    |