

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  
**2020**  
Open to Public Inspection

**A For the 2020 calendar year, or tax year beginning 07-01-2020, and ending 06-30-2021**

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

**C** Name of organization  
FIRST STAGE MILWAUKEE

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite  
325 W WALNUT STREET

City or town, state or province, country, and ZIP or foreign postal code  
MILWAUKEE, WI 53212

**D** Employer identification number  
39-1634828

**E** Telephone number  
(414) 267-2940

**F** Name and address of principal officer:  
CARYN ESTEN  
325 W WALNUT STREET  
MILWAUKEE, WI 53212

**G** Gross receipts \$ 4,675,701

**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.FIRSTSTAGE.ORG

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

**L** Year of formation: 1987 **M** State of legal domicile: WI

## Part I Summary

**1** Briefly describe the organization's mission or most significant activities:  
FIRST STAGE MILWAUKEE, INC. DOES BUSINESS AS FIRST STAGE. OUR MISSION IS TO ENRICH THE LIVES OF CHILDREN AND FAMILIES BY CREATING EXCEPTIONAL THEATER EXPERIENCES THROUGH OUR THREE MAIN ACTIVITIES: 1) OUR PROFESSIONAL THEATER PRODUCTIONS ENGAGE, ENLIGHTEN, AND ENTERTAIN, AND IN 20/21, THEY REACHED ALMOST 26,200 AUDIENCE MEMBERS. 2) OUR THEATER ACADEMY TRAINING FOSTERS LIFE SKILLS (E.G. CONFIDENCE, RESPECT, FRIENDSHIP, SUPPORT, MOTIVATION, ETC.) WHILE IT TEACHES STAGE SKILLS. IN 20/21, OUR ACADEMY HAD OVER 1,300 ENROLLMENTS FOR APPROXIMATELY 745 CHILDREN IN GRADES K-12. 3) OUR DYNAMIC THEATER-IN-EDUCATION PROGRAMS PROMOTE LEARNING THROUGH THEATER, AND IN 20/21, OUR TEACHING ARTISTS CREATED A LIBRARY OF 30 PRE-RECORDED WORKSHOPS TO BE USED BY 89 SCHOOLS THROUGHOUT SOUTHEASTERN WISCONSIN.

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

**3** Number of voting members of the governing body (Part VI, line 1a) . . . . . **3** 27

**4** Number of independent voting members of the governing body (Part VI, line 1b) . . . . . **4** 27

**5** Total number of individuals employed in calendar year 2020 (Part V, line 2a) . . . . . **5** 165

**6** Total number of volunteers (estimate if necessary) . . . . . **6** 100

**7a** Total unrelated business revenue from Part VIII, column (C), line 12 . . . . . **7a** 0

**b** Net unrelated business taxable income from Form 990-T, line 39 . . . . . **7b** 0

	Prior Year	Current Year
<b>8</b> Contributions and grants (Part VIII, line 1h) . . . . .	2,655,230	4,003,625
<b>9</b> Program service revenue (Part VIII, line 2g) . . . . .	2,345,424	438,079
<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . . .	103,575	47,070
<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	49,427	-8,827
<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5,153,656	4,479,947
<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . . . .	0	0
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) . . . . .	0	0
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	2,818,237	2,137,704
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) . . . . .	0	0
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ 340,937		
<b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) . . . . .	2,484,281	752,956
<b>18</b> Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	5,302,518	2,890,660
<b>19</b> Revenue less expenses. Subtract line 18 from line 12 . . . . .	-148,862	1,589,287

	Beginning of Current Year	End of Year
<b>20</b> Total assets (Part X, line 16) . . . . .	4,489,826	6,621,805
<b>21</b> Total liabilities (Part X, line 26) . . . . .	1,092,065	1,326,705
<b>22</b> Net assets or fund balances. Subtract line 21 from line 20 . . . . .	3,397,761	5,295,100

## 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 2022-05-16 Date

DARREN GOLDSTEIN TREASURER Type or print name and title

**Paid Preparer Use Only**

Print/Type preparer's name Preparer's signature Date 2022-05-16 Check  if self-employed PTIN P00273273

Firm's name ▶ RITZ HOLMAN LLP Firm's EIN ▶ 39-0919055

Firm's address ▶ 330 E KILBOURN AVE SUITE 550 MILWAUKEE, WI 53202 Phone no. (414) 271-1451

**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:

FIRST STAGE MILWAUKEE, INC. DOES BUSINESS AS FIRST STAGE. OUR MISSION IS TO ENRICH THE LIVES OF CHILDREN AND FAMILIES BY CREATING EXCEPTIONAL THEATER EXPERIENCES

**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.

<b>4a</b>	(Code: )	(Expenses \$	263,259	including grants of \$	(Revenue \$	21,200 )
	See Additional Data					

















<b>4b</b>	(Code: )	(Expenses \$	535,131	including grants of \$	(Revenue \$	356,754 )
	See Additional Data					

<b>4c</b>	(Code: )	(Expenses \$	1,247,346	including grants of \$	(Revenue \$	60,125 )
	See Additional Data					

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

**4e Total program service expenses** ▶ 2,045,736

**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		No
<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	Yes	
<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 	Yes	
<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 	Yes	
<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 	Yes	
<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 		No
<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		No
<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		No
<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 	Yes	
<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		No

Part IV Checklist of Required Schedules (continued)

Table with 3 main columns: Question/Description, Yes, No. Rows include questions 22 through 38 regarding organizational reporting, compensation, bond issues, and controlled entities.

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 [ ]

Table with 3 main columns: Question/Description, Yes, No. Rows include questions 1a, 1b, and 1c regarding Form 1096, Forms W-2G, and backup withholding rules.

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

2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return . . . . . 2a 165
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 2b Yes
3a Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . . . 3a No
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O . . . . . 3b
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . . . . 4a No
b If "Yes," enter the name of the foreign country: 4b
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . . 5a No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b No
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? . . . . . 5c
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? . . . . . 6a No
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . . 6b
7 Organizations that may receive deductible contributions under section 170(c).
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? . . . . . 7a Yes
b If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . . 7b Yes
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . . 7c No
d If "Yes," indicate the number of Forms 8282 filed during the year . . . . . 7d
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . . 7f
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . . . 7g
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . . . . . 7h
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? . . . . . 8
9 Sponsoring organizations maintaining donor advised funds.
a Did the sponsoring organization make any taxable distributions under section 4966? . . . . . 9a
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . . . . 9b
10 Section 501(c)(7) organizations. Enter:
a Initiation fees and capital contributions included on Part VIII, line 12 . . . . . 10a
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b
11 Section 501(c)(12) organizations. Enter:
a Gross income from members or shareholders . . . . . 11a
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) . . . . . 11b
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b
13 Section 501(c)(29) qualified nonprofit health insurance issuers.
a Is the organization licensed to issue qualified health plans in more than one state? . . . . . 13a
Note. See the instructions for additional information the organization must report on Schedule O.
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans . . . . . 13b
c Enter the amount of reserves on hand . . . . . 13c
14a Did the organization receive any payments for indoor tanning services during the tax year? . . . . . 14a No
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . . . . . 14b
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? . . . . . 15 No
If "Yes," see instructions and file Form 4720, Schedule N.
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? . . . . . 16 No
If "Yes," complete Form 4720, Schedule O.

**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**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
<b>1b</b>	Enter the number of voting members included in line 1a, above, who are independent		
<b>2</b>	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?		No
<b>3</b>	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?		No
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	Yes	
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
<b>6</b>	Did the organization have members or stockholders?		No
<b>7a</b>	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?		No
<b>7b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>8a</b>	The governing body?	Yes	
<b>8b</b>	Each committee with authority to act on behalf of the governing body?	Yes	
<b>9</b>	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		No

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

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates?		No
<b>10b</b>	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?		
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	Yes	
<b>11b</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13	Yes	
<b>12b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
<b>12c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	Yes	
<b>13</b>	Did the organization have a written whistleblower policy?	Yes	
<b>14</b>	Did the organization have a written document retention and destruction policy?	Yes	
<b>15</b>	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?		
<b>15a</b>	The organization's CEO, Executive Director, or top management official	Yes	
<b>15b</b>	Other officers or key employees of the organization	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		No
<b>16b</b>	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**

- 17** List the states with which a copy of this Form 990 is required to be filed WI
- 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:  
 ▶DEB MOODY 325 W WALNUT ST MILWAUKEE, WI 53212 (414) 267-2940

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... List all of the organization's current key employees... List the organization's five current highest compensated employees... List all of the organization's former officers... List all of the organization's former directors or trustees...

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.

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Includes a row for 'See Additional Data Table' and multiple empty rows.

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

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

<b>1b Sub-Total</b> . . . . .	▶		
<b>1c Total from continuation sheets to Part VII, Section A</b> . . . . .	▶		
<b>1d Total (add lines 1b and 1c)</b> . . . . .	▶	281,496	0 37,202

**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 ▶ **2**

	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> . . . . .		No
<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) Name and business address	(B) Description of services	(C) 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 ▶ **0**



**Part VIII Statement of Revenue**

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b> Federated campaigns . . . . .	<b>1a</b>	930,577				
	<b>b</b> Membership dues . . . . .	<b>1b</b>					
	<b>c</b> Fundraising events . . . . .	<b>1c</b>	189,868				
	<b>d</b> Related organizations . . . . .	<b>1d</b>					
	<b>e</b> Government grants (contributions) . . . . .	<b>1e</b>	1,466,849				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above . . . . .	<b>1f</b>	1,416,331				
	<b>g</b> Noncash contributions included in lines 1a - 1f:\$ . . . . .	<b>1g</b>	61,203				
	<b>h Total.</b> Add lines 1a-1f . . . . .			4,003,625			
<b>Program Service Revenue</b>	<b>2a</b> ACADEMY INCOME	Business Code					
		611600	356,754	356,754			
	<b>b</b> TICKET SALES	711110	60,125	60,125			
	<b>c</b> THEATER IN EDUCATION	611600	21,200	21,200			
	<b>d</b>						
	<b>e</b>						
	<b>f</b> All other program service revenue . . . . .						
<b>g Total.</b> Add lines 2a-2f. . . . .		438,079					
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) . . . . .		31,651			31,651	
	<b>4</b> Income from investment of tax-exempt bond proceeds . . . . .						
	<b>5</b> Royalties . . . . .		500			500	
	<b>6a</b> Gross rents	(i) Real	(ii) Personal				
		<b>6b</b> Less: rental expenses					
		<b>6c</b> Rental income or (loss)					
		<b>d</b> Net rental income or (loss) . . . . .					
	<b>7a</b> Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		<b>7b</b> Less: cost or other basis and sales expenses					
		<b>7c</b> Gain or (loss)					
		<b>d</b> Net gain or (loss) . . . . .		15,419	15,419		
	<b>8a</b> Gross income from fundraising events (not including \$ 189,868 of contributions reported on line 1c). See Part IV, line 18 . . . . .	<b>8a</b>	61,903				
		<b>b</b> Less: direct expenses . . . . .	<b>8b</b>	74,752			
		<b>c</b> Net income or (loss) from fundraising events . . . . .			-12,849		-12,849
	<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>	3,218					
	<b>b</b> Less: cost of goods sold . . . . .	<b>10b</b>	9,606				
	<b>c</b> Net income or (loss) from sales of inventory . . . . .			-6,388	-6,388		
<b>Miscellaneous Revenue</b>		<b>Business Code</b>					
<b>11a</b> OTHER REVENUE		900099	9,910	9,910			
<b>b</b>							
<b>c</b>							
<b>d</b> All other revenue . . . . .							
<b>e Total.</b> Add lines 11a-11d . . . . .			9,910				
<b>12 Total revenue.</b> See instructions . . . . .			4,479,947	457,020	0	19,302	

**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> Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . . . . .				
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22 . . . . .				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16. . . . .				
<b>4</b> Benefits paid to or for members . . . . .				
<b>5</b> Compensation of current officers, directors, trustees, and key employees . . . . .	320,828	119,939	148,677	52,212
<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 . . . . .	1,356,686	1,028,583	151,423	176,680
<b>8</b> Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions) . . . . .				
<b>9</b> Other employee benefits . . . . .	333,170	240,571	33,765	58,834
<b>10</b> Payroll taxes . . . . .	127,020	91,132	18,836	17,052
<b>11</b> Fees for services (non-employees):				
<b>a</b> Management . . . . .				
<b>b</b> Legal . . . . .				
<b>c</b> Accounting . . . . .	13,500		13,500	
<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)	35,760	35,760		
<b>12</b> Advertising and promotion . . . . .	103,818	42,548	57,360	3,910
<b>13</b> Office expenses . . . . .	25,080	18,980	2,113	3,987
<b>14</b> Information technology . . . . .	71,990	41,483	26,845	3,662
<b>15</b> Royalties . . . . .	14,978	14,978		
<b>16</b> Occupancy . . . . .	256,607	236,919	11,984	7,704
<b>17</b> Travel . . . . .	3,477	3,336	100	41
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .				
<b>19</b> Conferences, conventions, and meetings . . . . .	10,658	1,183	9,330	145
<b>20</b> Interest . . . . .	3,860		3,860	
<b>21</b> Payments to affiliates . . . . .				
<b>22</b> Depreciation, depletion, and amortization . . . . .	68,009	55,588	10,603	1,818
<b>23</b> Insurance . . . . .	22,684	16,907	5,502	275
<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> ADMINISTRATIVE	67,585	42,879	10,089	14,617
<b>b</b> PRODUCTION EXPENSE	42,637	42,637		
<b>c</b> EDUCATION AND ACADEMY M	12,313	12,313		
<b>d</b>				
<b>e</b> All other expenses				
<b>25</b> Total functional expenses. Add lines 1 through 24e	2,890,660	2,045,736	503,987	340,937
<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) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	1,349,148	<b>1</b>	1,771,632
	<b>2</b> Savings and temporary cash investments . . . . .	79,624	<b>2</b>	769,165
	<b>3</b> Pledges and grants receivable, net . . . . .	682,541	<b>3</b>	541,483
	<b>4</b> Accounts receivable, net . . . . .	174,114	<b>4</b>	977,576
	<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 . . . . .	9,000	<b>7</b>	
	<b>8</b> Inventories for sale or use . . . . .	21,012	<b>8</b>	16,650
	<b>9</b> Prepaid expenses and deferred charges . . . . .	210,578	<b>9</b>	207,145
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	1,457,328		
	<b>b</b> Less: accumulated depreciation	1,256,098		
	<b>11</b> Investments—publicly traded securities . . . . .	1,616,610	<b>11</b>	1,997,151
	<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 . . . . .	89,145	<b>14</b>	136,399
	<b>15</b> Other assets. See Part IV, line 11 . . . . .	17,777	<b>15</b>	3,374
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) . . . . .	4,489,826	<b>16</b>	6,621,805	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	185,132	<b>17</b>	169,527
	<b>18</b> Grants payable . . . . .		<b>18</b>	
	<b>19</b> Deferred revenue . . . . .	180,176	<b>19</b>	162,046
	<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 . . . . .	563,700	<b>24</b>	726,330
	<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	163,057	<b>25</b>	268,802
	<b>26 Total liabilities.</b> Add lines 17 through 25 . . . . .	1,092,065	<b>26</b>	1,326,705
<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 . . . . .	2,086,478	<b>27</b>	4,186,451
	<b>28</b> Net assets with donor restrictions . . . . .	1,311,283	<b>28</b>	1,108,649
	<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 . . . . .	3,397,761	<b>32</b>	5,295,100	
<b>33</b> Total liabilities and net assets/fund balances . . . . .	4,489,826	<b>33</b>	6,621,805	

**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>	4,479,947
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	2,890,660
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	1,589,287
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	3,397,761
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	308,052
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<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>	0
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	<b>10</b>	5,295,100

**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:** 39-1634828

**Name:** FIRST STAGE MILWAUKEE

Form 990 (2020)

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

FIRST STAGE KNOWS THAT THE ARTS CAN BE USED AS A POWERFUL VEHICLE FOR IN-SCHOOL LEARNING, RATHER THAN DETACHED FROM TRADITIONAL CURRICULUM AS AN "EXTRA." DRAMA IN PARTICULAR EFFORTLESSLY LENDS ITSELF TO INTEGRATION WITH LITERATURE AND LANGUAGE ARTS. FIRST STAGE DOES NOT GO INTO CLASSROOMS TO TEACH DRAMA, BUT RATHER FIRST STAGE USES THEATER AS AN EFFECTIVE MEDIUM TO TEACH ACADEMIC SUBJECT MATTER. FIRST STAGE HAS THE UNIQUE ABILITY TO USE THEATER ACTIVITIES TO PRESENT CURRICULUM EFFECTIVELY TO ALL TYPES OF LEARNERS VISUAL, AUDITORY AND KINESTHETIC. IN ADDITION, CLASSROOM TEACHERS HAVE AN ONGOING CONCERN ABOUT STANDARDIZED TESTING. IN RESPONSE, FIRST STAGE OFFERS PROGRAMS THAT BOOST CRITICAL LITERACY SKILLS, INCREASE STATE STANDARDIZED TEST SCORES AND HELP TEACHERS LEARN NEW AND CREATIVE WAYS TO TEACH. AS SCHOOLS ARE FORCED TO SPEND LESS ON ARTS PROGRAMMING, THESE PROGRAMS CLEVERLY BLEND THE ARTS WITH EXISTING CURRICULUM MAKING IT A WIN-WIN FOR TEACHERS THAT ARE UNDER PRESSURE TO COVER A GREAT DEAL OF MATERIAL AND FOR STUDENTS THAT THRIVE WHEN THEY ARE ALLOWED TO EXPRESS THEMSELVES AND USE THEIR NATURAL CREATIVITY IN THE CLASSROOM. THE THEATER-IN-EDUCATION PROGRAMS ARE ALSO RUN BY SKILLED AND NATIONALLY RESPECTED LEADERS. PROGRAMMING DIRECTOR, JULIA MAGNASCO SERVED ON THE BOARD OF THEATRE FOR YOUNG AUDIENCES/USA THE UNITED STATES CENTER FOR THE INTERNATIONAL ASSOCIATION OF THEATRE FOR CHILDREN AND YOUNG PEOPLE. AS A PROFESSIONAL MEMBERSHIP ORGANIZATION WITH OVER 50 YEARS OF SERVICE TO THE FIELD, TYA/USA IS KNOWN FOR ITS NATIONAL FESTIVAL AND CONFERENCE, AND TYA TODAY, A NATIONALLY AND INTERNATIONALLY RESPECTED MAGAZINE FOR THE FIELD OF THEATRE FOR YOUNG PEOPLE. MS. MAGNASCO WAS ALSO SELECTED AS ONE OF THE FORTY UNDER FORTY AWARD RECIPIENTS BY THE MILWAUKEE BUSINESS JOURNAL IN 2017. IN THE 2020/2021 FISCAL YEAR, FIRST STAGE REACHED 89 SCHOOLS AND 74% OF ALL CITY OF MILWAUKEE SCHOOLS. AND THROUGH COMMUNITY SUPPORT, 70 OF THESE SCHOOLS RECEIVED FIRST STAGE'S SCHOOL MEMBERSHIP PACKAGE FOR FREE. THE MEMBERSHIP PROGRAM WAS BEGUN IN 2020/2021 TO REACH SCHOOL CLASSROOMS DURING THE COVID PANDEMIC, WHEN SCHOOLS WERE CLOSED OR WHEN VISITORS WERE NOT ALLOWED IN SCHOOLS AND FIRST STAGE TEACHING ARTISTS COULD NOT PROVIDE PROGRAMMING IN-PERSON. INSTEAD, FIRST STAGE'S TEACHING ARTISTS PRE-RECORDED 30 WORKSHOPS TO CREATE A VAST LIBRARY OF CURRICULUM AND PROGRAMMING. THE MEMBERSHIP PROGRAM THEN INCLUDED UNLIMITED ACCESS TO THIS WORKSHOP REPOSITORY. EXAMPLES OF THESE WORKSHOPS INCLUDE: THE EARLY LITERACY PROGRAM (GRADES K-3): THESE 20-30 MINUTE WORKSHOPS UTILIZED PICTURE BOOKS TO ENGAGE STUDENTS IN DRAMA-BASED ACTIVITIES WHILE REINFORCING THEIR UNDERSTANDING OF FUNDAMENTAL LANGUAGE COMPREHENSION SKILLS. EACH STORY WAS DIVIDED INTO TWO CHAPTERS, ENDING WITH PROMPTS MEANT TO ENCOURAGE CREATIVE THINKING, PROBLEM SOLVING, AND MAKING PERSONAL CONNECTIONS. THE INTRO TO ACTING RESIDENCY (GRADES 4-8): THE 15-MINUTE WORKSHOPS INTRODUCED STUDENTS TO THE BASIC BUILDING BLOCKS OF THEATER AND HELPED STUDENTS DEVELOP THEIR ACTOR TOOLS OF BODY, VOICE, AND IMAGINATION. STUDENTS DOVE INTO THE STORY OF THE LION KING, AS THEY EXPLORED A KEY ELEMENT OF THE DRAMA PROCESS EACH SESSION AND WERE ENCOURAGED TO ACTIVELY PARTICIPATE ALONG WITH THE TEACHING ARTISTS. SESSIONS CONCLUDED WITH A PROMPT MEANT TO HELP STUDENTS PUT INTO PRACTICE THE SKILLS THEY JUST LEARNED AND INCLUDED GROUP ACTIVITIES FOR THE CLASS TO ENGAGE IN TOGETHER. THE ARTS INTEGRATED WORKSHOPS (GRADES 5-9): THESE 30 TO 50-MINUTE WORKSHOPS USED DRAMATIC ACTIVITIES TO TEACH LESSONS THROUGHOUT THE ELEMENTARY AND MIDDLE SCHOOL CURRICULA AND WERE DIRECTLY LINKED TO THE COMMON CORE STATE STANDARDS AND THE NATIONAL CORE ARTS STANDARDS IN THEATRE. EACH WORKSHOP WAS DIVIDED INTO SMALLER CHAPTERS, ENDING WITH PROMPTS THAT TEACHERS COULD USE TO ASSESS FOR UNDERSTANDING. FOR EXAMPLE, AFTER ACTIVELY EXPLORING RUBY BRIDGES' STORY, STUDENTS WERE ASKED TO CREATE A STORYBOARD SEQUENCING KEY MOMENTS IN HER STORY TO DEEPEN THEIR UNDERSTANDING OF HOW RUBY'S STRENGTH AND COURAGE INFLUENCED A NATION. AT THE END OF THE SCHOOL YEAR, FIRST STAGE EVALUATED ITS MEMBERSHIP PROGRAMMING EFFECTIVENESS: 72% OF THE SCHOOL EDUCATORS FELT THAT THE VIRTUAL WORKSHOPS STRONGLY CONNECTED TO THE RELATED KEY ACADEMIC STANDARDS. 72% OF THE SCHOOL EDUCATORS FELT THAT THE VIRTUAL WORKSHOPS SUPPORTED THE STANDARD BASED SKILLS THEY WERE TEACHING THEIR STUDENTS. 56% OF THE SCHOOL EDUCATORS OBSERVED THEIR STUDENTS BEING ACTIVELY ENGAGED IN THE VIRTUAL WORKSHOP SESSIONS. 52% OF THE SCHOOL EDUCATORS REPORTED THAT THEY USED SOME, IF NOT ALL, OF THE SUPPLEMENTAL MATERIALS FIRST STAGE MADE AVAILABLE TO SUPPORT FURTHER LEARNING OF THE WORKSHOPS' KEY ACADEMIC STANDARDS.

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

THEATER ARTS HAVE AN INTRINSIC POTENTIAL TO TEACH IMPORTANT LIFE SKILLS SUCH AS SELF-CONFIDENCE, DISCIPLINE, COMMITMENT, AND TEAMWORK. HAVING ACCESS TO THEATER PROFESSIONALS WITH THE UNIQUE ABILITY AND PASSION FOR WORKING WITH CHILDREN, FIRST STAGE FOUNDED THE THEATER ACADEMY IN 1992. THE GOAL OF THE ACADEMY IS TO TEACH "LIFE SKILLS THROUGH STAGE SKILLS." ACADEMY CLASSES HELP CHILDREN BUILD CHARACTER, DEVELOP LEADERSHIP SKILLS AND INCREASE EMOTIONAL INTELLIGENCE. THE THEATER ACADEMY HAS BEEN PROVEN TO HELP STUDENTS IN SCHOOL BY IMPROVING EMOTIONAL INTELLIGENCE SCORES (SELF-AWARENESS, RESPECT FOR SELF AND OTHERS, TEAMWORK, ETC.) AND INSTILLING 21ST CENTURY WORKFORCE SKILLS (COLLABORATION, CRITICAL THINKING, INCREASED COMMUNICATION, FLEXIBILITY AND CREATIVE THINKING). FIRST STAGE ACADEMY OFFERS A JOURNEY OF SELF-DISCOVERY AND HELPS CHILDREN MAXIMIZE THEIR OWN POTENTIAL IN A SAFE ENVIRONMENT SURROUNDED BY ADULT MENTORS AND POSITIVE PEERS. IN NON-COVID YEARS, ACADEMY CLASSES ARE OFFERED YEAR-ROUND. IN MOST TYPICAL SEASONS, FIRST STAGE OFFERS CLASSES WITH CONTACT HOURS RANGING FROM 8 TO 140 HOURS EACH, FOR OVER 2,300 ENROLLMENTS OR APPROXIMATELY 1,650 CHILDREN, ABOUT 46% OF WHICH ARE FROM THE CITY OF MILWAUKEE AND 19% OF WHICH ARE IN NEED OF FINANCIAL ASSISTANCE IN ORDER TO ATTEND. DUE TO THE NEED TO LIMIT CAPACITY (FOR ANY IN-PERSON CLASSES DUE TO SPATIAL DISTANCING FOR COVID SAFETY AND FOR ANY VIRTUAL ACADEMY CLASSES BECAUSE OF THE DIFFICULTIES OF HAVING TOO MANY FACES IN A ZOOM CLASSROOM), THE 2020/2021 SEASON NECESSITATED A REDUCTION IN THE NUMBER OF ENROLLMENTS TO 1,304 FOR APPROXIMATELY 745 CHILDREN. MORE THAN 50% OF CLASSES WERE HELD VIRTUALLY. IN-PERSON CLASS SIZES WERE REDUCED BY 50% IN ORDER TO MAINTAIN CDC SAFETY PROTOCOLS. DESPITE THESE LIMITATIONS, FIRST STAGE WAS ABLE TO CONTINUE WITH ITS PLEDGE TO NEVER TURN AWAY A STUDENT DUE TO A FAMILY'S INABILITY TO PAY COSTS ASSOCIATED WITH CLASSES. IN 2020/2021, 57 STUDENTS RECEIVED 145 SCHOLARSHIPS FOR MORE THAN \$17,000 OF FINANCIAL AID AWARDS. FIRST STAGE'S THEATER ACADEMY HOLDS CLASSES YEAR-ROUND. SEVERAL OF ITS MORE UNIQUE PROGRAMS ARE DESCRIBED BELOW, AS WELL AS ACHIEVEMENTS IN THE RECENT SEASON: IN 2020/2021, FIRST STAGE OFFERED IN-PERSON PERFORMANCE EXPERIENCE CLASSES AT THE MILWAUKEE YOUTH ARTS CENTER FOLLOWING CDC PROTOCOLS. THESE CLASSES PROVIDED STUDENTS (THIRD GRADE AND UP) THE OPPORTUNITY TO BROADEN PERFORMANCE SKILLS AND PERFORM A POPULAR SHOW AS THEIR FINAL (VIRTUAL) PRESENTATION IN A TIME WHEN THERE WERE LESS ON-STAGE OPPORTUNITIES FOR FIRST STAGE YOUNG PERFORMERS. ONE OF THE MOST POPULAR CLASSES IN 2020/2021 WAS THE VIRTUAL MASTER CLASS SERIES. MIDDLE AND HIGH SCHOOL STUDENTS LEARNED SPECIFIC THEATER TOPICS FROM PROFESSIONAL THEATER ARTISTS, INCLUDING AUDITIONING, ACTING FOR THE SINGER, COMEDY WRITING AND SATIRE, AND PUPPETRY. AS DISCUSSED ABOVE IN THEATER PRODUCTIONS, FIRST STAGE YOUNG COMPANY THE THEATER ACADEMY'S ADVANCED ACTOR TRAINING PROGRAM FOR HIGH SCHOOL STUDENTS WHICH HAD 60 MEMBERS IN 2020/2021 PRODUCED THE TWO GENTLEMEN OF VERONA AND THE CRUCIBLE. AND INSTEAD OF TRAVELING TO CEDAR CITY, UTAH IN OCTOBER AS IT HAS SINCE 2008 TO COMPETE IN THE SHAKESPEARE COMPETITION AT SOUTHERN UTAH UNIVERSITY, A PORTION OF THE YOUNG COMPANY PRESENTED SCENES AND MONOLOGUES VIRTUALLY FOR THE COMPETITION AND FOR FIRST STAGE AUDIENCES. THE YOUNG COMPANY WAS ABLE TO CONTINUE ITS FUNDRAISING TRADITION BY HOLDING ITS 11TH ANNUAL (AND SECOND VIRTUAL) BARD-O-THON IN APRIL OF 2021. IN CELEBRATION OF SHAKESPEARE'S BIRTHDAY, THE FIRST STAGE THEATER ACADEMY CHALLENGES MEMBERS OF THE YOUNG COMPANY TO STRETCH THEIR ARTISTIC ENDURANCE BY PERFORMING AS MANY MEMORIZED SHAKESPEAREAN MONOLOGUES IN A ROW AS POSSIBLE. FIFTY-FIVE YOUNG COMPANY MEMBERS PERFORMED A TOTAL OF 556 MONOLOGUES IN 2020/2021'S BARD-O-THON, AND A PRESENTATION OF SOME OF THEIR WORK WAS VIEWED IN A FACEBOOK LIVE EVENT. THIS FUNDRAISER COLLECTED MORE THAN \$17,000 IN PLEDGES FROM FRIENDS AND FAMILY TO HELP SUPPORT SHAKESPEARE PROGRAMMING AT FIRST STAGE. FIRST STAGE'S NEXT STEPS PROGRAM WAS ESTABLISHED IN 2012 AS A MUSICAL THEATRE AND ACTING PROGRAM DESIGNED SPECIFICALLY FOR STUDENTS ON THE AUTISM SPECTRUM. THE PROGRAM PROVIDES AN OPPORTUNITY FOR STUDENTS TO DEVELOP SOCIAL SKILLS AND ARTISTIC EXPRESSION IN A WELCOMING AND SUPPORTIVE ENVIRONMENT. DURING THE SUMMER, NEXT STEPS ACADEMY CLASSES ARE USUALLY HELD AS WEEKLONG SESSIONS. IN ADDITION, DURING THE SCHOOL YEAR, CLASSES ARE USUALLY HELD AS ONE-HOUR SATURDAY CLASSES AT THE MILWAUKEE YOUTH ARTS CENTER OR AS WORKSHOPS IN COMMUNITY CLASSROOMS, AS REQUESTED. HOWEVER, DURING 2020/2021, TO ENSURE THE SAFETY OF OUR STUDENTS AND STAFF DURING THE COVID PANDEMIC, FIRST STAGE TRANSITIONED ALL NEXT STEPS CLASSES TO THE ONLINE ZOOM PLATFORM. ALL CLASSES CONTINUED TO BE TAUGHT BY PROFESSIONAL TEACHING ARTISTS WITH SPECIAL EDUCATION TRAINING AND FOLLOWED THE SAME THEATER-BASED CURRICULUM THE EXPLORATION OF ACTING, SINGING, DANCING AND IMPROVISATION, THROUGH WHICH STUDENTS IMPROVED THEIR SOCIAL UNDERSTANDING, FINE AND GROSS MOTOR SKILLS, EMPATHY, CONVERSATION SKILLS, PUBLIC SPEAKING, AND CONFIDENCE. IN 2020/2021, NEXT STEPS HAD 11 UNIQUE STUDENTS WITH 47 ENROLLMENTS. FIRST STAGE'S STUDENT ADVISORY BOARD WAS CREATED IN 2013/2014 OUT OF A NEED FOR THE STUDENT'S VOICE TO BE HEARD IN MAKING DECISIONS ABOUT ACADEMY PROGRAMMING AND POLICIES. BY 2014/2015, THE SAB DOUBLED IN SIZE AND ADDED AN OPPORTUNITY BEGINNING IN 2015/2016 FOR TWO REPRESENTATIVES TO SIT ON THE FIRST STAGE BOARD OF DIRECTORS. EACH SUMMER, THEATER ACADEMY STUDENTS EMBARK ON THEIR KID-TO-KID CAMPAIGN. OVER THE COURSE OF 8 WEEKS, THE STUDENTS DONATE THEIR DOLLARS AND COINS, HOLD FUND-RAISERS, MAKE CHALLENGES TO ONE ANOTHER, ETC., TO RAISE MONEY FOR THE FAMILY PARTNERSHIP PROGRAM, WHICH OFFERS FINANCIAL AID TO STUDENTS WHO NEED FINANCIAL SUPPORT. THE STUDENT'S ANNUAL KID-TO-KID CAMPAIGN RAISES SEVERAL THOUSAND DOLLARS TO SUPPORT YOUNG PEOPLE IN THE FAMILY PARTNERSHIP PROGRAM.

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

IN 1987, FIRST STAGE BEGAN AS A SMALL THEATER COMPANY WITH A GOAL OF PROVIDING PROFESSIONAL THEATER FOR YOUNG PEOPLE AND FAMILIES. NOW IN ITS 34RD SEASON, FIRST STAGE IS ONE OF THE NATION'S ACCLAIMED PROFESSIONAL THEATERS FOR YOUNG AUDIENCES, AND THE SECOND LARGEST THEATER COMPANY IN MILWAUKEE. IN A NORMAL NON-COVID SEASON, FIRST STAGE OFFERS A SEASON OF PROFESSIONAL THEATER FOR YOUNG PEOPLE AND FAMILIES WITH TITLES CHOSEN FOR THEIR EDUCATIONAL CONTENT, SOCIAL SIGNIFICANCE, AND THEIR ABILITY TO SPARK CONVERSATION AT HOME AND IN CLASSROOMS. CLASSROOM TEACHERS USE FIELD TRIPS TO FIRST STAGE AS MEANS TO HELP DEVELOP LITERACY AND ENHANCE LEARNING ACROSS THE CURRICULUM, INCLUDING TEACHER ENRICHMENT GUIDES AND WORKSHOP OPPORTUNITIES THAT ALIGN EACH PLAY TO KEY COMMON CORE STATE STANDARDS AND WISCONSIN MODEL ACADEMIC STANDARDS. THE 2020/2021 FISCAL YEAR WAS NOT A USUAL THEATRICAL SEASON FOR FIRST STAGE. IN A TYPICAL YEAR, FIRST STAGE WOULD NORMALLY OFFER A NINE OR TEN-PLAY SEASON, WITH OVER 460 PERFORMANCES AND NEARLY 110,000 AUDIENCE MEMBERS BETWEEN PUBLIC AND SCHOOL SHOWS. BUT DUE TO THE LIMITATIONS NECESSITATED BY THE COVID PANDEMIC, FIRST STAGE'S THEATER PRODUCTIONS WERE ALL PERFORMED VIRTUALLY, WITH MOST EVEN BEING REHEARSED VIRTUALLY. DESPITE THE CHALLENGES, THROUGH 46 PRE-RECORDED- OR LIVE-STREAMED PERFORMANCES, FIRST STAGE WAS STILL ABLE TO REACH 26,212 TOTAL AUDIENCE MEMBERS AND CAST 86 YOUNG PERFORMERS THROUGH ITS AGE-APPROPRIATE CASTING. AS FIRST STAGE IS COMMITTED TO PRESENTING PROFESSIONAL THEATER PRODUCTIONS, REGARDLESS OF CHALLENGES, THE ORGANIZATION PIVOTED AWAY FROM THE PHYSICAL THEATER SPACE IN 2020/2021 AND PROVIDED INNOVATIVE THEATRICAL EXPERIENCES FOR REMOTE VIEWING. SEVERAL EXTRAORDINARY EXAMPLES ARE LISTED HERE: WITH PERMISSION FROM OUR FRIENDS AT CHARACTER ARTS, LLC, FIRST STAGE FILMED CHRISTMASTOWN COMES TO FIRST STAGE, WRITTEN BY JOSE CASAS, JEFF FRANK, AND SAMANTHA MONTGOMERY. FIRST STAGE STAFF (FROM NEARLY EVERY DEPARTMENT) AND BOTH YOUNG AND ADULT PERFORMERS TOLD THE STORY OF HOW THE FOLKS IN SANTA'S CHRISTMASTOWN, WHEN THEY HEARD FIRST STAGE WOULDN'T BE ABLE TO PRODUCE RUDOLPH'S STORY THAT YEAR, DECIDED TO HELP. MISFIT TOYS, THE ELVES, SAM THE SNOWMAN, AND THE BUMBLE CAME TO FIRST STAGE TO SPREAD HOLIDAY CHEER TO THE STAFF. THIS HOLIDAY SHOWPIECE, THOUGH FUNNY AND HEARTWARMING, PROVIDED A WINDOW INTO THE STRUGGLES OF LIVE THEATER DURING A DIFFICULT TIME. FIRST STAGE PARTNERED WITH MILWAUKEE'S INDIAN COMMUNITY SCHOOL TO PRODUCE COPPER HORNS IN WATER BY TY DEFOE. THIS BEAUTIFUL NEW PIECE WAS PART OF FIRST STAGE'S AMPLIFY SERIES, WAS BASED IN AN ANISHINAABE STORYTELLING TRADITION, AND WAS PERFORMED MOSTLY BY STUDENTS FROM THE SCHOOL AND ONE ADULT. UNMUTED BY ALVARO SAAR RIOS, WITH MUSIC AND LYRICS BY DEBORAH WICKS LA PUMA, WAS ALSO PART OF THE AMPLIFY SERIES. PERFORMED ENTIRELY BY YOUNG PERFORMERS, UNMUTED TOLD THE STORY OF A GROUP OF STUDENTS IN A VIRTUAL GYM CLASS, PLAYING A GAME OF SECRET OR DARE, WHEN THEIR TEACHER IS ACCIDENTLY KICKED OUT OF THE ZOOM ROOM. THE STUDENTS SHARE THEIR LOVE OF TUESDAY TACOS, THEIR FRUSTRATIONS WITH ONLINE SCHOOL, AND WHAT THEY MISS MOST. THE PRODUCTION WAS PERFORMED IN ENGLISH WITH SOME SPANISH LYRICS. A FIRST-OF-ITS-KIND PLAY, THE QUEST FOR SOLOMON'S TREASURE, BY JOHN MACLAY AND JEREMY TARDY, WAS STREAMED OVER SEVEN EPISODES IN THE FALL OF 2021. THE PRODUCTION TOLD THE STORY OF A LONG-RUMORED LOST TREASURE IN MILWAUKEE. EACH 15-20 MINUTE EPISODE ENDED WITH A NEW CLUE BEING REVEALED AND WITH THE NEXT EPISODE OPENING WITH THE YOUNG PEOPLE WORKING TOGETHER TO SOLVE THE CLUE. THIS ORIGINAL SERIES WAS A LITTLE BIT GOONIES, A LITTLE BIT NATIONAL TREASURE, AND A WHOLE LOT MILWAUKEE. IN ESCAPE FROM PELIGRO ISLAND, A CREATE YOUR OWN ADVENTURE PLAY BY FINEGAN KRUCKEMEYER, PERFORMANCES WERE LIVE-STREAMED WITH AUDIENCES AT HOME VOTING TO DECIDE WHAT OUR UNLIKELY YOUNG HERO WOULD DO AFTER BEING STRANDED ON A DESERT ISLAND. OTHER PRODUCTIONS DURING THE 2020/2021 SEASON INCLUDED: FIRST STAGE YOUNG PERFORMER VIRTUAL SHOWCASE IN CONJUNCTION WITH THE MILWAUKEE BLACK THEATER FESTIVAL. A READING OF APOLLO AND THE TRIALS OF HERCULES A PLAY BY JOE FOUST AND JOHN MACLAY. THE GIRL WHO SWALLOWED A CACTUS BY ERIC COBLE AND PERFORMED BY MILWAUKEE ACTRESS AND FIRST STAGE THEATER AND THEATER ACADEMY ALUMNA KAREN ESTRADA. SCENES AND MONOLOGUES FROM THE UTAH SHAKESPEARE FESTIVAL'S HIGH SCHOOL COMPETITION, PRESENTED BY FIRST STAGE'S YOUNG COMPANY, AN ADVANCED ACTOR-TRAINING PROGRAM FOR HIGH SCHOOL STUDENTS. THE TWO GENTLEMEN OF VERONA BY WILLIAM SHAKESPEARE, PRESENTED BY THE YOUNG COMPANY. THE CRUCIBLE BY ARTHUR MILLER, PRESENTED BY THE YOUNG COMPANY. SHE KILLS MONSTERS BY QUI NGYUEN. AND ADVENTURES WITH THE THREE LITTLE PIGS INSPIRED BY THE THREE LITTLE PIGS BY JAMES MARSHALL.

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**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ALEX KRAMER ..... PAST PRESIDENT	0.90 .....	X		X				0	0	0
LAUREN PAGENKOPF ..... DIRECTOR	0.30 .....	X						0	0	0
DARREN GOLDSTEIN ..... TREASURER	0.90 .....	X		X				0	0	0
CARYN ESTEN ..... PRESIDENT	0.90 .....	X		X				0	0	0
TAMI MARTIN ..... SECRETARY	0.90 .....	X		X				0	0	0
NICOLE ANGRESANO ..... DIRECTOR	0.30 .....	X						0	0	0
SUZANNE CLAUSING ..... DIRECTOR	0.30 .....	X						0	0	0
BRIAN GILPIN ..... DIRECTOR	0.30 .....	X						0	0	0
ERIC MAASSEN ..... DIRECTOR	0.30 .....	X						0	0	0
CHRISTOPHER MARSCHKA ..... VICE PRESIDENT	0.90 .....	X		X				0	0	0



**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
SAGAR MURTHY ..... DIRECTOR	0.30 .....	X						0	0	0
MELISSA NELSON ..... DIRECTOR	0.30 .....	X						0	0	0
KATHLEEN DOHEARTY ..... DIRECTOR	0.30 .....	X						0	0	0
CORRIE PRUNUSKE ..... DIRECTOR	0.30 .....	X						0	0	0
DAN KEMPKEN ..... DIRECTOR	0.30 .....	X						0	0	0
KRISTEN SEVERSON ..... VICE PRESIDENT	0.90 .....	X		X				0	0	0
KRISTIN SHEEHAN ..... DIRECTOR	0.30 .....	X						0	0	0
BRENT SULLIVAN ..... DIRECTOR	0.30 .....	X						0	0	0
KAREN GUY ..... VICE PRESIDENT	0.90 .....	X		X				0	0	0
SALLY CARTWRIGHT ..... DIRECTOR	0.30 .....	X						0	0	0

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ELEANOR HANNON ..... DIRECTOR	0.30 .....	X						0	0	0
KATE KETELHOHN ..... DIRECTOR	0.30 .....	X						0	0	0
TIM LANTZ ..... DIRECTOR	0.30 .....	X						0	0	0
LAURA ORR ..... DIRECTOR	0.30 .....	X						0	0	0
JEFF SPENCE ..... DIRECTOR	0.30 .....	X						0	0	0
SCOTT STIVERSON ..... DIRECTOR	0.30 .....	X						0	0	0
CHRISTINE TOWNSEND ..... DIRECTOR	0.30 .....	X						0	0	0
ELIZABETH CORRY ..... MANAGING DIR	40.00 .....			X				102,111	0	12,024
JEFF FRANK ..... ART DIRECTOR	40.00 .....			X				102,537	0	19,502
DEBBIE MOODY ..... FINANCE DIR	40.00 .....			X				76,848	0	5,676

**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  
**2020**  
**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

**Name of the organization**  
FIRST STAGE MILWAUKEE

**Employer identification number**  
39-1634828

**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) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . .						
<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 Total.</b> Add lines 1 through 3						
<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 Public support.</b> Subtract line 5 from line 4.						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>7</b> Amounts from line 4. . .						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. . . .						
<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 Total support.</b> Add lines 7 through 10						
<b>12</b> Gross receipts from related activities, etc. (see instructions) . . . . .					<b>12</b>	
<b>13 First 5 years.</b> 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 <b>stop here</b> . . . . . ▶ <input type="checkbox"/>						

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

<b>14</b> Public support percentage for 2020 (line 6, column (f) divided by line 11, column (f)) . . . . .	<b>14</b>	
<b>15</b> Public support percentage for 2019 Schedule A, Part II, line 14 . . . . .	<b>15</b>	
<b>16a 33 1/3% support test—2020.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . . ▶ <input type="checkbox"/>		
<b>b 33 1/3% support test—2019.</b> 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 <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . . ▶ <input type="checkbox"/>		
<b>17a 10%-facts-and-circumstances test—2020.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ <input type="checkbox"/>		
<b>b 10%-facts-and-circumstances test—2019.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ <input type="checkbox"/>		
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . . ▶ <input type="checkbox"/>		

**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 (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . .	2,935,773	2,446,592	2,403,963	2,655,230	4,003,625	14,445,183
<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 . . . . .	3,083,297	3,139,037	3,165,660	2,596,446	503,200	12,487,640
<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 Total.</b> Add lines 1 through 5 . . . . .	6,019,070	5,585,629	5,569,623	5,251,676	4,506,825	26,932,823
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons . . . . .	113,718	107,355	158,214	308,313	313,356	1,000,956
<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. . . . .						0
<b>c</b> Add lines 7a and 7b. . . . .	113,718	107,355	158,214	308,313	313,356	1,000,956
<b>8 Public support.</b> (Subtract line 7c from line 6.) . . . . .						25,931,867

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>9</b> Amounts from line 6. . . . .	6,019,070	5,585,629	5,569,623	5,251,676	4,506,825	26,932,823
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .	29,508	29,339	45,058	41,282	42,061	187,248
<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. . . . .	29,508	29,339	45,058	41,282	42,061	187,248
<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.) . . . . .	9,833	10,627	3,221	3,606	9,910	37,197
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.) . . . . .	6,058,411	5,625,595	5,617,902	5,296,564	4,558,796	27,157,268

**14 First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here.** . . . . .

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

<b>15</b> Public support percentage for 2020 (line 8, column (f) divided by line 13, column (f)) . . . . .	<b>15</b>	95.490 %
<b>16</b> Public support percentage from 2019 Schedule A, Part III, line 15 . . . . .	<b>16</b>	96.630 %

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

<b>17</b> Investment income percentage for <b>2020</b> (line 10c, column (f) divided by line 13, column (f)) . . . . .	<b>17</b>	0.690 %
<b>18</b> Investment income percentage from <b>2019</b> Schedule A, Part III, line 17 . . . . .	<b>18</b>	0.550 %

**19a 33 1/3% support tests—2020.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . .

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

**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 box 12a, of Part I, complete Sections A and B. If you checked box 12b, of Part I, complete Sections A and C. If you checked box 12c, of Part I, complete Sections A, D, and E. If you checked box 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>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>3a</b>	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
<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>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>4a</b>	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
<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>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>5a</b>	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
<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>c</b>	<b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<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>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>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>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>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>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>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>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>		

**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 lines 11b and 11c below, the governing body of a supported organization?		
<b>b</b>	A family member of a person described in 11a above?		
<b>c</b>	A 35% controlled entity of a person described in line 11a or 11b above? <i>If "Yes" to 11a, 11b, or 11c, provide detail in Part VI.</i>		

**Section B. Type I Supporting Organizations**

		Yes	No
<b>1</b>	Did the officers, 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 line 2 above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <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 lines 2a and 2b 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>		
<b>b</b>	Did the activities described in line 2a 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 lines 3a and 3b 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>If "Yes" or "No" 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 (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 (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 ( <i>explain in detail in Part VI</i> ):		
<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 0.015 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 0.035	<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>1</b>	
<b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	<b>2</b>	
<b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations	<b>3</b>	
<b>4</b> Amounts paid to acquire exempt-use assets	<b>4</b>	
<b>5</b> Qualified set-aside amounts ( <i>prior IRS approval required - provide details in Part VI</i> )	<b>5</b>	
<b>6</b> Other distributions ( <i>describe in Part VI</i> ). See instructions	<b>6</b>	
<b>7 Total annual distributions.</b> Add lines 1 through 6.	<b>7</b>	
<b>8</b> Distributions to attentive supported organizations to which the organization is responsive ( <i>provide details in Part VI</i> ). See instructions	<b>8</b>	
<b>9</b> Distributable amount for 2020 from Section C, line 6	<b>9</b>	
<b>10</b> Line 8 amount divided by Line 9 amount	<b>10</b>	

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

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

# Supplemental Financial Statements

OMB No. 1545-0047  
**2020**  
**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**  
FIRST STAGE MILWAUKEE

**Employer identification number**  
39-1634828

**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
<b>1</b> Total number at end of year . . . . .		
<b>2</b> Aggregate value of contributions to (during year)		
<b>3</b> Aggregate value of grants from (during year)		
<b>4</b> 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
<b>a</b> Total number of conservation easements . . . . .	<b>2a</b>
<b>b</b> Total acreage restricted by conservation easements . . . . .	<b>2b</b>
<b>c</b> Number of conservation easements on a certified historic structure included in (a) . . . . .	<b>2c</b>
<b>d</b> Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register . . . . .	<b>2d</b>

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

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

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

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

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

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

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

**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:
- c** Beginning balance . . . . .
  - d** Additions during the year . . . . .
  - e** Distributions during the year . . . . .
  - f** Ending balance . . . . .

	Amount
<b>1c</b>	
<b>1d</b>	
<b>1e</b>	
<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 . . . . .	741,688	737,727	726,214	720,964	645,078
<b>b</b> Contributions . . . . .					
<b>c</b> Net investment earnings, gains, and losses	145,086	31,731	41,573	51,150	76,886
<b>d</b> Grants or scholarships . . . . .					
<b>e</b> Other expenditures for facilities and programs . . . . .	31,170	27,770	30,060	45,900	
<b>f</b> Administrative expenses . . . . .					1,000
<b>g</b> End of year balance . . . . .	855,604	741,688	737,727	726,214	720,964

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a** Board designated or quasi-endowment ▶ 100.000 %
- b** Permanent endowment ▶ .....
- c** Term 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:

- (i)** Unrelated organizations . . . . .
- (ii)** Related organizations . . . . .

	Yes	No
<b>3a(i)</b>		No
<b>3a(ii)</b>		No
<b>3b</b>		

- b** If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? . . . . .
- 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		58,024	58,024	0
<b>d</b> Equipment . . . . .		1,056,812	978,066	78,746
<b>e</b> Other . . . . .		342,492	220,008	122,484
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				201,230

**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 (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives . . . . .		
(2) Closely-held equity interests . . . . .		
(3) Other _____		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
<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: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
<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)	
(10)	
<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.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) OTHER LIABILITIES	262,164
(3) CAPITAL LEASE	6,638
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col.(B) line 25.)	268,802

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>	4,795,867
<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>	308,052	
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>	225	
<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>	308,277
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .		<b>3</b>	4,487,590
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b> :			
<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>	-7,643	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .		<b>4c</b>	-7,643
<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>	4,479,947

**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>	2,898,528
<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>	225	
<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>	7,643	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .		<b>2e</b>	7,868
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .		<b>3</b>	2,890,660
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line <b>1</b> :			
<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>	0
<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>	2,890,660

**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
See Additional Data Table	

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

Return Reference	Explanation

# Additional Data

**Software ID:**  
**Software Version:**  
**EIN:** 39-1634828  
**Name:** FIRST STAGE MILWAUKEE

## Supplemental Information

Return Reference	Explanation
PART V, LINE 4:	THE BOARD-DESIGNATED ENDOWMENT IS MADE UP OF TWO PARTS. THE FIRST PART, APPROXIMATELY 20% OF THE QUASI-ENDOWMENT, IS AVAILABLE FOR USE BY THE ORGANIZATION TO PROVIDE EMERGENCY RESERVE FUNDS, ALLEVIATE BUDGET SHORTFALLS, AND TO PROVIDE OPERATING FUNDS FOR NEW BUSINESS INITIATIVES APPROVED BY THE BOARD OF DIRECTORS. THE SECOND PART, APPROXIMATELY 80% OF THE QUASI-ENDOWMENT, IS INTENDED TO PROVIDE LONG-TERM STABILITY TO THE ORGANIZATION AND ANNUAL CASH FLOW FROM INVESTMENT INCOME TO FUND ONGOING OPERATIONS AND DEVELOPMENT FOR FIRST STAGE



## Supplemental Information

Return Reference	Explanation
PART X, LINE 2:	THE ORGANIZATION IS EXEMPT FROM INCOME TAX UNDER SECTION 501(C)(3) OF INTERNAL REVENUE CODE AND IS CLASSIFIED AS OTHER THAN A PRIVATE FOUNDATION. MANAGEMENT HAS REVIEWED ALL TAX POSITIONS RECOGNIZED IN PREVIOUSLY FILED TAX RETURNS AND THOSE EXPECTED TO BE TAKEN IN FUTURE TAX RETURNS. AS OF JUNE 30, 2021, THE ORGANIZATION HAD NO AMOUNTS RELATED TO UNRECOGNIZED INCOME TAX BENEFITS AND NO AMOUNTS RELATED TO ACCRUED INTEREST AND PENALTIES. THE ORGANIZATION DOES NOT ANTICIPATE ANY SIGNIFICANT CHANGES TO UNRECOGNIZED INCOME TAX BENEFITS OVER THE NEXT YEAR.

## Supplemental Information

Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS:	ACADEMY MERCH EXPENSE AND SALES TAX TO COMPLETE COST OF GOODS SOLD -7,643.

## Supplemental Information

Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS:	ACADEMY MERCH EXPENSE AND SALES TAX TO COMPLETE COST OF GOODS SOLD 7,643.

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

Department of the Treasury  
Internal Revenue Service

## Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.  
 Attach to Form 990 or Form 990-EZ.  
 Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

# 2020

**Open to Public Inspection**

Name of the organization  
**FIRST STAGE MILWAUKEE**

**Employer identification number**  
39-1634828

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

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- |   |   |
|---|---|
| <p><b>a</b> <input type="checkbox"/> Mail solicitations</p> <p><b>b</b> <input type="checkbox"/> Internet and email solicitations</p> <p><b>c</b> <input type="checkbox"/> Phone solicitations</p> <p><b>d</b> <input type="checkbox"/> In-person solicitations</p> | <p><b>e</b> <input type="checkbox"/> Solicitation of non-government grants</p> <p><b>f</b> <input type="checkbox"/> Solicitation of government grants</p> <p><b>g</b> <input type="checkbox"/> Special fundraising events</p> |
|---|---|
- 2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  Yes  No
- b** If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
<b>Total</b> . . . . . ▶						

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

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

Revenue	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
	<u>ANNUAL BALL</u> (event type)	<u>ANNUAL WINE EVENT</u> (event type)	<u>4</u> (total number)	(add col. (a) through col. (c))
<b>1</b> Gross receipts . . . . .	162,784	86,746	2,241	251,771
<b>2</b> Less: Contributions . . . . .	127,145	60,482	2,241	189,868
<b>3</b> Gross income (line 1 minus line 2) . . . . .	35,639	26,264		61,903
Direct Expenses	<b>4</b> Cash prizes . . . . .			
	<b>5</b> Noncash prizes . . . . .	32,712	17,211	49,923
	<b>6</b> Rent/facility costs . . . . .	0		
	<b>7</b> Food and beverages . . . . .	1,413	11,674	13,087
	<b>8</b> Entertainment . . . . .	4,911	875	5,786
	<b>9</b> Other direct expenses . . . . .	5,072	340	544
<b>10</b> Direct expense summary. Add lines 4 through 9 in column (d) . . . . . ▶				74,752
<b>11</b> Net income summary. Subtract line 10 from line 3, column (d) . . . . . ▶				-12,849

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

Revenue	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))
<b>1</b> Gross revenue . . . . .				
Direct Expenses	<b>2</b> Cash prizes . . . . .			
	<b>3</b> Noncash prizes . . . . .			
	<b>4</b> Rent/facility costs . . . . .			
	<b>5</b> Other direct expenses . . . . .			
	<b>6</b> Volunteer labor . . . . .	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
<b>7</b> Direct expense summary. Add lines 2 through 5 in column (d) . . . . . ▶				
<b>8</b> Net gaming income summary. Subtract line 7 from line 1, column (d) . . . . . ▶				

**9** Enter the state(s) in which the organization conducts gaming activities: \_\_\_\_\_

**a** Is the organization licensed to conduct gaming activities in each of these states? . . . . .  Yes  No

**b** If "No," explain: \_\_\_\_\_

---

**10a** Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? . . . . .  Yes  No

**b** If "Yes," explain: \_\_\_\_\_

---

- 11** Does the organization conduct gaming activities with nonmembers?  Yes  No
- 12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  Yes  No
- 13** Indicate the percentage of gaming activity conducted in:
 

<b>a</b> The organization's facility	<b>13a</b>	%
<b>b</b> An outside facility	<b>13b</b>	%

**14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ .....

Address ▶ .....

**15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue?  Yes  No

**b** If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ▶ \$ \_\_\_\_\_.

**c** If "Yes," enter name and address of the third party:

Name ▶ .....

Address ▶ .....

**16** Gaming manager information:

Name ▶ .....

Gaming manager compensation ▶ \$ .....

Description of services provided ▶ .....

- Director/officer                       Employee                       Independent contractor

**17** Mandatory distributions:

**a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No

**b** Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ \_\_\_\_\_

**Part IV Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Return Reference	Explanation
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**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2020**

▶ **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  
FIRST STAGE MILWAUKEE

Employer identification number  
39-1634828

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art . . . . .				
2 Art—Historical treasures . . . . .				
3 Art—Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .	X		43,446	FMV
6 Cars and other vehicles . . . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities—Publicly traded . . . . .	X	3	16,717	FMV
10 Securities—Closely held stock . . . . .				
11 Securities—Partnership, LLC, or trust interests . . . . .				
12 Securities—Miscellaneous . . . . .				
13 Qualified conservation contribution—Historic structures . . . . .				
14 Qualified conservation contribution—Other . . . . .				
15 Real estate—Residential . . . . .				
16 Real estate—Commercial . . . . .				
17 Real estate—Other . . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ▶ ( <u>COSTUME SUPPLIES</u> )	X	2	1,040	FMV
26 Other ▶ ( _____ )				
27 Other ▶ ( _____ )				
28 Other ▶ ( _____ )				

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	
----	--

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

	Yes	No
30a		No

b If "Yes," describe the arrangement in Part II.

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

31	Yes	
----	-----	--

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

32a		No
-----	--	----

b If "Yes," describe in Part II.

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

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

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

OMB No. 1545-0047

**2020**

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.

**Open to Public Inspection**

Department of the Treasury

Name of the Organization

FIRST STAGE MILWAUKEE

Employer identification number

39-1634828

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
FORM 990, PART III, LINE 3	<p>THE COVID-19 PANDEMIC STRUCK IN MARCH 2020, RIGHT IN THE HEIGHT OF FIRST STAGE'S SPRING IN-SCHOOL PROGRAMMING AND AFTER THE OPENING WEEKEND OF ONE OF OUR TOP SELLING THEATER PRODUCTIONS. THE ORGANIZATION WAS FORCED TO CANCEL NEARLY 600 IN-SCHOOL WORKSHOPS, CLOSE ALL FUTURE PERFORMANCES OF "THE LEGEND OF ROCK, PAPER, SCISSORS AND "GRETEL!, AND CANCEL REHEARSALS AND PERFORMANCES OF OUR LAST SHOW OF THE 2019/2020 SEASON "THE AMAZING LEMONADE GIRL." AS THE PANDEMIC CONTINUED THROUGH 2020/2021, FIRST STAGE'S ROLE DID NOT CHANGE; ONLY THE MANNER IN WHICH THE ORGANIZATION REACHED STUDENTS, YOUNG PEOPLE AND FAMILIES CHANGED. FIRST STAGE PIVOTED ITS PROGRAMMING TO VIRTUAL PLATFORMS. THEATER IN EDUCATION PROGRAMMING CONTINUED TO REACH STUDENTS THROUGH ITS ON-LINE LIBRARY OF WORKSHOPS AND ART-INTEGRATED CONTENT. THEATER ACADEMY CLASSES MOVED ON-LINE AS WELL, OR MAINTAINED IN-PERSON CLASSES WITH LIMITED CAPACITY AND SPATIAL DISTANCING. AND FIRST STAGE PROVIDED THEATER PRODUCTION EXPERIENCES ON-LINE (SOMETIMES LIVE STREAMED, SOMETIMES PRE-RECORDED) VIA ITS WEBSITE AND YOU TUBE PAGE. THE ORGANIZATION OFFERED SELECTED SCENES AND SONGS FROM PRIOR PRODUCTIONS, YOUNG COMPANY PRESENTATIONS, CHOOSE-YOUR-OWN ADVENTURE PLAYS, A RUDOLPH-INSPIRED SHORT HOLIDAY FILM, AND SEVERAL OTHER PIECES. THESE PRODUCTION PIECES WERE PROVIDED TO THE PUBLIC FREE OR AT VERY REDUCED PRICES.</p>

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
FORM 990, PART VI, SECTION A, LINE 4	BYLAWS WERE REVISED IN JUNE 2021.

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
FORM 990, PART VI, SECTION B, LINE 11B	LINE 11B EXPLANATION - THE 990 IS JOINTLY PREPARED BY THE ORGANIZATION'S DIRECTOR OF FINANCE AND THE FIRM RITZHOLMAN CPAS. WHEN THE PRELIMINARY 990 IS COMPLETE, AN ELECTRONIC COPY IS PROVIDED TO MEMBERS OF THE FINANCE COMMITTEE. THESE MEMBERS REVIEW THE 990 AND MAKE COMMENTS OR SUGGESTIONS FOR CHANGES TO THE PREPARERS. ANY NECESSARY MODIFICATIONS ARE MADE, AND THE FINAL DRAFT OF THE 990 IS THEN REVIEWED BY THE TREASURER FOR ACCURACY. THE APPROVED FINAL COPY OF THE TAX RETURN IS THEN MADE AVAILABLE TO ALL MEMBERS OF THE BOARD OF DIRECTORS. AFTER RESPONDING TO ANY INQUIRIES BY THE BOARD OF DIRECTORS, THE 990 IS PRINTED AND SIGNED BY THE PREPARERS AND THE TREASURER OR OTHER APPROVED OFFICER OF THE BOARD BEFORE BEING FILED WITH THE IRS.

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
FORM 990, PART VI, SECTION B, LINE 12C	<p>THE ORGANIZATION'S FISCAL YEAR RUNS FROM JULY 1 TO JUNE 30. HOWEVER, THE MAJORITY OF THE FINANCIAL ACTIVITY FOR THE ORGANIZATION OCCURS DURING THE THEATRICAL SEASON, WHICH RUNS FROM SEPTEMBER THROUGH MAY. IT IS DURING THIS TIMEFRAME THAT THE ORGANIZATION HAS REGULAR BOARD MEETINGS. AT THE FIRST BOARD MEETING OF THE SEASON, IN SEPTEMBER, THE CONFLICT OF INTEREST POLICY IS DISTRIBUTED TO EACH DIRECTOR. THE DIRECTOR MUST COMPLETE THE SIGNATURE PAGE OF THE POLICY, CONFIRMING THAT THEY UNDERSTAND THE POLICY, AND RETURN THAT PAGE TO THE GENERAL MANAGER. ANY MEMBER OF THE BOARD WHO REFUSES OR FAILS TO SIGN SUCH A STATEMENT SHALL BE PROHIBITED FROM PARTICIPATING IN DISCUSSION OR ACTION BY THE BOARD. IF THEN DURING THE YEAR A DIRECTOR LEARNS OF A CONFLICT OF INTEREST, THEY MUST DISCLOSE IT TO THE BOARD. SUCH A CONFLICT WILL BE ENTERED INTO THE MINUTES OF THE MEETING. AT FUTURE DISCUSSIONS OR VOTES TO WHICH THIS CONFLICT IS RELATED, THE DIRECTOR IS RECUSED FROM THE MEETING. TO ENSURE THE UTMOST EFFICACY OF THIS POLICY, THE GENERAL MANAGER CONDUCTS PERIODIC REVIEWS TO ENSURE THE SIGNING OF THE CONFLICT OF INTEREST STATEMENT AND ALSO REVIEWS THE ACTIONS TAKEN BY THE BOARD ON BEHALF OF THE ORGANIZATION. SUCH REVIEW IS INTENDED TO ENSURE THAT THE ORGANIZATION CONTINUES AT ALL TIMES TO BE OPERATED EXCLUSIVELY FOR THE ACHIEVEMENT OF ITS PUBLIC CHARITABLE PURPOSES, RATHER THAN FOR THE BENEFIT OF ONE OR MORE PRIVATE PERSONS.</p>

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
FORM 990, PART VI, SECTION B, LINE 15	THE RESULTS FROM TCG ARE ALSO USED BY THE BOARD AND MANAGING DIRECTOR TO SET SALARIES FOR ALL OTHER EMPLOYEES OF THE ORGANIZATION. NO DIRECTORS FROM THE BOARD ARE COMPENSATED FOR THEIR WORK AS A BOARD MEMBER. THE ORGANIZATION'S MANAGING DIRECTOR POSITION IS A PAID-EMPLOYEE POSITION. THIS POSITION'S BENEFITS(INSURANCE ETC) ARE THE SAME AS FOR ANY OTHER FULL-TIME, YEAR-ROUND EMPLOYEE OF THE ORGANIZATION. THE SALARY, HOWEVER, IS NEGOTIATED EVERY THREE YEARS WITH THE BOARD PRESIDENT AND THE BOARD TREASURER. DATA USED TO DETERMINE WHAT THAT SALARY SHOULD BE INCLUDES PUBLISHED CENSUS AND SURVEY RESULTS FROM OTHER LOCAL ORGANIZATIONS, BOTH CHARITABLE AND NOT, AS WELL AS NATIONAL SURVEY RESULTS FROM THE THEATER COMMUNICATIONS GROUP (TCG) OF OTHER THEATERS NATIONWIDE.

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	FIRST STAGE HAS BOTH PHYSICAL AND ELECTRONIC VERSIONS OF ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS. THESE DOCUMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST TO THE DIRECTOR OF FINANCE OR GENERAL MANAGER. IN ADDITION, THE FORM 990 IS PUBLISHED EACH YEAR ON GUIDESTAR.ORG, WHICH RECEIVES THE 990 FROM THE IRS.

**SCHEDULE R  
(Form 990)**

**Related Organizations and Unrelated Partnerships**

OMB No. 1545-0047

**2020**

**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  
FIRST STAGE MILWAUKEE

**Employer identification number**

39-1634828

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) 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) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
<b>(1)</b> MILWAUKEE YOUTH ARTS CENTER INC 325 W WALNUT ST  MILWAUKEE, WI 53212 11-3665475	HOUSES THE ADMINISTRATIVE, ACADEMY, AND	WI	501(C)(3)	509(A)(3), TYPE 1	NO		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) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage 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) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	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.

<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>Yes</b>	<b>No</b>
<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 . . . . .		<b>No</b>
<b>b</b>	Gift, grant, or capital contribution to related organization(s) . . . . .		<b>No</b>
<b>c</b>	Gift, grant, or capital contribution from related organization(s) . . . . .		<b>No</b>
<b>d</b>	Loans or loan guarantees to or for related organization(s) . . . . .	<b>Yes</b>	
<b>e</b>	Loans or loan guarantees by related organization(s) . . . . .		<b>No</b>
<b>f</b>	Dividends from related organization(s) . . . . .		<b>No</b>
<b>g</b>	Sale of assets to related organization(s) . . . . .		<b>No</b>
<b>h</b>	Purchase of assets from related organization(s) . . . . .		<b>No</b>
<b>i</b>	Exchange of assets with related organization(s) . . . . .		<b>No</b>
<b>j</b>	Lease of facilities, equipment, or other assets to related organization(s) . . . . .		<b>No</b>
<b>k</b>	Lease of facilities, equipment, or other assets from related organization(s) . . . . .	<b>Yes</b>	
<b>l</b>	Performance of services or membership or fundraising solicitations for related organization(s) . . . . .		<b>No</b>
<b>m</b>	Performance of services or membership or fundraising solicitations by related organization(s) . . . . .		<b>No</b>
<b>n</b>	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . . . .		<b>No</b>
<b>o</b>	Sharing of paid employees with related organization(s) . . . . .	<b>Yes</b>	
<b>p</b>	Reimbursement paid to related organization(s) for expenses . . . . .	<b>Yes</b>	
<b>q</b>	Reimbursement paid by related organization(s) for expenses . . . . .	<b>Yes</b>	
<b>r</b>	Other transfer of cash or property to related organization(s) . . . . .		<b>No</b>
<b>s</b>	Other transfer of cash or property from related organization(s) . . . . .		<b>No</b>

**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) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)MILWAUKEE YOUTH ARTS CENTER INC	D	9,000	AGREEMENT
(2)MILWAUKEE YOUTH ARTS CENTER INC	K	131,250	AMOUNT BILLED
(3)MILWAUKEE YOUTH ARTS CENTER INC	O	349,926	ACTUAL INCURRED
(4)MILWAUKEE YOUTH ARTS CENTER INC	P	1,750	ACTUAL INCURRED
(5)MILWAUKEE YOUTH ARTS CENTER INC	Q	2,566	ACTUAL INCURRED

**Part VI** **Unrelated Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

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

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

<b>Return Reference</b>	<b>Explanation</b>