SCANNED MAR 3 0 2010

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

_	For th	e 2008 calen	dar vear.	or tax year beg	inning 9/0	1	2008. a	and endin	g 8/	31		2009	
В		applicable		T tax your beg	<u></u> 370		, 2000, 4		<u>g</u> 0,		er Identif	ication Number	
Ь	$\overline{}$		Please use	DDO A DUOT T	רע דו אערה	C T IIID				1 .			
	H	dress change	IRS label or print								27128		
	∐ Na	me change	or type. See	265 EAST EAST ISLI	MAIN SI. DNV 117	30 #T00				E Telepho			
	Ind	tial return	specific	EW21 12PT	P, NI 11/	30				631	<u>-581-</u>	-5119	
	Те	rmination	Instruc- tions.										
	HAm	nended return	ĺ	1						G Gross re	eceints \$	1,219,173	3.
	\vdash	plication pending	F Name a	and address of princip	nal officer PA'	TRICIA ZABA	CK		H(a) Is this	a group retur			
	∟,~	plication perioling		AS C ABOVE		INICIN BIDIN	CIC			affiliates incl		₽™ 🛱	No
						T 40 474 141				attach a list		ructions)	
<u>-</u>		exempt statu		(c) (3)	(insert no)	4947(a)(1)	or	527					
<u>J_</u>	Web	osite: • N/							H(c) Group	exemption nu	ımber 🏲		
<u>K</u>		of organization	X Corpora	ation Trust	Association	Other ►	L Yea	ar of Formati	ion	M s	tate of le	gal domicile NY	
Pa	rt I	Summa											
,	1	Briefly descri	be the org	ganization's mis	sion or most s	ignificant activities	s. TO	PROMO'	TE AND	ENCOU	RAGE	INTEREST IN	Ĺ
a		THE PERF											_
Š													-
Activities & Governance	•												
ķ	2	Check this bo	- ~	if the organizati	on discontinue	d its operations o	r disnos	sed of mo	re than 2	5% of its	assets		
ŏ	_			bers of the gov			u.opuc			.0 / 0 0 10	3		1
ଷ						rning body (Part V	/I. line 1	1b)			4	_ _	0
ţţ			•	yees (Part V, III	_	,	•				5		29
₹				eers (estimate	-						6		0
Ä						II, line 12, column	ı (C)				7a		0.
		-		taxable income			. (-)				7b		0.
				100000								Current Year	÷
	_	0			. 113				-	rior Year	66		
e l			ontributions and grants (Part VIII, line 1h) rogram service revenue (Part VIII, line 2g)							7,4		8,98	
ē		10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)									1,209,32		
Revenue										4,6	40.	868	<u>8.</u>
-	11	Other revenue	e (Part VI	Theophili (A)	mes 5, 6d, 8c,	9c, 10c, and 11e	•)						
	12	Total revenue	- add li	rest8, through-	T (mush equal	Part VIII, column	(A), line	e 12)	<u> </u>	., <u>4</u> 58,7	39.	1,219,17	<u>3.</u>
	13	Grants and si	ımıla r am d	ounts paid (Parl	t IX, dollainn (A	.), lines 1-3)							
	14	Benefits paid	to a for	ოფოხ ფ იგემტე	llix, column (A)	, line 4)							
	15	Salaries, othe	er comper	isation, employ	ee berleffts (Pa	art IX, column (A)	, lines 5	5-10)		449,5	61.	395,14	7.
Ses		Salaries, other compensation, employee benefits (Part IX, column (A), line 5-10) Professional fundralising fees (Part IX, column (A), line 11e)											
Expenses			1	PEDELIN!									
ă			, -						}				
		-	-	X, column (A),		•				919,135.		839,94	
	18	Total expense	es Add fir	nes 13-17 (mus	t equal Part IX	, column (A), line	25)		1	., <u>368,6</u>	96.	1,235,09	<u>4.</u>
	19	Revenue less	expense:	s Subtract line	18 from line 1:	2				90,0	43.	<u>-15,92</u>	<u>1.</u>
៦ខ្ល			-						Begin	nning of Y	ear	End of Year	
Net Assets or Fund Balances	20	Total assets (Part X. Iu	ne 16)						212,2		142,59	7
88		Total liabilitie								200,8		147,130	
25			•			00							
. 1				nces Subtract	line 21 from III	1e 20			1	11,3	87.1	-4,533	<u>s.</u>
Pa	rt II	 	re Bloc										
		Under penaftie:	s of perjury, I	I declare that I have	examined this retur	n, including accompany cer) is based on all infor	ing schedu	ules and state	ements, and	to the best o	f my knov	vledge and belief it is	
		- X/A			1	,							
Sig	n	1 / Ca	Ru	<u> 10</u>	Mu	<u> </u>				<u> 3-10-1</u>	<u>ა</u>		
He	re	Signature of	of officer						Da	ite			
		► PATRI	CIA ZA	ABACK					DIREC	CTOR			
		Type or pri	int name and	title									
		1					Dat	te	C	heck if	Pre	parer's identifying as nba	17
Pai	d					- 1	.	3/9/1		elf- mployed ►		e instructions)	
Pre		Preparer's signature				CSA	3	וןדוכ	, O 61	прюуец	$\neg \mid \cdot \mid$	700004558	7
	er's			MATTON	CDA D C	- · · · · · · · · · · · · · · · · · · ·						10000 1770	<u> </u>
Üs	е	Firm's name (o yours if self-			CPA, P.C.	MT 000				_	^ ^^	20270	
On	ly	employed), address, and	employed). 555 BROADHOLLOW ROAD STE 202							EIN ► 20-0828372			
		ZIP + 4	MEL	VILLE, NY	11747				PI	hone no	<u>(631</u>		
May	the IF	RS discuss the	is return v	with the prepare	er shown above	? (see instruction	18).					X Yes No	<u>o</u>
BAA	For	Privacy Act a	nd Paper	work Reduction	n Act Notice, s	ee the separate ir	nstructio	ons.		TEEA0112L	12/22/0	8 Form 990 (200	08)

Form	n 990 (2008) BROADHOLLOW PLAYERS, LTD	11-2712804	Page 2
Par	t III Statement of Program Service Accomplishments (see instructions)		
1	Briefly describe the organization's mission TO PROMOTE AND ENCOURAGE INTEREST IN THE PERFORMING ARTS		
	10 FROMOTE AND ENCOURAGE INTEREST IN THE FERFORMING ARTS	·	
		·- 	
2	Did the organization undertake any significant program services during the year which were not listed o		▽
	Form 990 or 990-EZ? If 'Yes,' describe these new services on Schedule O	Yes	X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program se	rvices? Yes	X No
4	If 'Yes,' describe these changes on Schedule O Describe the exempt purpose achievements for each of the organization's three largest program service and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants are expenses, and revenue, if any, for each program service reported	s by expenses Section id allocations to others,	501(c)(3) the total
4 a	(Code) (Expenses \$ 1,231,094. including grants of \$) (F PROMOTE & ENCOURAGE INTEREST IN THE PERFORMING ARTS	tevenue \$ 1,21	8,305.)
_			
4 b	(Code) (Expenses \$ including grants of \$) (F	levenue \$)
4 c	(Code) (Expenses \$ including grants of \$) (Fig. 2)	evenue \$)
4d	Other program services (Describe in Schedule O)		
1.	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses ► \$ 1,231,094. (Must equal Part IX, Line 25, column (Expenses))	0))
<u> +e</u>	1, 231, 034. (Must equal Fait IA, Line 25, Column (E	<u> </u>	

			Γ.,	
		Γ	Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		х
				 -
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
·	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where 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	6		x
_				 -
7	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	7		<u>x</u> _
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21; 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			v
10	Schedule D, Part IV	10		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10	-	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If 'Yes,' complete Schedule D, Parts VI, VIII, IX, or X as applicable	11_	X	<u></u>
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was			1
	prepared in accordance with GAAP? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII'	12	_ X_	17
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13 14a		X
	Did the organization maintain an office, employees, or agents outside of the U.S.?	148		├ ^-
t	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? <i>If 'Yes,' complete Schedule F, Part I</i>	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II	15	_	Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III	16		х
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		<u>X</u>
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		Х
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		_X_
22	Did the organization report more than \$5,000 on Part IX, column (A), line 27 If 'Yes,' complete Schedule I, Parts I and III	_22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete Schedule J	23		x
0.4	Did the assessment being a too assess the side of the]		
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K If 'No, 'go to question 25	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25 a		X
t	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If 'Yes,' complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		Х
BAA		Form	990 ((2008)

Form 990 (2008) BROADHOLLOW PLAYERS, LTD

Part IV Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee.			
i	a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If 'Yes,' complete Schedule L, Part IV	28a		Х
İ	b Have a family member who had a direct or indirect business relationship with the organization? If 'Yes,' complete Schedule L, Part IV	28b		х
,	c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If 'Yes,' complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
BAA		Form	990 ((2008)

TEEA0104L 12/18/08

Statements Regarding Other IRS Filings and Tax Compliance Part V Yes No 1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of US Information Returns. Enter -0- if not applicable 1 a 42 16 0 **b** Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming Х 1 c (gambling) winnings to prize winners? 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 . 29 X 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return 3a Х b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O 3ь 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 Χ **b** if 'Yes,' enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts 5a 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 b c If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding 5с Prohibited Tax Shelter Transaction? 6a Did the organization solicit any contributions that were not tax deductible? 6a Х b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible? 6Ь 7 Organizations that may receive deductible contributions under section 170(c). X a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75? 7 a 7b b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 82827 7c 7ď d If 'Yes,' indicate the number of Forms 8282 filed during the year e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 7e benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f 7 g g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? Х h For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 7h Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 Х 9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. 9a a Did the organization make any taxable distributions under section 4966? X 9b Х b Did the organization make any distribution to a donor, donor advisor, or related person? 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 other members or shareholders. 11 a **b** Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12 a b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b BAA Form 990 (2008) Part VI Governance, Management and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Se	ection A.	Governing Body and Management				
	For each processe	'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, os, or changes in Schedule O. See instructions	describe the circumstances,		Yes	No
-	l a Enter the	number of voting members of the governing body	1a 1			
	b Enter the	number of voting members that are independent	1b			
2	2 Did any o officer, d	officer, director, trustee, or key employee have a family relationship or a business reirector, trustee or key employee? SEE SCHEDULE ${\tt Q}$.	lationship with any other	2	Х	
;	3 Did the o	rganization delegate control over management duties customarily performed by or us, directors or trustees, or key employees to a management company or other person	nder the direct supervision in?	3_		_X
4		rganization make any significant changes to its organizational documents prior Form 990 was filed?		4		Х
		rganization become aware during the year of a material diversion of the organization	n's assets?	5		Х
		organization have members or stockholders?		6		X
7		organization have members, stockholders, or other persons who may elect one or n g body? .	nore members of the	7 a		
	b Are any o	decisions of the governing body subject to approval by members, stockholders, or ot	her persons?	7b		X
8	3 Did the o the follow	rganization contemporaneously document the meetings held or written actions undeving	rtaken during the year by			
	a The gove	rning body?		8a		_X_
	b Each con	nmittee with authority to act on behalf of the governing body?		8b		<u>X</u>
9	a Does the	organization have local chapters, branches, or affiliates?		9a		<u>X</u>
	b If 'Yes,' cand brand	does the organization have written policies and procedures governing the activities of ches to ensure their operations are consistent with those of the organization?	f such chapters, affiliates,	9b		
10	Was a co describe	py of the Form 990 provided to the organization's governing body before it was filed in Schedule O the process, if any, the organization uses to review the Form 990 S	? All organizations must EE SCHEDULE O	10	х	
11	l Is there a organizat	any officer, director or trustee, or key employee listed in Part VII, Section A, who car ion's mailing address? If 'Yes,' provide the names and addresses in Schedule O	nnot be reached at the	11		Х
Se	ction B.	Policies				
			(Yes	No
12	2a Does the	organization have a written conflict of interest policy? If 'No,' go to line 13		12a		<u>X</u>
	to conflic		_	12b		X
	c Does the Schedule	organization regularly and consistently monitor and enforce compliance with the pole O how this is done	icy? If 'Yes,' describe in	12 c		<u>_x</u>
		organization have a written whistleblower policy?		13		_X_
14	Does the	organization have a written document retention and destruction policy?		14		_X_
15	Did the p persons,	rocess for determining compensation of the following persons include a review and comparability data, and contemporaneous substantiation of the deliberation and dec	approval by independent isson:			
	_	nization's CEO, Executive Director, or top management official?		15 a		<u>X</u>
		cers of key employees of the organization?		15 b		<u>X</u>
		the process in Schedule O (see instructions)				
16	a Did the o entity dur	rganization invest in, contribute assets to, or participate in a joint venture or similar ing the year?	arrangement with a taxable	16a		<u>X</u>
	ın joint ve	ias the organization adopted a written policy or procedure requiring the organization enture arrangements under applicable federal tax law, and taken steps to safeguard the respect to such arrangements?	to evaluate its participation the organization's exempt	16b		
Se		Disclosures				
		tates with which a copy of this Form 990 is required to be filed NY	 			_
18	Section 6	i104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, ar Indicate how you make these available. Check all that apply	nd 990-T (501(c)(3)s only) av	allabl	e for p	oublic
	Own	website Another's website X Upon request				
19	Describe	website Another's website X Upon request in Schedule O whether (and if so, how) the organization makes its governing documents available to the public	ents, conflict of interest poli	cy, ar	nd fina	ncıal

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

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) or more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order: individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons.

Check this box if the organization did no		sate a	any		_	irecto	or, ti			
(A)	(B)	(C) Position (check all that apply)						(D)	(E)	(F)
Name and Title	Average hours per week	ndividual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
PATRICIA ZABACK										
DIRECTOR	40	Х		X	Х			46,800.	0.	0.
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										<u> </u>
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	1									

Part VII Section A. Officers, Directors, Trus	tees, k	Се у	En	nplo	oye	es,	an	d Highest Con	pensated Emp	loyees (cont	.)
(A)	(B)			(6	c)			(D)	(E)	(F)	
Name and Title	Average hours			, .				Reportable compensation from	Reportable compensation from	Estimated amount of other	,
	per week	or di	Inst	Officer	ě	Highest co employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the	
		rect.	ğ	ğ	ag a	est c	Ē.	(11 2 1033 111100)	(II E 1033 IIII00)	organization and related	
	ĺ	, tr	필	ĺ	key employee	dtio				organizations	
	i	stee	Institutional trustee		"	compensa e					
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]									J	
1 b Total							•	46,800.	0.		0.
2 Total number of individuals (including those in 1a) v	vho rece	eived	d mo	ore t	han	\$10	0,00		ompensation from		
organization > 0							•	·	•		
										Yes	No
3 Did the organization list any former officer, director	or truste	ee k	ev i	emn	love	e. o	r hi	ahest compensate	d employee		
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in										3	<u>X</u>
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater the	portable	con	npe	nsat	ion	and	oth	er compensation f	rom		
individual	ian pio	0,00		11 10	es (Jom	piet	e Scriedule 3 loi s	ucn	4	Х
5 Did any person listed on line 1a receive or accrue or	omnane	ation	n fro	nm s	mv i	inra	مادا	d organization for	SAMICAS		
rendered to the organization? If 'Yes,' complete Sch	iedule 1	for	suc	h pe	rsor	บาก เ	iale	— — — — — — — — — — — — — — — — — — —	Services	5	Χ_
Section B. Independent Contractors											
Complete this table for your five highest compensation from the organization	ed inde	pend	ient	con	trac	tors	tha	t received more th	nan \$100,000 of		
											—
(A) Name and business address								(B) Description o	f Services	(C) Compensation	
									—		
											_
								<u></u>			
2 Total number of independent contractors (including	those in	1 1) v	who	rec	eıve	d m	ore	than \$100,000 in			
compensation from the organization ► 0											

<u> </u>	A VIII Statement of Nevenue	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
9.0	1 a Federated campaigns. 1 a	<u> </u>			
INT	b Membership dues 1b				ļ
Ã,G	c Fundraising events.	7			
FA	d Related organizations 1 d	<u> </u>			
S,G	e Government grants (contributions) 1 e]			
PROGRAM SERVICE REVENUE CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	f All other contributions, gifts, grants, and similar amounts not included above. 1 f 8,984				
N O	g Noncash contribns included in Ins 1a-1f* \$		ĺ		
용	h Total. Add lines 1a-1f	8,984.			<u> </u>
ČE	Business Code				
₹	2a TICKET SALES	1,209,321.			1,209,321.
ER	b				
Š	c	ļ	<u> </u>		
SEF	d	ļ			<u> </u>
ΣÃ	e	<u> </u>	ļ		ļ
ğ	f All other program service revenue	ļ	<u> </u>		<u> </u>
	g Total. Add lines 2a-2f	1,209,321.	ļ		
	3 Investment income (including dividends, interest and	868.			868.
	other similar amounts)	000.			000.
	4 Income from investment of tax-exempt bond proceeds				
	5 Royalties (i) Real (ii) Personal				
	6a Gross Rents	-			
	b Less rental expenses	1			1
	c Rental income or (loss)	-			
	d Net rental income or (loss)				
	(i) Securities (ii) Other				
	7a Gross amount from sales of assets other than inventory	4		!	
		1			
	b Less cost or other basis and sales expenses]		
	c Gain or (loss)	1			
	d Net gain or (loss).	1	}	}	
ä	8a Gross income from fundraising events (not including \$				
OTHER REVEN	of contributions reported on line 1c)				
₹ RE	See Part IV, line 18				
	b Less direct expenses b	1]]	
Ò	c Net income or (loss) from fundraising events	·]		_	
	9a Gross income from gaming activities See Part IV, line 19				
	b Less direct expenses b	1			
	c Net income or (loss) from gaming activities	;			
	10a Gross sales of inventory, less returns			 	
	and allowances a	-			
	b Less. cost of goods sold b				
	c Net income or (loss) from sales of inventory	\		 	
	Miscellaneous Revenue Business Code	-{			
	11a	-	 -		
	b			 -	
	d All other revenue	 	 	 	
	e Total. Add lines 11a-11d			 	
		-		 	
	12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e	1,219,173.	0.	0.	1,210,189.

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) but are not required to complete columns (B), (C), and (D).

	Create and other assistance to accomments		expenses	general expenses	expenses
2	Grants and other assistance to governments and organizations in the U.S See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	46,800.	46,800.	0.	0
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0
7	Other salaries and wages	317,774.	317,774.		
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits.				
10	Payroll taxes	30,573.	30,573.		
11	Fees for services (non-employees)				
а	Management				
b	Legal				<u>. </u>
С	Accounting	4,000.		4,000.	
d	Lobbying		· · · · · · · · · · · · · · · · · ·		
	Prof fundraising svcs See Part IV, In 17 Investment management fees				
g	Other	1,242.	1,242.		
12	Advertising and promotion	23,672.	23,672.		
13	Office expenses.	48,991.	48,991.		
14	Information technology				
15	Royalties				
16	Occupancy	247,278.	247,278.		
	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	768.	768.		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	15,496.	<u>15,49</u> 6.		
	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	PRODUCTION COST	335,282.	335,282.		
	INSURANCE	60,075.	60,075.		
	UTILITIES	30,704.	30,704.		
d	CREDIT CARD FEES	24,542.	24,542.		
е	TELEPHONE	12,301.	12,301.		
f	All other expenses	35,596.	35,596.		
25	Total functional expenses. Add lines 1 through 24f	1,235,094.	1,231,094.	4,000.	0
26	Joint Costs. Check here Inf following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Pa	irt X	Balance Sneet	<u> </u>							
			(A) Beginning of year		(B) End of year					
	1	Cash - non-interest-bearing	139,607.	1	82,212.					
	J	Savings and temporary cash investments		2						
	l	Accounts receivable, net		4						
	l	Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5						
		Receivables from other disqualified persons (as defined under section 4958(f)(1))								
		and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		6						
Ą	7	Notes and loans receivable, net		7						
Š		Inventories for sale or use		8						
ASSETS	1	Prepaid expenses and deferred charges	9,730.	9	10,796.					
3	l	Land, buildings, and equipment cost basis 10a 149, 662.	37,30.							
		Less accumulated depreciation Complete Part VI of								
		Schedule D 127, 390.	37,768.	10 c	22,272.					
	11	Investments – publicly-traded securities	31,100.	11						
	l	Investments — other securities. See Part IV, line 11		12						
		Investments – program-related See Part IV, line 11		13						
	i i	Intangible assets		14						
		Other assets See Part IV, line 11	25,115.	15	27,317.					
			212,220.	16	142,597.					
_		Total assets Add lines 1 through 15 (must equal line 34)	40,060.	17	37,185.					
		Accounts payable and accrued expenses	40,000.	18						
	ľ	Grants payable		19						
L		Deferred revenue		20						
4		Tax-exempt bond liabilities.		21	-					
В		Escrow account liability Complete Part IV of Schedule D		21						
L-AB-L-F-ES		Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II	10.604							
F		of Schedule L	13,684.	22	2 25					
S		Secured mortgages and notes payable to unrelated third parties.	20,721.	23	3,357.					
		Unsecured notes and loans payable	105 050	24						
		Other liabilities Complete Part X of Schedule D	126,368.	25	106,588.					
	26	Total liabilities. Add lines 17 through 25	200,833.	26	147,130.					
E		Organizations that follow SFAS 117, check here and complete lines								
		27 through 29 and lines 33 and 34.								
人のと用して		Unrestricted net assets		27						
Ĭ		Temporarily restricted net assets		28						
O R		Permanently restricted net assets		29						
		Organizations that do not follow SFAS 117, check here X and complete								
P220		lines 30 through 34.								
Ď		Capital stock or trust principal, or current funds		30						
Ŗ		Paid-in or capital surplus, or land, building, and equipment fund	44 000	31						
침		Retained earnings, endowment, accumulated income, or other funds	11,387.	32	-4,533.					
BALANCES		Total net assets or fund balances.	11,387.	33						
		Total liabilities and net assets/fund balances.	212,220.	34	142,597.					
Pa	rt XI	Financial Statements and Reporting								
1	Acc	ounting method used to prepare the Form 990	Other		Yes No					
	2a Were the organization's financial statements compiled or reviewed by an independent accountant?									
	b Were the organization's financial statements audited by an independent accountant?									
	c If 'Yes' to 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?									
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single										
		it Act and OMB Circular A-133?			3a X					
2Λ		es,' did the organization undergo the required audit or audits?			3b (2008)					

SCHEDULE À (Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501 (c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Name	Name of the organization Employer identification number												
	ADHOLLOW PLAYER				_	_			712804				
Par	t I Reason for Pu	blic Charity Statu	ıs (All organizations	must (comple	ete this	part.	(see	instruc	tions)			
The o	organization is not a pri	vate foundation becal	ise it is. (Please check o	nly one	organız	ation)							
1	A church, conventi	on of churches or ass	ociation of churches des	cribed ir	section	n 170(b)	(1)(A)(i)	١.					
2	A school described	I in section 170(b)(1)(A)(ii). (Attach Schedule	E.)									
3	A hospital or coope	erative hospital servic	e organization described	ın secti	on 170(Ь Х1ХАХ	iii). (At	tach Sc	hedule H	l)			
4	A medical research	n organization operate	ed in conjunction with a h	nospital (describe	d in sec	tion 17	0(b)(1)(/	A)(iii) Er	nter the ho	spital's		
	name, city, and sta	nte											
5	☐ 170(b)(1)(A)(iv). (C	Complete Part II)	of a college or university			•	J	nmenta	l unit de:	scribed in	section		
6 7	A federal, state, or local government or governmental unit described in section 170(bX1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(bX1)(A)(vi). (Complete Part II)												
8	A community trust	described in section	170(b)(1)(A)(vi). (Comple	te Part I	1)								
9													
10	An organization org	ganized and operated	exclusively to test for pu	ublic safe	ety See	section	1 509(a)	(4) . (se	e instruc	tions)			
11	——————————————————————————————————————												
	a Type I b Type II c Type III – Functionally integrated d Type III – Other												
е	By checking this bo	ox, I certify that the or anagers and other tha	ganization is not control n one or more publicly s	led direc upportec	tly or in	directly zations	by one describe	or more ed in se	disquali ction 509	ified perso (a)(1) or s	ection		
f	If the organization check this box	received a written det	ermination from the IRS	that is a	a Type I	Type II	or Typ	e III sup	porting (organizatio	n,		
g	Since August 17, 2	006, has the organiza	ition accepted any gift o	r contrib	ution fro	om any	of the f	ollowing	persons	?	c		
											Yes No		
	(i) a person who	directly or indirectly	controls, either alone or upported organization?	together	with pe	ersons d	escribe	d in (ii)	and (III)	11g (i)			
		ber of a person desc								11g (ii)	 		
	• • • • • • • • • • • • • • • • • • • •	•	described in (i) or (ii) a	hove?						11 g (iii)			
h	` '	,	the organizations the org		n sunna	rts							
	(i) Name of Supported	(ii) EIN	(III) Type of organization	1	ls the	1	ou notify	(viv)	s the	(vii) Amour	nt of Support		
	Organization	(1) = 41	(described on lines 1-9 above or IRC section (see instructions))	organizat (i) listed gove	ion in col d in your erning ment?	the organ	ແzation ໂກ (i) of	organizat	ion in col zed in the S ?	(VII) Alliour	к от Варрол		
				Yes	No	Yes	No	Yes	No		_		
											_		
									i				
							_						
					_			<u> </u>	-				
				-									
Total													

ı aı	(Carrelate and Avenue healt	-				170(D)(יעראי	(VI)		
Sec	(Complete only if you check tion A. Public Support	ed the box on line	5, 7, or 8 of Par	(1)						
begi	ndar year (or fiscal year nning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 200	8	(f) Total		
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants.')									
	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf									
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.									
4	Total. Add lines 1-3				L					
5	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)									
6	Public support. Subtract line 5 from line 4									
Sec	tion B. Total Support			· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·					
	ndar year (or fiscal year nning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 200	8	(f) Total		
7	Amounts from line 4									
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources.									
9	Net income form unrelated business activities, whether or not the business is regularly carried on									
10	Other income Do not include gain or loss form the sale of capital assets (Explain in Part IV.)									
11	Total support. Add lines 7 through 10									
12	Gross receipts from related activ	rities, etc. (see ins	structions)			ł	12			
	First five years. If the Form 990 organization, check this box and	stop here	<u>_</u>	nd, third, fourth,	or fifth tax year as	s a section 5	501(c)	(3)		
_	tion C. Computation of Pul									
	Public support percentage for 20			ne 11, column (f)			14	<u>%</u>		
15	Public support percentage for 20	07 Schedule A, P	art IV-A, line 26f			l	15	<u>%</u>		
16 a	33-1/3 support test – 2008. If the and stop here. The organization				the line 14 is 33	-1/3 % or m	ore, cl	heck this box ►		
b	33-1/3 support test — 2007. If the and stop here. The organization	e organization did qualifies as a pub	not check a box olicly supported o	on line 13, or 16a rganization	a, and line 15 is 3	3-1/3% or m	nore, c	heck this box		
17a	17a 10%-facts-and-circumstances test — 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization									
	b 10%-facts-and-circumstances test — 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.									
<u>18</u> ΒΔΔ	Private foundation. If the organiz	zation did not che	ck a box on line,	13, 16a, 16b, 17a				structions > 2008		
					~^	CONTRA A /F	urm ul	CI MARIE - /1 '2/1/10		

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

	(Complete only if you che	cked the box on I	ne 9 of Part I)				
Sec	tion A. Public Support						
	ndar year (or fiscal yr beginning in)►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants ')	4,823.	8,942.	6,640.	7,466.	8,984.	36,855.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are				1,446,633.		6,185,560.
	not an unrelated trade or business under section 513						0.
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
5	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
6	Total. Add lines 1-5	1,088,443.	1,082,978.	1,378,590.	1,454,099.	1,218,305.	6,222,415.
7a	Amounts included on lines 1, 2, 3 received from disqualified persons	0.	0.	0.	0.	0.	0.
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000	0.	0.	0.	0.	0.	0.
_	Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
	Public support (Subtract line						
0	• • • • • • • • • • • • • • • • • • • •						6,222,415.
5	7c from line 6)	L					0,222,413.
	tion B. Total Support		4	4 1 0005	4 11 222		
	ndar year (or fiscal yr beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	Amounts from line 6.	1,088,443.	1,082,978.	1,378,590.	1,454,099.	1,218,305.	6,222,415.
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources.	522.	996.				1,518.
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0.
	: Add lines 10a and 10b	522.	996.	0.	0.	0.	<u>1,518.</u>
11	Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on	ļ					0.
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						0.
13	Total support. (add ins 9, 10c, 11, and 12)						6,223,933.
14	First five years. If the Form 990 organization, check this box and	stop here		nd, third, fourth,	or fifth tax year as	s a section 501(c)	
Sec	tion C. Computation of Pul	<u>blic Support P</u>	ercentage				
15	Public support percentage for 20	008 (line 8, columi	n (f) divided by lin	ne 13, column (f))		15	100.0%
16	Public support percentage from a	2007 Schedule A,	Part IV-A, line 27	7g		16	100.0%
	tion D. Computation of Inv						
17	Investment income percentage for	or 2008 (line 10c,	column (f) divide	d by line 13, colu	mn (f))	17	0.0%
	Investment income percentage fi		* *	-	• • •	18	0.0%
	33-1/3 support tests — 2008. If the comore than 33-1/3%, check this b	organization did not	check the box on I	ine 14, and line 15	is more than 33-1/3 iblicly supported o	%, and line 17 is no	
	33-1/3 support tests – 2007. If the is not more than 33-1/3%, check	this box and sto	here. The organ	ization qualifies a	is a publicly suppo	orted organization	and line 18
20	Private foundation. If the organic	zation did not che	ck a box on line	14, 19a, or 19b, c	heck this box and	see instructions	▶ []

Part IV	Supplem Part II, II	or 990-E2, l ental Inf ne 17a o	ormatio r 17b; o	n. Comp r Part III,	lete this p line 12. I	part to pro Provide ar	vide the א ny other a	explanation i additional inf	required by ormation. (s	Part II, line ee instruction	Page 4 10; ons)
									· · · · · · · · · · · · · · · · · · ·		
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SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2008

Department of the Treasury Internal Revenue Service Attach to Form 990. To be completed by organizations that answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

Name of the organization Employer Identification number BROADHOLLOW PLAYERS, LTD 11-2712804 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit?? Part II | Conservation Easements Complete if the organization answered 'Yes' to Form 990, Part IV, line 1 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of an historically important land area Preservation of land for public use (e.g., recreation or pleasure) Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a-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 2 a a Total number of conservation easements **b** Total acreage restricted by conservation easements 2 b c Number of conservation easements on a certified historic structure included in (a) 2 c d Number of conservation easements included in (c) acquired after 8/17/06 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable vear ▶ Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easement it holds? Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? In Part XIV, 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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, 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 XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, 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 the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

Schedule D (Form 990) 2008 BROA			• • •	11-271		Page 2
Part III Organizations Mainta	ining Collecti	ions of Art, Histo	orical Treasures, or	Other Similar Ass	ets (contil	nued)
Using the organization's accession that apply)	on and other reco			ignificant use of its coll	ection items	(check all
a Public exhibition		d Loan	or exchange programs			
b Scholarly research		e U Other				
c Preservation for future gener						
4 Provide a description of the orga Part XIV.		•	•		se in	
5 During the year, did the organiza assets to be sold to raise funds in	ition solicit or rec rather than to be	ceive donations of ar maintained as part	t, historical treasures, o of the organization's col	r other similar lection?	Yes	∏ No_
Part IV Trust, Escrow and Cu					orm 990,	Part
IV, line 9, or reported	an amount or	n Form 990, Part	: X, line 21.			
1a Is the organization an agent, true included on Form 990, Part X?	stee, custodian, d	or other intermediary	for contributions or oth	er assets not	Yes	No
b If 'Yes,' explain the arrangement	in Part XIV and	complete the follows	ing table [.]	<u></u>		
					Amount	
c Beginning balance				1c		
d Additions during the year				1 d		
e Distributions during the year				1 e		
f Ending balance						
2a Did the organization include an a		990, Part X, line 21?	•		Yes	∐ No
b If 'Yes,' explain the arrangement		 				
Part V Endowment Funds Co						
	(a) Current yea	r (b) Prior year	r (c) Two years back	(d) Three years back	(e) Four ye	ears back
1a Beginning of year balance					 	
b Contributions	<u> </u>				 	
c Investment earnings or losses					 	
d Grants or scholarships.				 	 	
e Other expenditures for facilities and programs						
f Administrative expenses						
g End of year balance			<u>l</u>		<u> </u>	
2 Provide the estimated percentag	=					
a Board designated or quasi-endov						
b Permanent endowment ►						
c Term endowment ►	¥					
3a Are there endowment funds not a organization by	in the possession	of the organization	that are held and admir	nistered for the	Yes	No
(i) unrelated organizations					3a(i)	No No
(ii) related organizations					3a(ii)	
b If 'Yes' to 3a(ii), are the related of	organizatione liet	ed as required on So	rhadula R?		3b	
4 Describe in Part XIV the intended	-	•			JD	
Part VI Investments—Land, B				line 10		
Description of investment		Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book	Value
1a Land						
b Buildings						
c Leasehold improvements						
d Equipment			142,493.	122,912.	1	9,581.
e Other			7,169.	4,478.		2,691.
Total. Add lines 1a-1e (Column (d) she	ould equal Form	990, Part X, column	(B), line 10(c))	•		2,272.
BAA			·	Sched	ule D (Form	

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Part VII Investments-Other Securities See F	orm 990, Part X, line	e 12. N/A	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valua Cost or end-of-year mar	tion ket value
Financial derivatives and other financial products			
Closely-held equity interests			
Other			
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			
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Total (Column (b) should equal Form 990 Part X, col. (B) line 12)	Tarres 000 Dart V Iv	12\ \N/A	
Part VIII Investments—Program Related (See			
(a) Description of investment type	(b) Book value	(c) Method of valua Cost or end-of-year mar	tion ket value
			
			<u> </u>
······································			
<u> </u>			
Total Column (b)(should equal Form 990, Part X, Col (B) line 13)			
Part IX Other Assets (See Form 990, Part X,			
	scription		(b) Book value
ROUNDING			2.
SECURITY DEPOSITS			27,315.
			
			
			
		-	
			
Total. Column (b) Total (should equal Form 990, Part X, co	I (B), line 15)	>	27,317.
Part X Other Liabilities (See Form 990, Part			
(a) Description of Liability	(b) Amount		
Federal Income Taxes			
DEFERRED SUBSCRIPTION INCOME	106,588	8.	
Total Column (b) Total (should equal Form 990, Part X, col (B) line 25)	<u>► 106,588</u>		
In Part XIV, provide the text of the footnote to the organiza positions under FIN 48	tion's financial statemen	ts that reports the organization's liabil	ity for uncertain tax

Schedule D (Form 990) 2008 BROADHOLLOW PLAYERS, LTD	11-2712804	Page 4
Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statement	5	
1 Total revenue (Form 990, Part VIII, column (A), line 12)		1,219,173.
2 Total expenses (Form 990, Part IX, column (A), line 25)		1,235,094.
3 Excess or (deficit) for the year. Subtract line 2 from line 1		-15,921.
4 Net unrealized gains (losses) on investments		
5 Donated services and use of facilities		
6 Investment expenses .		
7 Prior period adjustments		
8 Other (Describe in Part XIV)		
9 Total adjustments (net) Add lines 4-8	<u> </u>	
10 Excess or (deficit) for the year per financial statements. Combine lines 3 and 9		-15,921.
Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	r Return	
1 Total revenue, gains, and other support per audited financial statements		1,219,173.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a Net unrealized gains on investments 2a		
b Donated services and use of facilities 2b		
c Recoveries of prior year grants.		
d Other (Describe in Part XIV)		
e Add lines 2a through 2d	2e	
3 Subtract line 2e from line 1		1,219,173.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investments expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIV)		
c Add lines 4a and 4b	4c	
5 Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)		1,219,173.
Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses		2,223,2.0.
Total expenses and losses per audited financial statements		1,235,094.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		
a Donated services and use of facilities 2a		
b Prior year adjustments	_	
c Losses reported on Form 990, Part IX, line 25		
d Other (Describe in Part XIV)	_	
e Add lines 2a through 2d	2e	
3 Subtract line 2e from line 1		1,235,094.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investments expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIV) 4b		
c Add lines 4a and 4b	4c	
5 Total expenses. Add lines 3 and 4c (This should equal Form 990, Part I, line 18)		1,235,094.
Part XIV Supplemental Information		2,200,00
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Paline 4; Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b	rt IV, lines 1b and	1 2b, Part V,
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Schedule **D** (Form 990) 2008

Schedule D	(Form 990) 2008	Page !
Part XIV	(Form 990) 2008 Supplemental Information (continued)	
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SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

2008

Open to Public

Department of the Treasury

Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Internal Revenue Service	Form 550 or to provide any additional information.		inspection
Name of the organization BROADHOLLOW PI	LAYERS, LTD	Employer identificate 11-2712804	
FORM 990, PA	RT VI, LINE 2 - BUSINESS OR FAMILY RELATIONSHIP OF OFFICERS	S, DIRECT	·
	NC (OFFICER IS A SHAREHOLDER)		
	ART VI, LINE 10 - FORM 990 REVIEW PROCESS		
	WAS OR WILL BE CONDUCTED.		
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2008	FEDERAL SUPPORTING DET	ΓAIL	PAGE 1
CLIENT BHP	BROADHOLLOW PLAYERS, LTD		11-2712804
3/08/10		-	02·30PN
BALANCE SHEET ACCOUNTS PAYABLE	E AND ACCRUED EXPENSES		
ACCOUNTS PAYABLE		\$	19,995.
ACCRUED EXPENSES CURRENT PORTION OF	F LT DEBT	TOTAL \$	8,827. 8,363. 37,185.
		101112	37,103.
BALANCE SHEET SECURED MORTGAG	ES AND OTHER NOTES PAYABLE [O]		
LT DEBT AUTO LOAN		TOTAL \$	3,357. 3,357.
		TOTAL \$	3,357.