#### **EXTENSION ATTACHED**

Form **990** 

**Return of Organization Exempt From Income Tax** 

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

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

OMB No. 1545-0047

Open to Public

Dep Inte	artment rnal Rev	of the Treasury venue Service		ter social security numbe .irs.gov/Form990 for ins					Insp	ection	C
A	For t	he 2020 calendar	year, or tax year begin			and ending			, <b>20</b> 202	1	
В	Check	if applicable: C	<del> </del>				D Empl		tification nu		
	Ad	ddress change Ho	ome for Contemp	orarv Theatre			13	-3449	416		
			nd Art, Ltd. (d		Center)			hone num			
			45 Sixth Avenue		,		(2	12) 6	47-02	<b>n</b> 2	
	$\vdash$	IN€	ew York, NY 100	13			(2	12) 0	047 02	02	
		nal return/terminated							ė a	070	C20
	-	mended return	N			T.	H(a) Is this a group ref	s receipts		,072 <b>,</b>	
	A	pplication pending F	Name and address of principa	Meredith	Lynsey Sci	hade	• •			Yes	X <sub>No</sub>
			ame As C Above		T [		<b>H(b)</b> Are all subordinat If "No," attach a li	st. See in	structions	Yes	No
<u> </u>			501(c)(3) 501(c) (	)◀ (insert no.)	4947(a)(1) or	527					
J	We	bsite: ► here					H(c) Group exemption				
K			Corporation Trust	Association Other ►	LY	ear of formation	on: 1986 <b>M</b>	State of	legal domici	ile: NY	
Pa	art I	Summary									
	1		the organization's missi								
ģ			res artists of								
핆			innovative per	<u>formances in t</u>	<u>heatre, d</u>	ance, m	<u>usic, puppe</u>	try,	<u>medi</u> a	a, <u>a</u> no	d
Governance		<u>visual art</u>									
Š	2	Check this box		n discontinued its ope					ssets.		
			g members of the gover		•						14
Se	4 5		pendent voting members individuals employed in			•					13
₹	6		volunteers (estimate if								75 5
Activities &	7a		business revenue from I								0.
-			usiness taxable income								0.
	_						Prior Yea		Cur	rent Yea	
	8	Contributions an	nd grants (Part VIII, line	1h)						,879,	
<u>e</u>	9		revenue (Part VIII, line					667.		173,	
Revenue	10		me (Part VIII, column (A					366.			386.
æ			Part VIII, column (A), lir	·				254.			886.
	12	Total revenue -	add lines 8 through 11	(must equal Part VIII	, column (A), lir	ne 12)			3	,072,	
	13	Grants and simil	lar amounts paid (Part I	X, column (A), lines	1-3)					,,	
	14	Benefits paid to	or for members (Part I)	K, column (A), line 4).							
	15		compensation, employee					295		017.	
ses	16a		draising fees (Part IX, o	•		-		2301		0107	017.
ĕ	104										
Expenses	. D		g expenses (Part IX, col	-		1,576.					
_	17	·	(Part IX, column (A), lir	·			=, ,			<u>,082,</u>	
			Add lines 13-17 (must e				, ,			<u>,928,</u>	
	19	Revenue less ex	penses. Subtract line 1	8 from line 12			-907,	470.		,144,	
Assets or	8						Beginning of Curr			d of Yea	
set.	20		art X, line 16)				- , ,			<u>,118,</u>	
t As	21	Total liabilities (F	Part X, line 26)				2,148,	276.	2	,213,	281.
Ret	22	Net assets or fur	nd balances. Subtract li	ne 21 from line 20			1,761,	076.	2	,905,	610.
Pa	art II	Signature E	3lock								
Und	er penal	Ities of perjury, I declar	re that I have examined this retu (other than officer) is based on	irn, including accompanying	schedules and stater	nents, and to the	he best of my knowled	ge and bel	lief, it is true	e, correct,	and
com	iplete. D	eclaration of preparer (	(other than officer) is based on	all information of which prep	arer has any knowled	lge.					
		<b>—</b>									
Sig	gn	Signature of	f officer				Date				
He	ere		ith Lynsey Scha	ıde			Producing	Dir.			
			nt name and title								
		Print/Type prepa	arer's name	Preparer's signature	1/ 11	Date	Check	if	PTIN		

May the IRS discuss this return with the preparer shown above? See instructions

NEW YORK,

► SCHALL & ASHENFARB CPAS

NY 10016

307 FIFTH AVE 15TH

Michael Schall

Firm's address

Paid

Preparer Use Only self-employed

Firm's EIN ► 13-4036703

6/29/2022

No

P02024184

X Yes

268-2800

## Form **8868**

Department of the Treasury Internal Revenue Service Application for Automatic Extension of Time To File an Exempt Organization Return

► File a separate application for each return. ► Go to www.irs.gov/Form8868 for the latest information. OMB No. 1545-0047

**Electronic filing (e-file).** You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automati	c 6-Month Extension of Time. Only sub	mit origin	al (no copies needed).								
	ions required to file an income tax return other th			os, RE	MICs, and	trusts must					
use Form 70	Name of exempt organization or other filer, see instructions.	e tax returns	5.	Taxpa	yer identification	on number (TIN)					
Type or	Home for Contemporary Theatre										
print	and Art, Ltd. (d/b/a HERE Art	Center		13-	3449416	)					
File by the	Number, street, and room or suite number. If a P.O. box, see in										
due date for filing your	145 Sixth Avenue										
return. See instructions.	City, town or post office, state, and ZIP code. For a foreign add	Iress, see instru	ctions.								
	New York, NY 10013										
Enter the Re	eturn Code for the return that this application is for	or (file a se	parate application for each return)			01					
Application Is For		Return Code	Application Is For		Return Code						
Form 990 or	r Form 990-EZ	01	Form 990-T (corporation)			07					
Form 990-B	L	02	Form 1041-A			08					
Form 4720	(individual)	03	Form 4720 (other than individual)			09					
Form 990-P	F	04	Form 5227			10					
	(section 401(a) or 408(a) trust)	05	Form 6069			11					
Form 990-T	(trust other than above)	06	Form 8870			12					
<ul><li>If the or</li><li>If this is check the</li></ul>	ne No. $\blacktriangleright$ (212) 647-0202 ganization does not have an office or place of but for a Group Return, enter the organization's four his box $\blacktriangleright$ . If it is for part of the group, on sion is for.	digit Group	e United States, check this box  Exemption Number (GEN)	this is							
1 I reque for the ▶ □		the organiz , and endir	ng <u>8/31</u> , 20 <u>21</u> .	zation							
Ch	nange in accounting period application is for Forms 990-BL, 990-PF, 990-T,										
nonref	fundable credits. See instructions	· · · · · · · · · · · · · · · · · · ·		3 a	\$	0.					
tax pa	application is for Forms 990-PF, 990-T, 4720, or yments made. Include any prior year overpayments	nt allowed a	s a credit	3 b	\$	0.					
c Balane EFTPS	<b>ce due.</b> Subtract line 3b from line 3a. Include you S (Electronic Federal Tax Payment System). See	r payment vinstructions	with this form, if required, by using	3 с	\$	0.					
Caution: If payment ins	you are going to make an electronic funds withdrastructions.	awal (direct	debit) with this Form 8868, see Form 84	153-EC	and Form	8879-EO for					

BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8868** (Rev. 1-2020)

			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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors See instructions?	2	Χ	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If 'Yes,' complete Schedule C, Part l</i>	3		Х
4	Section 501(c)(3) organizations. 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	4		Х
5	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	5		Х
6	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	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If 'Yes,' complete Schedule D, Part II</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV.	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If 'Yes,' complete Schedule D, Part VI</i>	11 a	Х	
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.	11 b		Х
c	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	11 c		Х
c	I 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.	11 d		Х
e	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		X
f	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	11 f	Х	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a	Х	
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	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14 a	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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.	14b		Х
15	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	15		X
	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? <i>If 'Yes,' complete Schedule F, Parts III and IV</i> .	16		Х
17	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.	17		X
18	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.	18		X
19	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.	19		X
20a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		Х
b	olf 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	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.	21		Х

# Form 990 (2020) Home for Contemporary Theatre Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III.	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i> .	23		Х
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, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		Х
	<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	c 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), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I.	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part II</i>	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If 'Yes,' complete Schedule L, Part III.	27		Х
28	instructions, for applicable filing thresholds, conditions, and exceptions):			
	<b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> 'Yes,' complete Schedule L, Part IV	28a		X
	<b>b</b> A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV	28b		X
	c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If Yes,' complete Schedule L, Part IV.	28c		Χ
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Χ
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
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		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1	34		Х
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	<b>b</b> If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	36		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
38	Note: All Form 990 filers are required to complete Schedule O.	38	Х	
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		Yes	. No
1	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		162	140
	<b>b</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	1.0	Х	
RΛ	(gambling) winnings to prize winners?	1 c	A GON	2020

Form 990 (2020) Home for Contemporary Theatre

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

			Yes	No
	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 75			
ı	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
ı	tf 'Yes,' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation on Schedule 0</i>	3 b		
4 8	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)?	4 a		Х
ı	olf 'Yes,' enter the name of the foreign country►			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
•	: If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5с		
6 a	a 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?	6 a		Х
ı	olf 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
i	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?	7 a		X
	olf 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		Х
	d If 'Yes,' indicate the number of Forms 8282 filed during the year	_		37
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Λ
	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
-	n If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
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.			
ä	a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
ı	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
	Section 501(c)(7) organizations. Enter:			
	a Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 b			
	Section 501(c)(12) organizations. Enter:			
	a Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	10		
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	o If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year			
	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.	ısa		
	, ,			
	Denter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	a Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	b If 'Yes,' has it filed a Form 720 to report these payments? <i>If 'No,' provide an explanation on Schedule O</i>	14b		<del></del>
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
13	excess parachute payment(s) during the year?	15		Х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	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 line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on 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 No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year. . . . . 14 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 on Schedule O. **b** Enter the number of voting members included on line 1a, above, who are independent..... 13 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? ...... Χ 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?..... 3 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?.... Χ 4 X Did the organization become aware during the year of a significant diversion of the organization's assets?.... 5 Did the organization have members or stockholders?..... Χ 6 7 a 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?..... 7 a Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?..... 8 a X X **b** Each committee with authority to act on behalf of the governing body?..... 8 b 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses on Schedule Q..... 9 **Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10 a Did the organization have local chapters, branches, or affiliates?..... 10 a Χ 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? 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... Χ b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O Χ 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Χ to conflicts?..... c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done ... See .Schedule .0 ...... Χ 12c 13 Did the organization have a written whistleblower policy?..... 13 Χ 14 Did the organization have a written document retention and destruction policy?..... Χ 14 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? X a The organization's CEO, Executive Director, or top management official.. See . Schedule.. 0....... 15 a **b** Other officers or key employees of the organization..... 15 b X If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year?..... 16 a **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?. 16 b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > NY Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Upon request Own website Another's website Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records Meredith Schade 145 Sixth Avenue New York NY 10013 (212) 647-0202

	Form 990 (2020)	Home	for	Contemporary	Theatre
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13-3449416

Page 7

## 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

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

See 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.

			(C)								
	(A) Name and title	(B) Average hours per	thar	one both	box, an c	unles fficer truste	,	on	(D)  Reportable compensation from the organization	(E)  Reportable compensation from related organizations	<b>(F)</b> Estimated amount of other
		week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	compensation from the organization and related organizations
(1)	Kristin Marting	60									
	Artistic Dir.	0	Χ		Χ				67,935.	0.	6,595.
(2)	Kevin Matthews	_ 10 _									
-(2)	Chair	0	Χ		Χ				0.	0.	0.
(3)	Michael Champness	2	Х		Х				0.	0	0
(4)	Treasurer Abigail Campal	1	Λ		Λ				0.	0.	0.
_(+)_	Abigail Gampel Secretary		Х		Χ				0.	0.	0.
(5)	Helen Mills	1	Λ		Λ				0.	0.	0.
_(3)_	Vice Chair		Х		Χ				0.	0.	0.
(6)	Amy Segal	1	21		21				0.	•	<u> </u>
	Member	0	Х						0.	0.	0.
(7)	Tommy Young	1								•	
	Member	0	Χ						0.	0.	0.
(8)	James Scruggs	1									
	Member	0	Х						0.	0.	0.
(9)	Erin Wegner Brooks	1									
	Member	0	Χ						0.	0.	0.
(10)	Fred Harris	1									
	Member	0	Χ						0.	0.	0.
(11)	Alan Ostroff	1									
	Member	0	Χ						0.	0.	0.
(12)	Robert Walport	1	,,						•		•
(1.3)	Member	0	Χ						0.	0.	0.
(13)	Tim Maner	1	17						_	•	^
(1.4)	Member	0	Χ						0.	0.	0.
(14)	Jennifer Suh Whitfield	1	v							0	0
	Member	0	Χ						0.	0.	0.

Page 8

Part VII   Section A. Officers, Directors, 11	1	Ney		•		es, <i>c</i>	1110	i nignesi con	iperisateu Emp	loyees (continuea)
	(B) (C) Position Average (do not check more than one (D)									
(A)	Average hours	(do box,	not ch unles	neck ss pe	more	than c	ne an	(D) (E) Reportable Reportable		(F)
Name and title	per week	offic	er and	dac	directo	or/trust	ee)	compensation from	compensation from	Estimated amount of other
	(list any hours	Individual i	institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization
	for related	rect	Ution	졒	emp	est c	ner			and related organizations
	organiza - tions below	ndividual trustee or director	iä tr		loye	omp				
	dotted line)	stee	uste			ensa				
			(1)			bed				
(15)	1									
(16)		-								
(17)										
(17)		-								
(18)			+							
	1	-								
(19)										
(20)										
(21)										
(21)		-								
(22)			+							
	1	=								
(23)										
(24)										
(25)										
(25)	<del> </del>									
1 b Subtotal							>	67,935.	0.	6,595.
c Total from continuation sheets to Part VII, Secti	on A					1	>	0.	0.	0.
d Total (add lines 1b and 1c).							<b>&gt;</b>	67,935.	0.	6,595.
2 Total number of individuals (including but not limited	to those I	isted	abov	e) v	who i	receiv	/ed	more than \$100,00	0 of reportable comp	ensation
from the organization • 0										Tv. Tu
										Yes No
3 Did the organization list any former officer, direct on line 1a? If 'Yes,' complete Schedule J for suc	tor, truste h individu	e, ke al	y en	npic	oyee 	, or r	nigh 	nest compensated	employee	. 3 Х
<b>4</b> For any individual listed on line 1a, is the sum of										
the organization and related organizations greate such individual	er than \$1	50,00	00? /	lf 'Y	′es,'	com	ple	te Schedule J for		. 4 X
5 Did any person listed on line 1a receive or accru									individual	·   4   A
for services rendered to the organization? If 'Yes	s,' comple	te Sc	hedu	ule	J fo	r suci	ale h p	erson		. <b>5</b> X
Section B. Independent Contractors									<b>4100 000</b> (	
Complete this table for your five highest compen compensation from the organization. Report comper	sated indi Isation for	epend the ca	dent alend	cor dar y	ntrac year	ctors endir	tha ng v	t received more th vith or within the or	nan \$100,000 of ganization's tax year	
								(B)		(C)
(A) Name and business address  (B) Description of services							of services	Compensation		
Beth Morrison Project 666 Ocean Avenue, #D	1 Brook	lyn,	NY	11:	226			Artistic Fees		116,120.
2 Total number of independent contractors (including t	out not lim	ited to	thos	se li	isted	l abov	/e) '	who received more	than	
\$100,000 of compensation from the organization	<b>►</b> 1									
BAA		TFFAO	100	10/0	7/20					Form <b>990</b> (2020)

Miscellaneous

#### Form 990 (2020) Home for Contemporary Theatre 13-3449416 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII..... (B) Related or (A) Total revenue (D) Unrelated Revenue excluded from tax exempt business under sections 512-514 function revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns . . . . . . . . **b** Membership dues..... 1 b c Fundraising events..... 1 c d Related organizations . . . . . . . . 1 d e Government grants (contributions) . . . . 584,872 f All other contributions, gifts, grants, and similar amounts not included above . . . 1 f 2,294,964 q Noncash contributions included in h Total. Add lines 1a-1f...... 2,879,836 Program Service Revenue **Business Code** 2a Co-Producer Income 711190 109,162 109,162 b <u>Ticket Sales</u> 711190 32,640 32,640 532000 31,728 c Facility Rentals 31,728 d f All other program service revenue. . . g Total. Add lines 2a-2f ..... 173,530 Investment income (including dividends, interest, and 386 386. Income from investment of tax-exempt bond proceeds Royalties..... (i) Real (ii) Personal 6 a Gross rents . . . . . . . 6a **b** Less: rental expenses 6b c Rental income or (loss) 6c d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory **b** Less: cost or other basis 7a 7b and sales expenses c Gain or (loss). . . . . . . 7с **d** Net gain or (loss)..... 8 a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c). 8a **b** Less: direct expenses..... 8b c Net income or (loss) from fundraising events ...... **9 a** Gross income from gaming activities. See Part IV, line 19. . . . . . . . . . . . . 9a 9b **b** Less: direct expenses..... c Net income or (loss) from gaming activities..... **10 a** Gross sales of inventory, less..... returns and allowances. . . . . . . . . . 10a **b** Less: cost of goods sold.... 10b

- 1	3	-			1	
	c Net income or (loss) from sales of inve	entory				
		Business Code				
Ų	11a Other Income	900099	18,886.	18,886.		
2	b					
	С				ļ	
Ź	d All other revenue					
	e Total. Add lines 11a-11d		18,886.			
_	12 Total revenue. See instructions	······································	3,072,638.	192,416.	0.	386.

### 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 it Scriedule O contains a r		(B)	(C)	(D)
Do i 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members	00.761	00 761	0	0
6	trustees, and key employees	89,761. 0.	89,761. 0.	0.	0.
7	Other salaries and wages	616,897.	407,969.	66,129.	142,799.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	72.	51.	7.	142,733.
9	Other employee benefits	82,073.	55,624.	8,371.	18,078.
10	Payroll taxes	57,214.	40,147.	5,402.	11,665.
11	Fees for services (nonemployees):	,	,	,	•
a	Management				
k	<b>)</b> Legal				
c	Accounting				
C	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column   (A) amount, list line 11g expenses on Schedule 0.らch. の	495,511.	449,580.	44,901.	1,030.
12	Advertising and promotion	78,159.	75,980.	1,879.	300.
13	Office expenses	25,762.	25,042.	256.	464.
14	Information technology	,	- <b>,</b>		
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	85,328.	82,768.	1,707.	853.
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	110,296.	106,987.	2,206.	1,103.
23	Insurance	22,730.	15,946.	2,148.	4,636.
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a	Repairs & maintenance	70,401.	68,289.	1,409.	703.
	Production expense	61,570.	61,570.		
	Utilities	43,614.	41,266.	1,548.	800.
	Stipends & travel	18,322.	18,090.	232.	
e	All other expenses	70,394.	45,029.	16,234.	9,131.
25	<b>Total functional expenses.</b> Add lines 1 through 24e	1,928,104.	1,584,099.	152,429.	191,576.
26	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 ► ☐ if following SOP 98-2 (ASC 958-720)				

		Check if Schedule O contains a response or note to	o any line	in this Part X			
					(A) Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			6,034.	1	12,183.
	2	Savings and temporary cash investments			1,125,684.	2	2,091,769.
	3	Pledges and grants receivable, net			150,985.	3	424,726.
	4	Accounts receivable, net			41,367.	4	40,736.
	5	Loans and other receivables from any current or form trustee, key employee, creator or founder, substantia controlled entity or family member of any of these pe	ner officer I contribu	, director, tor, or 35%		5	
	6	Loans and other receivables from other disqualified p	ersons (a	s defined under			
		section 4958(f)(1)), and persons described in section	´`` ´		6		
	7	Notes and loans receivable, net		L		7	
Assets	8	Inventories for sale or use		-		8	
58	9	Prepaid expenses and deferred charges			53,053.	9	127,544.
A		Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D		4,492,995.			
	b	Less: accumulated depreciation	10 b	2,071,062.	2,532,229.	10 c	2,421,933.
	11	Investments — publicly traded securities				11	
	12	Investments - other securities. See Part IV, line 11.				12	
	13	Investments - program-related. See Part IV, line 11.		<b>├</b> -		13	
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11			15		
	16	Total assets. Add lines 1 through 15 (must equal line	33)		3,909,352.	16	5,118,891.
	17	Accounts payable and accrued expenses			9,052.	17	98,868.
	18	Grants payable		<u> </u>	50.404	18	
	19	Deferred revenue	_	53,194.	19	382,970.	
	20	Tax-exempt bond liabilities		_		20	
ië	21	Escrow or custodial account liability. Complete Part		L		21	
Liabilities	22	Loans and other payables to any current or former of key employee, creator or founder, substantial contribution controlled entity or family member of any of these pe	utor. or 35	5%		22	
_	23	Secured mortgages and notes payable to unrelated the		<u> </u>	1,562,890.	23	1,507,058.
	24	Unsecured notes and loans payable to unrelated third	parties.		523,140.	24	224,385.
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com	es to relat	ed third parties, t X of Schedule D.		25	,
	26	Total liabilities. Add lines 17 through 25			2,148,276.	26	2,213,281.
ıces		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.	e ►	X			
ā	27	Net assets without donor restrictions			751,594.	27	844,297.
ã	28	Net assets with donor restrictions			1,009,482.	28	2,061,313.
Net Assets or Fund Balance		Organizations that do not follow FASB ASC 958, che and complete lines 29 through 33.	ck here •	· 🛮			
ō	29	Capital stock or trust principal, or current funds			29		
इं	30	Paid-in or capital surplus, or land, building, or equipn				30	
SS	31	Retained earnings, endowment, accumulated income		<u> </u>		31	
t A	32	Total net assets or fund balances		<u> </u>	1,761,076.	32	2,905,610.
ş	33	Total liabilities and net assets/fund balances			3,909,352.	33	5,118,891.
RΔ	Δ		TEEA0111L		-,,	·	Form <b>990</b> (2020)

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI.				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,0	72,6	38.
2	Total expenses (must equal Part IX, column (A), line 25)	2		28,1	
3	Revenue less expenses. Subtract line 2 from line 1	3			34.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		61,0	
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7		7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10					
D-	column (B)) 10	U	2,9	05,6	10.
ra	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. [
		-		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.				
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		Χ
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed of separate basis, consolidated basis, or both:    Separate basis	on a			
	<b>b</b> Were the organization's financial statements audited by an independent accountant?		2 b	Х	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate		20	71	
	basis, consolidated basis, or both:				
	X 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?		2 c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain	Ĭ			
_	on Schedule O.	1			
3	<b>a</b> 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?		3 a		Х
	<b>b</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 on Schedule O and describe any steps taken to undergo such audits		3 b		
3A/	TEEA0112L 10/19/20		Form	990	(2020)

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

Department of the Treasury Internal Revenue Service

**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 for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization Employer identification number Home for Contemporary Theatre 13-3449416 and Art, Ltd. (d/b/a HERE Art Center) **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.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 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.) An agricultural research organization described in section 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 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 10 June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 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 12 lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g 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. 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. 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. **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.** 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. Enter the number of supported organizations ..... **q** Provide the following information about the supported organization(s). (i) Name of supported organization (iii) Type of organization (described on lines 1-10 above (see instructions)) (v) Amount of monetary (iv) Is the organization listed (vi) Amount of other support (see instructions) support (see instructions) in your governing document? No (A) (B) (C) (D) (E) Total

## 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 fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support								
	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2016	<b>(b)</b> 2017	<b>(c)</b> 2018	<b>(d)</b> 2019	<b>(e)</b> 2020	<b>(f)</b> Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	1,601,279.	2,614,431.	1,892,650.	1,394,340.	2,879,836.	10,382,536.	
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.	
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.	
	<b>Total.</b> Add lines 1 through 3 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)	1,601,279.	2,614,431.	1,892,650.	1,394,340.	2,879,836.	2,760,360.	
6	<b>Public support.</b> Subtract line 5 from line 4						7,622,176.	
Sec	tion B. Total Support							
	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2016	<b>(b)</b> 2017	<b>(c)</b> 2018	<b>(d)</b> 2019	<b>(e)</b> 2020	(f) Total	
7	Amounts from line 4	1,601,279.	2,614,431.	1,892,650.	1,394,340.	2,879,836.	10,382,536.	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	294.	696.	656.	366.	386.	2,398.	
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.	
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). See Fart VI.	34,443.	57,357.	70,520.	75,254.	18,886.	256,460.	
	Total support. Add lines 7 through 10						10,641,394.	
12	Gross receipts from related activ	vities, etc. (see ins	structions)			12	3,216,857.	
13	<b>First 5 years.</b> If the Form 990 is organization, check this box and	for the organization stop here	on's first, second,	third, fourth, or f	ifth tax year as a	section 501(c)(3)	▶ □	
Sec	tion C. Computation of Pu Public support percentage for 20	blic Support P	ercentage					
	Public support percentage for 20 Public support percentage from						71.63 %	
	33-1/3% support test—2020. If t	he organization di	id not check the b	oox on line 13, an	d line 14 is 33-1/3	B% or more, checl	71.80 % this box	
b	and <b>stop here.</b> The organization <b>33-1/3% support test—2019.</b> If the and <b>stop here.</b> The organization	ne organization did	d not check a box	on line 13 or 16a	a, and line 15 is 3	3-1/3% or more, o	check this box	
17a	<b>10%-facts-and-circumstances te</b> or more, and if the organization the organization meets the facts	meets the facts-a	nd-circumstances	test, check this I	box and stop here	e. Explain in Part	VI how	
	10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an	meets the facts-a d-circumstances	nd-circumstances test. The organiza	s test, check this lation qualifies as	box and <b>stop here</b> a publicly support	e. Explain in Part ed organization.	VI how the▶	
18	Private foundation. If the organi	zation did not che	ck a box on line	ıз, 16a, 16b, 17a	, or 1/b, check th	is box and see ins	structions •	

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.)

Sec	tion A. Public Support		p				
Calend	dar year (or fiscal year beginning in) >	<b>(a)</b> 2016	<b>(b)</b> 2017	(c) 2018	<b>(d)</b> 2019	<b>(e)</b> 2020	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any unusual grants.)						
2	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	Gross receipts from activities that are not an unrelated trade or business under section 513.						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
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.						
С	Add lines 7a and 7b						
8	<b>Public support.</b> (Subtract line 7c from line 6.)						
Sec	tion B. Total Support		T	T			
	dar year (or fiscal year beginning in)	<b>(a)</b> 2016	<b>(b)</b> 2017	<b>(c)</b> 2018	<b>(d)</b> 2019	<b>(e)</b> 2020	<b>(f)</b> Total
10a	Amounts from line 6						
	taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b.  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						
	First 5 years. If the Form 990 is organization, check this box and	stop here		third, fourth, or t	fifth tax year as a	section 501(c)(3)	<b>&gt;</b>
	tion C. Computation of Pul						
	Public support percentage for 20	• •			•		%
	Public support percentage from 2					16	%
	tion D. Computation of Inv				(0)	T 4= T	0
17	Investment income percentage for	•	• • •	-			0/0
18	Investment income percentage for						
	<b>33-1/3% support tests—2020.</b> If t is not more than 33-1/3%, check <b>33-1/3% support tests—2019.</b> If t	this box and <b>sto</b>	<b>p here.</b> The orgar	nization qualifies	as a publicly supp	orted organization	
	line 18 is not more than 33-1/3%	, check this box	and <b>stop here.</b> Th	e organization qu	ualifies as a public	ly supported organ	ization ►
ZU BAA	Private foundation. If the organiz	Zation did not che	TEEA0403L			hedule A (Form 99	

### Part IV Supporting Organizations

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

#### **Section A. All Supporting Organizations**

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

Par	t IV	Supporting Organizations (continued)			
11	∐ac t	the organization accepted a gift or contribution from any of the following persons?		Yes	No
		rson who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below,			
-		joverning body of a supported organization?	11a		
b	A fan	mily member of a person described in line 11a above?	11b		
		6 controlled entity of a person described in line 11a or 11b above? If 'Yes' to line 11a, 11b, or 11c, provide detail in Part VI.	11c		
Sec	tion	B. Type I Supporting Organizations			1
	D: 4 H		$\overline{}$	Yes	No
1	or mo office organ than	he governing body, members of the governing body, officers acting in their official capacity, or membership of one ore supported organizations have the power to regularly appoint or elect at least a majority of the organization's ers, directors, or trustees at all times during the tax year? If 'No,' describe in <b>Part VI</b> how the supported nization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees			
		allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers og the tax year.	1		
2	that o	he organization operate for the benefit of any supported organization other than the supported organization(s) operated, supervised, or controlled the supporting organization? If 'Yes,' explain in <b>Part VI</b> how providing such stiff carried out the purposes of the supported organization(s) that operated, supervised, or controlled the orting organization.	2		
Sec	tion	C. Type II Supporting Organizations			
				Yes	No
1	Were	a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees ach of the organization's supported organization(s)? If 'No,' describe in <b>Part VI</b> how control or management of the			
		orting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sec	tion	D. All Type III Supporting Organizations			
-	D: 1 II			Yes	No
1	orgar	he organization provide to each of its supported organizations, by the last day of the fifth month of the nization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
		(ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the nization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
	Ü				
2	orgar	e any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported nization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in <b>Part VI</b> how			
	the o	organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	voice	ason of the relationship described in line 2, above, did the organization's supported organizations have a significant e in the organization's investment policies and in directing the use of the organization's income or assets at			
		mes during the tax year? If 'Yes,' describe in <b>Part VI</b> the role the organization's supported organizations played is regard.	3		
Sec	tion	E. Type III Functionally Integrated Supporting Organizations			
1	Check	k the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a		The organization satisfied the Activities Test. Complete line 2 below.			
	一				
b	Ħ	The organization is the parent of each of its supported organizations. Complete line 3 below.		4 :	-1
С	ш'	The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a governmental entity (see	IIISIII	ictions	5).
2	Activ	ities Test. Answer lines 2a and 2b below.		Yes	No
а	suppo orgai	substantially all of the organization's activities during the tax year directly further the exempt purposes of the orted organization(s) to which the organization was responsive? If 'Yes,' then in <b>Part VI identify those supported</b> nizations and explain how these activities directly furthered their exempt purposes, how the organization was consive to those supported organizations, and how the organization determined that these activities constituted			
		tantially all of its activities.	2a		
b	more	he activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the			
		ons for the organization's position that its supported organization(s) would have engaged in these activities or the organization's involvement.	2b		
3	Parer	nt of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the each	he organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of of the supported organizations? If 'Yes' or 'No,' provide details in <b>Part VI.</b>	3a		
b		ne organization exercise a substantial degree of direction over the policies, programs, and activities of each of its orted organizations? If 'Yes,' describe in <b>Part VI</b> the role played by the organization in this regard.	3b		

Pa	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizat	tions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust instructions. All other Type III non-functionally integrated supporting organization	t on No	ov. 20, 1970 (explain ir st complete Sections A	n Part VI). <b>See</b> through E.
Sec	tion A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
•	Discount claimed for blockage or other factors     (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally inte (see instructions).	grated	Type III supporting or	ganization

Schedule A (Form 990 or 990-EZ) 2020

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Pai	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)					
Sec	tion D - Distributions		Current Year			
1	Amounts paid to supported organizations to accomplish exempt purposes	1				
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2				
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3				
4	Amounts paid to acquire exempt-use assets	4				
5	Qualified set-aside amounts (prior IRS approval required — provide details in Part VI)	5				
6	Other distributions (describe in Part VI). See instructions.	6				
7	Total annual distributions. Add lines 1 through 6.	7				
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions.	8				
9	Distributable amount for 2020 from Section C, line 6	9				
10	Line 8 amount divided by line 9 amount	10				

Section E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required — explain in Part VI). See instructions.			
3 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			
f Total of lines 3a through 3e			
<b>g</b> Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2020 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
<b>b</b> Applied to 2020 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI</b> . See instructions.			
7 Excess distributions carryover to 2021. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2016			
<b>b</b> Excess from 2017			
c Excess from 2018			
<b>d</b> Excess from 2019			
e Excess from 2020			
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Schedule A (Form 990 or 990-EZ) 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 4, 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.)

### Part II, Line 10 - Other Income

Nature and Source			2020		2019		2018		2017		2016
Other Income	Total	\$ \$	18,886. 18,886.	\$ \$	75,254. 75,254.	\$ \$	70,520. 70,520.	\$ \$	57,357. 57,357.	\$ \$	34,443. 34,443.

#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered 'Yes' on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Home for Contemporary Theatre and Art, Ltd. (d/b/a HERE Art Center) 13-3449416 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 Total number at end of year..... 1 Aggregate value of contributions to (during year). . . . . . Aggregate value of grants from (during year)...... Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds No are the organization's property, subject to the organization's exclusive legal control?... Yes 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 No impermissible private benefit?.... Yes **Conservation Easements.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 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 Tax Year a Total number of conservation easements. 2 a **b** Total acreage restricted by conservation easements. 2 b c Number of conservation easements on a certified historic structure included in (a)..... d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register..... Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, No and enforcement of the conservation easements it holds?..... Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 ▶\$ 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)?..... 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 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..... 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 Mainta	ining Colle	ections of A	Art, Histoi	rical Treasures, o	r Other	<sup>r</sup> Similar Ass	ets (co	<u>ontinu</u>	ed)	
3 Using the organization's acquisition items (check all that apply):	, accession, a	nd other recor	ds, check an	y of the following that m	nake sign	ificant use of its	collectio	n		
a Public exhibition d Loan or exchange program										
<b>b</b> Scholarly research	b Scholarly research e Other									
c Preservation for future gener	ations									
4 Provide a description of the organiz Part XIII.	zation's collect	ions and expla	ain how they	further the organization	's exemp	t purpose in				
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?										
line 9, or reported an	amount on	Form 990	plete if th , Part X, I	ne organization an ine 21.	swered	d 'Yes' on Fo	rm 990	), Par	ίΙV,	
1 a Is the organization an agent, trus on Form 990, Part X?	stee, custodia	n or other int	termediary f	or contributions or oth	er asset	s not included	Yes	Γ	No	
<b>b</b> If 'Yes,' explain the arrangement									_	
							Amount			
<b>c</b> Beginning balance						С				
<b>d</b> Additions during the year						-				
e Distributions during the year						-				
f Ending balance										
2a Did the organization include an a							Yes	_	No	
<b>b</b> If 'Yes,' explain the arrangement	in Part XIII.	Check here if	the explana	ation has been provide	ed on Pa	art XIII		· · · · L		
Dort V Endoument Funds C	onanlata if	the eracuit	-atian and	wared Weel on Fr	0.Km2 0.00	0 Dort IV Lin	20 10			
Part V Endowment Funds. C				(c) Two years bac		<u>U, Part IV, III</u> <b>)</b> Three years back				
<b>1 a</b> Beginning of year balance	(a) Current	year	(b) Prior year	(C) Two years back	K (u)	) Tillee years back	(e) r	our years	Dack	
<b>b</b> Contributions					+					
					+					
c Net investment earnings, gains, and losses										
<b>d</b> Grants or scholarships										
e Other expenditures for facilities										
and programs										
f Administrative expenses										
<b>g</b> End of year balance										
2 Provide the estimated percentag	e of the curre	nt year end b	palance (line	e 1g, column (a)) held	as:					
a Board designated or quasi-endowm			_ % _							
<b>b</b> Permanent endowment ►										
c Term endowment ►	<del></del> %									
The percentages on lines 2a, 2b, a	nd 2c should e	qual 100%.								
3 a Are there endowment funds not in t	the possession	of the organiz	zation that ar	e held and administered	d for the		_			
organization by:							0.00	Yes	No	
(i) Unrelated organizations							3a(i)			
(ii) Related organizations							3a(ii)			
<b>b</b> If 'Yes' on line 3a(ii), are the rela	-		•				3b			
4 Describe in Part XIII the intended			s endowmer	it iuiius.						
Part VI Land, Buildings, and Complete if the organi			s' on Form	000 Part IV line	. 11. (	Soo Form 00	0 Par	+ ∨ lir	20 10	
	12011011 0115					r				
Description of property		(a) Cost or o		(b) Cost or other basis (other)		ccumulated preciation	(d) E	Book va	lue	
<b>1 a</b> Land										
<b>b</b> Buildings				1,538,677.		644,173.			504.	
c Leasehold improvements				2,621,895.	1	,097,798.	1	,524,		
<b>d</b> Equipment				279,695.		279,695.			0.	
e Other			0 D	52,728.		49,396.			332.	
Total. Add lines 1a through 1e. (Colum	ııı (a) must e	yuai Form 99	u, rart X, co	טוערזורו (ש), IINE TUC.)			2 ule D (Fo	, 421,		
MOD						JUITU	いし レ げし	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	

(a) Descr	Complete if the organization answered ription of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-	
(1) Financi	ial derivatives			
	held equity interests			
(3) Other				
(A)				
(A) (B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
(l)				
	nn (b) must equal Form 990, Part X, column (B) line 12.)			
Part VIII	Investments – Program Related. Complete if the organization answered	'Vec' on Form 90	N/A O Part IV line 11c See Form 9	000 Part Y line 13
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	d-of-vear market value
(1)	(a) Description of investment	(b) Book value	(c) Method of Valuation. Cost of end	a or year market value
(1) (2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(8) (9)				
(8) (9) (10)	nn (b) must equal Form 990, Part X, column (B) line 13.) ▶			
(8) (9) (10)	Other Assets.	N/A		200 Dest V. Free 15
(8) (9) (10) Total. (Colum	Other Assets. Complete if the organization answered	'Yes' on Form 99		
(8) (9) (10) Total. (Column Part IX	Other Assets. Complete if the organization answered			990, Part X, line 15 <b>(b)</b> Book value
(8) (9) (10) Total. (Column Part IX	Other Assets. Complete if the organization answered	'Yes' on Form 99		
(8) (9) (10) Total. (Column Part IX	Other Assets. Complete if the organization answered	'Yes' on Form 99		
(8) (9) (10) Total. (Column Part IX (1) (2) (3)	Other Assets. Complete if the organization answered	'Yes' on Form 99		
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Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Ro	eturn.	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	3,198,192.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments		
<b>b</b> Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.) 2d		
e Add lines 2a through 2d.	2 e	125,554.
3 Subtract line 2e from line 1.	3	3,072,638.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.) 4b		
c Add lines 4a and 4b.	4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).	5	3,072,638.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Returr	1.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	2,053,658.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities		
<b>b</b> Prior year adjustments		
Di noi year adjustinents		
c Other losses. 2c		
	-	
c Other losses. 2c	2 e	125,554.
c Other losses.         2 c           d Other (Describe in Part XIII.)         2 d	2 e	125,554. 1,928,104.
c Other losses. 2 c d Other (Describe in Part XIII.) 2d e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	-	•
c Other losses. 2c d Other (Describe in Part XIII.) 2d e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. 4a	-	•
c Other losses. 2c d Other (Describe in Part XIII.) 2d e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. 4a b Other (Describe in Part XIII.) 4b	3	•
c Other losses. 2c d Other (Describe in Part XIII.) 2d e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. 4a	3 4c	•

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 XI, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

#### Part X - FASB ASC 740 Footnote

The Center does not believe its financial statements include any material, uncertain tax positions. Tax filings for the periods ending August 31, 2018 and later are subject to examination by applicable taxing authorities.

BAA Schedule D (Form 990) 2020

#### **SCHEDULE 0** (Form 990 or 990-EZ)

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

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

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

OMB No. 1545-0047 2020

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Home for Contemporary Theatre and Art, Ltd. (d/b/a HERE Art Center)

Employer identification number 13-3449416

#### Form 990. Part III. Line 1 - Organization Mission

From our home in Lower Manhattan, HERE builds an inclusive community that nurtures artists of all backgrounds as they disrupt conventional expectations to create innovative performances in theatre, dance, music, puppetry, media, and visual art. By providing these genre-blending artists with an adaptive, flexible home for developing and producing their work, we share a range of perspectives reflective of the complexity of our city. HERE welcomes curious audiences to witness groundbreaking performances, responsive to the world in which we live, at free and affordable prices.

HERE strives to create an equitable, diverse, and inclusive home in which all people have fair access to the resources they need to realize their visions. We acknowledge structural inequities that exclude individuals and communities from opportunities based on race, gender, disability, sexual orientation, class, age, and geography, and seek to counter those inequities in our work. Through mindful actions on sustainability and regenerative practices, we work toward climate justice, and a safe, livable planet for present and future artmakers and audiences.

#### Form 990, Part III, Line 4a - Program Service Accomplishments

HERE FY21 Programming Achievements

HERE's Shift During COVID-19

When HERE was forced to close our doors to keep our community safe in March 2020, we quickly asked ourselves two questions: how can we remain a connector for artists and audiences without a gathering space? And, how can we continue to commission new work, responsive to this moment, so that generative artists can receive the financial

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#### Form 990, Part III, Line 4a - Program Service Accomplishments

inspired?

Within those first days of lockdown, we launched extensive online programming to provide audiences and artists moments of connection and conversation at a time of isolation. With leadership funding from the New York Community Trust COVID-19 Impact and Response Fund and other emergency grants, we were able to fulfill our primary goal of compensating artists at such a devastating moment, and have since provided artist fees of more than \$350,000 to more than 700 artists participating in our online programs. Over the last year, these programs have reached more than 300,000 people, with more than 100,000 engaging in a variety of digital offerings. Despite a year of ever-changing projections about when we might reopen for public performances, we curated a season of new work created by resident and affiliated artists, and continued to invest resources into developing world premieres for our future seasons, back in our home.

#### HERE's 2020-21 Season

Digital Offerings - As mentioned in our previous report, submitted in March 2021, when HERE launched our online programming, we began with three primary components. The first was HERE@Home (weekly March-July 2020; then monthly through October), a series of live screenings of past HERE productions, during which artists and audiences could interact through live chat. Of the 18 works screened through this series, 8 were dance or movement works. Second, we offered #stillHERE, a weekly livestream performance or artist talk every other Friday at 1pm. Some are structured as digital premieres of new works created for these times, while others are more informal artist talks; both feature live Q&A between viewers and artists. Finally, we were proud to create COVIDEO, a sequential, community-built video of art-making in the time of

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#### Form 990, Part III, Line 4a - Program Service Accomplishments

corona (March-December 2020). Built over 10 days by 10 artists and in response to a certain theme, a new chain-like video was revealed every two weeks. A total of 16 videos were created featuring the work of 170 artists. Of these, 23 dance artists and choreographers were featured in 15 pieces, including a dance-specific COVIDEO and a puppetry-specific COVIDEO.

As our months under lockdown continued, we realized that these three forums needed to give way to new works created since the pandemic began. Thus far, we have premiered nine new digital works, including four works that involved puppetry and/or dance artists:

Qualified Alien (September 2020 premiere)

A puppet and their assistant petition to join the circus. Creators and puppeteers

Rosa Douglas and Ben Elling light a candle for the meritocracy in this short puppet

play adapted for screen.

Only You Will Recognize the Signal (October 29-Dec 17 2020)

Only You Will Recognize the Signal is a serialized space opera created specifically for the digital live performance format by the established team of composer Kamala Sankaram, playwright Rob Handel, and director Kristin Marting. This multidisciplinary opera-theatre work, which tells the story of a group of travelers stuck in transition between planet A and planet B, with singers, video and puppetry by Hanne Tierney, was performed and streamed live in seven episodes of 10 minutes each over seven weeks. On the 7th week, at the conclusion of the story, the first 60-minutes were screened with the 10-minute finale performed live.

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#### Form 990, Part III, Line 4a - Program Service Accomplishments

Puppet Parlor (December 2020 premiere)

HERE's annual celebration of puppets returned, this time in digital space, featuring artists from all over the world. Including works by the Franco-Finnish company Aurora Théâtre d'Illusia, the Chilean company Silencio Blanco (Chiflón, El Silencio del Carbón, HERE 2017), and the French-Norwegian company Plexus Polaire (Ashes, HERE 2019).

Communion (February 2 - June 20)

Communion is an experimental video art response to the isolation and uncertainty we are all facing as artists and humans in the wake of the Covid-19 crisis. Because dancers can no longer breathe together, touch, or share the experience of movement within the physical studio, Communion invites 40 dancers, separated by physical distance and the pandemic, into a digital space to commune together. Each unique duet is created from videos by two different dancers who are separated by cities, countries, and sometimes continents. Artist Janessa Clark combines these videos to create virtual duets which are set to music donated by a composer who is also collaborating remotely. In addition to streaming the piece in segments each Friday for 20 weeks last spring, HERE also screened all the duets as a video installation from June 3 through June 19 in our Mainstage space for audiences to walk through and experience in a safe socially distant manner.

In Real Life (IRL) Performance - When it became clear that some work outdoors was possible, we worked with our resident artists to devise opportunities to bring their ideas to life, making new commissions for work that directly responds to the pandemic. The following are the dance and movement performances we've supported through this initiative:

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#### Form 990, Part III, Line 4a - Program Service Accomplishments

Correspondences (October 1-4, 2020)

Correspondences is a large installation performance created by LEIMAY (resident artists Shige Moriya and Ximena Garnica) in Astor Place. With three performers enclosed in three large glass tanks half-filled with sand, the human body (performer and observer), machines, natural elements, and the urban square mingled in an entangled poetic microcosm, while opening inquiries into life and environmental ethics. We've estimated that over its four-day run, more than 25,000 people passed through and engaged with this visually stunning piece. We are also happy to report that after the Manhattan premiere LEIMAY has since toured this piece to Queens, Staten Island, and the Hudson Valley.

The Dark Girl Chronicles: Chronicle X (June 3-4, 2021)

Created by HARP artist Nia O. Witherspoon, The Dark Girl Chronicles is a ritual-play cycle designed to crystallize in the collective memory the stories of Black women warriors against state violence. Part Yoruba sacred story, part communal ritual, and part documentary-manifesto, each piece in the cycle focuses on the interiority and necessary dignity of dark girls, dark landscapes, and dark knowledges so often excised from the public arena. Chronicle X, this first section in the cycle, was co-produced by HERE, The Shed, and Musical Theater Factory, as part of The Shed's Open Call festival this last summer. The performances featured choreography by Chanon Judson of Urban Bush Women.

Water Cooler Siren Song (September 1-5, 2021)

HERE Resident Artist and director, designer, and puppeteer Spencer Lott created a performance for Manhattan's Little Island to remind us that without arts workers, no economic recovery is complete. For this premiere, Lott presents four mythical

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#### Form 990, Part III, Line 4a - Program Service Accomplishments

creatures, each representing the artistic spirit of their human performers who have been forced to abandon their artistic pursuits. For a time, the puppet creatures soar freely around Little Island, dancing and flirting with visitors, until a siren song lures them back to a water cooler. With text and live cello, the four performers embody their full artistic identities for a fleeting moment.

Ongoing Support for the HERE Artist Residency Program (HARP) - We have always thought of ourselves as an artist-centered organization; COVID-19 reinforced our commitment to acting as a partner to our resident artists and finding ways to continuously provide new opportunities and engagement to a wide circle of other artists. We immediately took the opportunity to listen to the challenges our artists faced and worked with them to respond. We found ways to help them secure their own Payroll Protection Program loans, file for unemployment, navigate visa challenges, and find additional housing for guarantine.

While unable to open our space to the public, we also hosted five puppetry residencies for puppet artists to develop works over this last winter. The residencies culminated in an evening of in-progress virtual sharings in April 2021. That summer, we produced our annual festival of resident artists workshops, HERE RAW, streaming some content and offering other content on the streets outside of HERE or in our theatres, as a walk-through installation experience. As always, the projects being developed within HARP and included in HERE RAW exemplified HERE's commitment to work that pushes the boundaries of dance and theatre performance, while at the same time tackling complex issues reflective of the world we live in with thoughtfulness and creativity.

Name of the organization II For Continuous III III	Employer identification number
Name of the organization Home for Contemporary Theatre	=proj or raonanou aon nameo
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and Art, Ltd. (d/b/a HERE Art Center)	13-3449416
and Art, Ltd. (d/b/a HERE Art Center)	10 0440410

#### Form 990, Part VI, Line 11b - Form 990 Review Process

Management reviewed a draft of the form 990 with the audit/finance committee and provided edits to the tax preparer. After this process was performed, the form 990 was sent to the full board of directors prior to being filed with the IRS.

#### Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

All Board Members are required to fill our a Conflict of Interest Disclosure form before the start of the next fiscal year.

#### Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO & Top Management

Each year, the executive committee reviews comparable salaries based on a recognized industry salary survey and reviews the performance of the artistic producer to determine if the existing salary falls within these ranges. After a deliberation of this matter, a new proposed salary and benefit package is voted on. The minutes of the board of directors reflect the nature of this process.

#### Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

Financial statements are available for review on our website. Governing documents and policies are available upon request.

**(7)** 

#### Form 990, Part IX, Line 11g Other Fees For Services

	_	Total	Program Services	Management & General	Fund- raising
Artistic and Other Fees Professional Fees		449,580. 45,931.	449,580.	44,901.	1,030.
	Total \$	495,511.	\$ 449,580.	\$ 44,901.	\$ 1,030.

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