

Form **990**

**Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

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

**2020**

Department of the Treasury  
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Open to Public Inspection

**A** For the **2020** calendar year, or tax year beginning **SEP 1, 2020** and ending **AUG 31, 2021**

<b>B</b> Check if applicable:  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization BERKELEY REPERTORY THEATRE  Doing business as  Number and street (or P.O. box if mail is not delivered to street address) Room/suite 999 HARRISON STREET  City or town, state or province, country, and ZIP or foreign postal code BERKELEY, CA 94710	<b>D</b> Employer identification number  94-1679756
	<b>F</b> Name and address of principal officer: SUSAN MEDAK SAME AS C ABOVE	<b>E</b> Telephone number 510-647-2900
	<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	<b>G</b> Gross receipts \$ 11,884,416.
<b>J</b> Website: ▶ WWW.BERKELEYREP.ORG		<b>H(a)</b> Is this a group return for subordinates? ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions <b>H(c)</b> Group exemption number ▶
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	<b>L</b> Year of formation: 1968	<b>M</b> State of legal domicile: CA

**Part I Summary**

	<b>1</b>	Briefly describe the organization's mission or most significant activities: THE THEATRE PRODUCES PREMIERS OF NEW WORK AND MAJOR PRODUCTIONS FROM AN INTERNATIONAL REPERTOIRE.		
	<b>2</b>	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
<b>Activities &amp; Governance</b>	<b>3</b>	Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	32
	<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	30
	<b>5</b>	Total number of individuals employed in calendar year 2020 (Part V, line 2a)	<b>5</b>	301
	<b>6</b>	Total number of volunteers (estimate if necessary)	<b>6</b>	110
	<b>7a</b>	Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	-92,964.
	<b>7b</b>	Net unrelated business taxable income from Form 990-T, Part I, line 11	<b>7b</b>	0.
	<b>Revenue</b>	<b>8</b>	Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b>
<b>9</b>		Program service revenue (Part VIII, line 2g)	6,578,220.	10,720,565.
<b>10</b>		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	5,766,752.	599,222.
<b>11</b>		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	252,480.	244,148.
<b>12</b>		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-252,663.	-193,921.
			12,344,789.	11,370,014.
<b>Expenses</b>	<b>13</b>	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	3,603.	1,965.
	<b>14</b>	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	<b>15</b>	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	8,843,457.	6,121,350.
	<b>16a</b>	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	<b>16b</b>	Total fundraising expenses (Part IX, column (D), line 25) ▶ 923,095.		
	<b>17</b>	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	6,660,580.	3,544,406.
	<b>18</b>	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	15,507,640.	9,667,721.
	<b>19</b>	Revenue less expenses. Subtract line 18 from line 12	-3,162,851.	1,702,293.
<b>Net Assets or Fund Balances</b>	<b>20</b>	Total assets (Part X, line 16)	<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>21</b>	Total liabilities (Part X, line 26)	72,417,342.	78,284,133.
	<b>22</b>	Net assets or fund balances. Subtract line 21 from line 20	48,287,515.	51,761,513.
			24,129,827.	26,522,620.

**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b>	Signature of officer HENNING MATHEW, TREASURER Type or print name and title	Date			
<b>Paid Preparer Use Only</b>	Print/Type preparer's name KATY BROWN	Preparer's signature KATY BROWN	Date 05/09/22	Check if self-employed <input type="checkbox"/>	PTIN P00650274
	Firm's name ▶ ARMANINO LLP Firm's address ▶ 12657 ALCOSTA BLVD, STE. 500 SAN RAMON, CA 94583-4600	Firm's EIN ▶ 94-6214841	Phone no. 925-790-2600		

May the IRS discuss this return with the preparer shown above? See instructions  Yes  No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: PLEASE SEE SCHEDULE O FOR THE COMPLETE MISSION STATEMENT.

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code: ) (Expenses \$ 5,769,031. including grants of \$ ) (Revenue \$ 455,946. ) BERKELEY REP'S 2020/21 SEASON WAS A YEAR UNLIKE ANY OTHER IN THE THEATRE'S MORE THAN 50-YEAR HISTORY...

4b (Code: ) (Expenses \$ 563,480. including grants of \$ 1,965. ) (Revenue \$ 143,276. ) IN SPITE OF CHALLENGES BROUGHT ON BY COVID-19, THE SCHOOL OF THEATRE HAS CONTINUED TO PROGRAM COMPREHENSIVE ARTS LEARNING OPPORTUNITIES FOR BAY AREA CHILDREN...

4c (Code: ) (Expenses \$ 194,317. including grants of \$ ) (Revenue \$ ) FROM THE MOMENT IN-PERSON THEATRE ACTIVITIES WERE SUSPENDED, BERKELEY REP RECOGNIZED THE NEED TO CENTER OUR COMMITMENT TO SERVING ARTISTS. IN ADDITION TO PROVIDING PAID CREATIVE WORK TO ALL THE ARTISTS WHO PARTICIPATED IN REP ON-AIR AS ACTORS...

4d Other program services (Describe on Schedule O.) (Expenses \$ 204,470. including grants of \$ ) (Revenue \$ )

4e Total program service expenses 6,731,298.

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> .....	X	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? .....	X	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> .....		X
<b>4 Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> .....		X
<b>5</b> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i> .....		X
<b>6</b> Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i> .....		X
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> .....		X
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> .....		X
<b>9</b> Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> .....		X
<b>10</b> Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i> .....	X	
<b>11</b> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
<b>a</b> 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> .....	X	
<b>b</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? <i>If "Yes," complete Schedule D, Part VII</i> .....		X
<b>c</b> Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i> .....		X
<b>d</b> Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i> .....		X
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> .....	X	
<b>f</b> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i> .....	X	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> .....	X	
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> .....		X
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> .....		X
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? .....		X
<b>b</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? <i>If "Yes," complete Schedule F, Parts I and IV</i> .....		X
<b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i> .....		X
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i> .....		X
<b>17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> .....		X
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> .....		X
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> .....		X
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> .....		X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .....		
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> .....		X

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question number, Yes, No. Rows 22-38 covering various organizational requirements.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with 3 columns: Question number, Yes, No. Rows 1a, 1b, 1c regarding Form 1096 and backup withholding rules.

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

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 16 regarding employee counts, tax returns, gross income, foreign accounts, prohibited transactions, and charitable contributions.

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 [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (32); 1b Enter the number of voting members included on line 1a, above, who are independent (30); 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? (X); 3 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? (X); 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? (X); 5 Did the organization become aware during the year of a significant diversion of the organization's assets? (X); 6 Did the organization have members or stockholders? (X); 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? (X); 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? (X); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? (X); b Each committee with authority to act on behalf of the governing body? (X); 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 O (X).

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

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

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed CA
18 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] Own website [ ] Another's website [X] Upon request [ ] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records
JARED HAMMOND, FINANCE DIRECTOR - 510-647-2955
999 HARRISON STREET, BERKELEY, CA 94710

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, 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.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ANTHONY TACCONE FORMER ARTISTIC DIRECTOR	0.00						X	383,475.	0.	0.
(2) JOHANNA PFAELZER ARTISTIC DIRECTOR	40.00	X		X				281,646.	0.	15,902.
(3) SUSAN MEDAK MANAGING DIRECTOR	40.00	X		X				285,107.	0.	8,812.
(4) AMY POTOZKIN CASTING DIRECTOR	40.00						X	174,425.	0.	7,144.
(5) THERESA VON KLUG GENERAL MANAGER	40.00					X		148,954.	0.	23,906.
(6) LYNN EVE KOMAROMI DIRECTOR OF DEVELOPMENT	40.00					X		151,142.	0.	17,960.
(7) STEVE TATE DIRECTOR OF MARKETING	40.00					X		141,634.	0.	13,516.
(8) AUDREY HOO PRODUCTION MANAGER	40.00					X		118,665.	0.	8,812.
(9) JARED HAMMOND FINANCE DIRECTOR	40.00					X		117,782.	0.	8,408.
(10) EMILY SHANKS PRESIDENT	1.00	X		X				0.	0.	0.
(11) JILL FUGARO VICE PRESIDENT	1.00	X		X				0.	0.	0.
(12) BRUCE GOLDEN VICE PRESIDENT	1.00	X		X				0.	0.	0.
(13) STEWART OWEN VICE PRESIDENT	1.00	X		X				0.	0.	0.
(14) SUDHA PENNATHUR VICE PRESIDENT	1.00	X		X				0.	0.	0.
(15) HENNING MATTHEW TREASURER	1.00	X		X				0.	0.	0.
(16) LEONARD X ROSENBERG SECRETARY	1.00	X		X				0.	0.	0.
(17) ANNE NEMER DHANDA CHAIR, GOVERNANCE COMMITTEE	1.00	X		X				0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) KERRY FRANCIS CHAIR, AUDIT COMMITTEE	1.00	X		X				0.	0.	0.
(19) GAIL WAGNER TRUSTEE	1.00	X						0.	0.	0.
(20) FELICIA WOYTAK TRUSTEE	1.00	X						0.	0.	0.
(21) BERIT ASHLA TRUSTEE (LEFT 05/21)	1.00	X						0.	0.	0.
(22) EDWARD D. BAKER TRUSTEE	1.00	X						0.	0.	0.
(23) ERICA BROWN TRUSTEE	1.00	X						0.	0.	0.
(24) DAVID COX TRUSTEE	1.00	X						0.	0.	0.
(25) LAUREN EDGERTON TRUSTEE	1.00	X						0.	0.	0.
(26) ROBIN EDWARDS TRUSTEE (LEFT 05/21)	1.00	X						0.	0.	0.
<b>1b Subtotal</b>								1,802,830.	0.	104,460.
<b>c Total from continuation sheets to Part VII, Section A</b>								0.	0.	0.
<b>d Total (add lines 1b and 1c)</b>								1,802,830.	0.	104,460.

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **10**

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	X	
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
UPTIME USA, INC., 3470 MT. DIABLO BLVE, STE. A130, LAFAYETTE, CA 94549	IT SUPPORT	191,431.
ELEVATOR REPAIR SERVICE, 47 GREAT JONES ST., 3RD FL, NEW YORK, NY 10012	THEATRICAL PRODUCTION	145,000.
DE QUESADA ARCHITECTS INC., 21 TAMAL VISTA BLVD., STE 192, CORTE MADERA, CA 94925	ARCHITECTURAL SERVICES	128,357.
KQED, 2601 MARIPOSA ST., SAN FRANCISCO, CA 94110-1426	ADVERTISING	109,440.
ARMANINO, LLP P.O. BOX 888285, LOS ANGELES, CA 90088-8285	AUDIT AND TAX PREPARATION	104,032.

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **5**

SEE PART VII, SECTION A CONTINUATION SHEETS



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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) CHUCK FANNING TRUSTEE	1.00	X					0.	0.	0.	
(28) KAREN GALATZ TRUSTEE (LEFT 05/21)	1.00	X					0.	0.	0.	
(29) STEVEN GOLDIN TRUSTEE	1.00	X					0.	0.	0.	
(30) SCOTT HABER TRUSTEE	1.00	X					0.	0.	0.	
(31) MICHAEL KOSSMAN TRUSTEE (LEFT 05/21)	1.00	X					0.	0.	0.	
(32) JONATHAN C. LOGAN TRUSTEE	1.00	X					0.	0.	0.	
(33) SANDRA MCCANDLESS TRUSTEE	1.00	X					0.	0.	0.	
(34) LAURA SEVERINO TRUSTEE (LEFT 05/21)	1.00	X					0.	0.	0.	
(35) RICHARD SHAPIRO TRUSTEE (LEFT 05/21)	1.00	X					0.	0.	0.	
(36) ROGER STRAUCH TRUSTEE	1.00	X					0.	0.	0.	
(37) JEAN STRUNSKY TRUSTEE	1.00	X					0.	0.	0.	
(38) KELLY TOMLINSON TRUSTEE (LEFT 05/21)	1.00	X					0.	0.	0.	
(39) STEVE C. WOLAN TRUSTEE	1.00	X					0.	0.	0.	
(40) SANDRA EGGERS TRUSTEE (START 12/20)	1.00	X					0.	0.	0.	
(41) BILL ESPEY TRUSTEE (START 05/21)	1.00	X					0.	0.	0.	
(42) JUAN OLDHAM TRUSTEE (START 12/20)	1.00	X					0.	0.	0.	
(43) CHRIS RUPP TRUSTEE (START 05/21)	1.00	X					0.	0.	0.	
(44) SHERRY A. SMITH TRUSTEE (START 05/21)	1.00	X					0.	0.	0.	
(45) BRIAN WATT TRUSTEE (START 12/20)	1.00	X					0.	0.	0.	
Total to Part VII, Section A, line 1c .....										

**Part VIII Statement of Revenue**

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	<b>1 a</b> Federated campaigns .....	<b>1a</b>					
	<b>b</b> Membership dues .....	<b>1b</b>					
	<b>c</b> Fundraising events .....	<b>1c</b>					
	<b>d</b> Related organizations .....	<b>1d</b>					
	<b>e</b> Government grants (contributions) .....	<b>1e</b>	3,541,533.				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above ...	<b>1f</b>	7,179,032.				
	<b>g</b> Noncash contributions included in lines 1a-1f	<b>1g</b>	\$ 321,201.				
	<b>h Total.</b> Add lines 1a-1f .....			10,720,565.			
Program Service Revenue	<b>2 a</b> CO-PRODUCTION REVENUE	<b>Business Code</b>					
		711110	344,776.	344,776.			
	<b>b</b> TUITION/EDUCATION	711110	150,076.	150,076.			
	<b>c</b> ADMISSIONS/SPECIAL PERFORMANCES	711110	58,310.	58,310.			
	<b>d</b> SERVICE CHARGES	711110	46,060.	46,060.			
	<b>e</b> _____						
	<b>f</b> All other program service revenue .....						
<b>g Total.</b> Add lines 2a-2f .....			599,222.				
Other Revenue	<b>3</b> Investment income (including dividends, interest, and other similar amounts) .....		93,864.			93,864.	
	<b>4</b> Income from investment of tax-exempt bond proceeds .....						
	<b>5</b> Royalties .....		591.			591.	
	<b>6 a</b> Gross rents .....	<b>6a</b>	(i) Real	52,865.			
			(ii) Personal		337.		
				247,194.			
	<b>b</b> Less: rental expenses ...	<b>6b</b>					
	<b>c</b> Rental income or (loss)	<b>6c</b>	-194,329.	-337.			
	<b>d</b> Net rental income or (loss) .....			-194,666.	-92,964.	-101,702.	
	<b>7 a</b> Gross amount from sales of assets other than inventory .....	<b>7a</b>	(i) Securities	417,155.			
			(ii) Other				
				266,871.			
	<b>b</b> Less: cost or other basis and sales expenses .....	<b>7b</b>					
<b>c</b> Gain or (loss) .....	<b>7c</b>	150,284.					
<b>d</b> Net gain or (loss) .....			150,284.		150,284.		
<b>8 a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 .....	<b>8a</b>						
<b>b</b> Less: direct expenses .....	<b>8b</b>						
<b>c</b> Net income or (loss) from fundraising events .....							
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19 .....	<b>9a</b>						
<b>b</b> Less: direct expenses .....	<b>9b</b>						
<b>c</b> Net income or (loss) from gaming activities .....							
<b>10 a</b> Gross sales of inventory, less returns and allowances .....	<b>10a</b>						
<b>b</b> Less: cost of goods sold .....	<b>10b</b>						
<b>c</b> Net income or (loss) from sales of inventory .....							
Miscellaneous Revenue	<b>11 a</b> MISCELLANEOUS REVENUE	<b>Business Code</b>					
		711110	154.			154.	
	<b>b</b> _____						
	<b>c</b> _____						
	<b>d</b> All other revenue .....						
<b>e Total.</b> Add lines 11a-11d .....			154.				
<b>12 Total revenue.</b> See instructions .....			11,370,014.	599,222.	-92,964.	143,191.	

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...				
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22 .....	1,965.	1,965.		
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 .....				
<b>4</b> Benefits paid to or for members .....				
<b>5</b> Compensation of current officers, directors, trustees, and key employees .....	644,586.	382,094.	164,473.	98,019.
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .....				
<b>7</b> Other salaries and wages .....	4,070,744.	2,389,067.	1,218,743.	462,934.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) .....	370,532.	240,416.	79,507.	50,609.
<b>9</b> Other employee benefits .....	701,402.	529,690.	115,276.	56,436.
<b>10</b> Payroll taxes .....	334,086.	222,488.	72,551.	39,047.
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management .....				
<b>b</b> Legal .....				
<b>c</b> Accounting .....	115,121.		115,121.	
<b>d</b> Lobbying .....				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees .....	30,144.		30,144.	
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	207,040.	126,108.	12,198.	68,734.
<b>12</b> Advertising and promotion .....	48,387.		26,750.	21,637.
<b>13</b> Office expenses .....	106,530.	68,664.	11,401.	26,465.
<b>14</b> Information technology .....				
<b>15</b> Royalties .....	49,320.	49,320.		
<b>16</b> Occupancy .....	350,836.	333,485.	9,064.	8,287.
<b>17</b> Travel .....	8,863.	6,980.	1,245.	638.
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
<b>19</b> Conferences, conventions, and meetings .....				
<b>20</b> Interest .....	460,339.	437,339.	11,500.	11,500.
<b>21</b> Payments to affiliates .....				
<b>22</b> Depreciation, depletion, and amortization .....	961,069.	914,887.	23,091.	23,091.
<b>23</b> Insurance .....	208,265.	241,473.	-39,656.	6,448.
<b>24</b> 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.)				
<b>a</b> MISCELLANEOUS	380,875.	223,308.	129,899.	27,668.
<b>b</b> HOUSING	314,632.	314,632.		
<b>c</b> PRODUCTION MATERIALS	153,401.	153,401.		
<b>d</b> CREDIT CARD FEES	149,584.	95,981.	32,021.	21,582.
<b>e</b> All other expenses _____				
<b>25</b> Total functional expenses. Add lines 1 through 24e	9,667,721.	6,731,298.	2,013,328.	923,095.
<b>26</b> Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here  if following SOP 98-2 (ASC 958-720)

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	29,708,980.	<b>1</b>	25,755,129.
	<b>2</b> Savings and temporary cash investments .....	67,305.	<b>2</b>	254,974.
	<b>3</b> Pledges and grants receivable, net .....	4,962,511.	<b>3</b>	5,936,065.
	<b>4</b> Accounts receivable, net .....	75,145.	<b>4</b>	439,603.
	<b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....	94,054.	<b>9</b>	530,566.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 58,203,448.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 18,744,636.		
	<b>11</b> Investments - publicly traded securities .....	5,336,025.	<b>11</b>	5,848,958.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....		<b>12</b>	
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....	75,823.	<b>15</b>	60,026.
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	72,417,342.	<b>16</b>	78,284,133.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	671,928.	<b>17</b>	2,522,906.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....	1,959,680.	<b>19</b>	3,597,284.
	<b>20</b> Tax-exempt bond liabilities .....	32,779,334.	<b>20</b>	32,395,578.
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....	12,753,361.	<b>23</b>	13,095,005.
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>	
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....	123,212.	<b>25</b>	150,740.
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	48,287,515.	<b>26</b>	51,761,513.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	14,170,765.	<b>27</b>	15,000,453.
	<b>28</b> Net assets with donor restrictions .....	9,959,062.	<b>28</b>	11,522,167.
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
	<b>32</b> Total net assets or fund balances .....	24,129,827.	<b>32</b>	26,522,620.
<b>33</b> Total liabilities and net assets/fund balances .....	72,417,342.	<b>33</b>	78,284,133.	

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	11,370,014.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	9,667,721.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	1,702,293.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	24,129,827.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	690,163.
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain on Schedule O)	<b>9</b>	337.
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	<b>10</b>	26,522,620.

**Part XII Financial Statements and Reporting**

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

- 1** Accounting method used to prepare the Form 990:  Cash  Accrual  Other \_\_\_\_\_  
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant? .....  
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant? .....  
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? .....  
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? .....
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits .....

	Yes	No
<b>2a</b>		X
<b>2b</b>	X	
<b>2c</b>	X	
<b>3a</b>		X
<b>3b</b>		

Form 990 (2020)



**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**

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	6,942,336.	7,387,418.	7,787,435.	6,578,220.	10,720,565.	39,415,974.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....	6,942,336.	7,387,418.	7,787,435.	6,578,220.	10,720,565.	39,415,974.
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) .....						2,999,084.
<b>6 Public support.</b> Subtract line 5 from line 4.						36,416,890.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>7</b> Amounts from line 4 .....	6,942,336.	7,387,418.	7,787,435.	6,578,220.	10,720,565.	39,415,974.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....	263,242.	191,516.	173,606.	420,952.	122,122.	1,171,438.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....	315,699.	310,023.	354,432.	5,939.	154.	986,247.
<b>11 Total support.</b> Add lines 7 through 10						41,573,659.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	45,395,516.
<b>13 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

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

<b>14</b> Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f)) .....	<b>14</b>	87.60 %
<b>15</b> Public support percentage from 2019 Schedule A, Part II, line 14 .....	<b>15</b>	84.89 %
<b>16a 33 1/3% support test - 2020.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input checked="" type="checkbox"/>
<b>b 33 1/3% support test - 2019.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>17a 10% -facts-and-circumstances test - 2020.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>b 10% -facts-and-circumstances test - 2019.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....		<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....		<input type="checkbox"/>

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

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

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

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

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

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

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

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

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



**Part IV Supporting Organizations**

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

**Part IV Supporting Organizations** (continued)

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

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
<b>2</b> Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

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

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

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

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

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

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

Section 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	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	8	

Section 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):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> 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	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

Section 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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Schedule A (Form 990 or 990-EZ) 2020

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

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

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

Schedule A (Form 990 or 990-EZ) 2020



# Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury  
Internal Revenue Service

# Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

# 2020

Name of the organization

BERKELEY REPERTORY THEATRE

Employer identification number

94-1679756

Organization type (check one):

**Filers of:**

**Section:**

Form 990 or 990-EZ

501(c)( 3 ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... ▶ \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization  BERKELEY REPERTORY THEATRE	Employer identification number  94-1679756
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	_____ _____ _____	\$ 1,002,100.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	_____ _____ _____	\$ 1,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
3	_____ _____ _____	\$ 1,002,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	_____ _____ _____	\$ 225,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	_____ _____ _____	\$ 610,600.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	_____ _____ _____	\$ 375,162.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  BERKELEY REPERTORY THEATRE	Employer identification number  94-1679756
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	<hr/> <hr/> <hr/>	\$ 2,159,151.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	<hr/> <hr/> <hr/>	\$ 1,267,388.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization  BERKELEY REPERTORY THEATRE	Employer identification number  94-1679756
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**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
2	62 SHARES OF CHARTER COMMUNICATIONS INC (CHTR), 40 SHARES OF ALPHABET (GOOG), & 241 SHARES OF MICROSOFT (MSFT)	\$ 196,689.	08/31/21
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____

Name of organization  BERKELEY REPERTORY THEATRE	Employer identification number  94-1679756
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**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

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

OMB No. 1545-0047

**2020**

**Open to Public Inspection**

**Name of the organization** BERKELEY REPERTORY THEATRE **Employer identification number** 94-1679756

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....		
2 Aggregate value of contributions to (during year) .....		
3 Aggregate value of grants from (during year) .....		
4 Aggregate value at end of year .....		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).  
 Preservation of land for public use (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

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

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

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? .....

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

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....

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

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

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

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

(i) Revenue included on Form 990, Part VIII, line 1 .....

(ii) Assets included in Form 990, Part X .....

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

a Revenue included on Form 990, Part VIII, line 1 .....

b Assets included in Form 990, Part X .....

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2020

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

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

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	4,786,529.	4,457,274.	4,977,979.	4,810,546.	4,341,982.
b Contributions	38,568.	50,572.	109,750.	100.	2,400.
c Net investment earnings, gains, and losses	822,788.	354,047.	8,147.	218,326.	490,563.
d Grants or scholarships					
e Other expenditures for facilities and programs	27,355.	75,364.	638,602.	50,993.	24,399.
f Administrative expenses					
g End of year balance	5,620,530.	4,786,529.	4,457,274.	4,977,979.	4,810,546.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment  28.5100 %
  - b Permanent endowment  60.4300 %
  - c Term endowment  11.0600 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |   | Yes | No |
|---|-----|----|
| (i) Unrelated organizations   |     | X  |
| (ii) Related organizations  |     | X  |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | 3b  |    |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

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

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		2,802,299.		2,802,299.
b Buildings		37,830,764.	15,562,024.	22,268,740.
c Leasehold improvements				
d Equipment		3,511,232.	2,764,755.	746,477.
e Other		14,059,153.	417,857.	13,641,296.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				39,458,812.

**Part VII Investments - Other Securities.**

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

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

**Part VIII Investments - Program Related.**

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

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

**Part IX Other Assets.**

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

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

**Part X Other Liabilities.**

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) EXECUTIVE RETIREMENT PLAN	150,740.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	150,740.

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

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

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements	<b>1</b>	12,282,237.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
<b>a</b>	Net unrealized gains (losses) on investments	<b>2a</b>	690,163.
<b>b</b>	Donated services and use of facilities	<b>2b</b>	4,673.
<b>c</b>	Recoveries of prior year grants	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	247,531.
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	942,367.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	11,339,870.
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	30,144.
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	30,144.
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)	<b>5</b>	11,370,014.

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

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

<b>1</b>	Total expenses and losses per audited financial statements	<b>1</b>	9,889,444.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
<b>a</b>	Donated services and use of facilities	<b>2a</b>	4,673.
<b>b</b>	Prior year adjustments	<b>2b</b>	
<b>c</b>	Other losses	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	247,194.
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	251,867.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	9,637,577.
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	30,144.
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	30,144.
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)	<b>5</b>	9,667,721.

**Part XIII Supplemental Information.**

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

PART V, LINE 4:

THE PURPOSE OF THE ENDOWMENT FUNDS IS TO FURTHER THE CHARITABLE AND EDUCATIONAL PURPOSES OF BERKELEY REPERTORY THEATRE BY PROVIDING GENERAL SUPPORT IN MEETING THE OPERATING AND PROGRAM NEEDS OF BERKELEY REPERTORY THEATRE, AS DETERMINED BY BERKELEY REPERTORY THEATRE'S BOARD OF TRUSTEES. A DONOR MAKING A CONTRIBUTION TO THE ENDOWMENT FUND MAY IMPOSE SPECIFIC USE RESTRICTIONS (A "RESTRICTED PURPOSE") ON THE DONOR'S CONTRIBUTION, PROVIDED THAT ANY SUCH RESTRICTION MUST BE CLEARLY STATED IN THE DONOR'S GIFT INSTRUMENT. IF AT ANY TIME IN THE JUDGMENT OF THE BOARD OF TRUSTEES IT IS IMPOSSIBLE OR IMPRACTICABLE TO CARRY OUT EXACTLY THE RESTRICTED PURPOSE IN THE MANNER REQUESTED BY THE DONOR, A PURPOSE AND MANNER AS NEAR AS IS PRACTICABLE TO THE RESTRICTED PURPOSE SHALL BE DETERMINED BY THE

**Part XIII** Supplemental Information (continued)

BOARD OF TRUSTEES.

PART X, LINE 2:

THE THEATRE IS A QUALIFIED ORGANIZATION EXEMPT FROM FEDERAL INCOME AND CALIFORNIA FRANCHISE TAXES UNDER THE PROVISIONS OF SECTIONS 501(C)(3) OF THE INTERNAL REVENUE CODE AND 23701(D) OF THE CALIFORNIA REVENUE AND TAXATION CODE, RESPECTIVELY.

THE THEATRE EVALUATES ITS TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN TO DETERMINE WHETHER THE TAX POSITIONS ARE "MORE-LIKELY-THAN-NOT" OF BEING SUSTAINED BY THE APPLICABLE TAX AUTHORITY. TAX POSITIONS NOT DEEMED TO MEET THE "MORE-LIKELY-THAN-NOT" THRESHOLD ARE RECORDED AS AN EXPENSE IN THE APPLICABLE YEAR. AS OF AUGUST 31, 2021, THE THEATRE DOES NOT HAVE ANY SIGNIFICANT UNCERTAIN TAX POSITIONS FOR WHICH A RESERVE WOULD BE NECESSARY. THE THEATRE FILES UNITED STATES OF AMERICA ("U.S.") FEDERAL, AND U.S. STATE TAX RETURNS. FOR U.S. STATE TAX RETURNS, THE THEATRE IS GENERALLY NO LONGER SUBJECT TO TAX EXAMINATIONS FOR YEARS PRIOR TO 2015. FOR U.S. FEDERAL TAX RETURNS, THE THEATRE IS NO LONGER SUBJECT TO TAX EXAMINATION FOR YEARS PRIOR TO 2016.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

RENTAL EXPENSES 247,531.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

RENTAL EXPENSES 247,194.

**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees  
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.  
 ▶ Attach to Form 990.  
 ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2020**

Open to Public Inspection

Name of the organization

BERKELEY REPERTORY THEATRE

Employer identification number

94-1679756

**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |  |  |
|--|--|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use   |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence   |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees     |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

**b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain .....

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? .....

**3** Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee          | <input checked="" type="checkbox"/> Written employment contract                     |
| <input type="checkbox"/> Independent compensation consultant        | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment? .....
- b** Participate in or receive payment from a supplemental nonqualified retirement plan? .....
- c** Participate in or receive payment from an equity-based compensation arrangement? .....
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**

**5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? .....
- b** Any related organization? .....
- If "Yes" on line 5a or 5b, describe in Part III.

**6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization? .....
- b** Any related organization? .....
- If "Yes" on line 6a or 6b, describe in Part III.

**7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III .....

**8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III .....

**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .....

	Yes	No
<b>1b</b>		
<b>2</b>		
<b>4a</b>	X	
<b>4b</b>	X	
<b>4c</b>		X
<b>5a</b>		X
<b>5b</b>		X
<b>6a</b>		X
<b>6b</b>		X
<b>7</b>		X
<b>8</b>		X
<b>9</b>		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2020



**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

**Note:** The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) ANTHONY TACCONE FORMER ARTISTIC DIRECTOR	(i)	0.	0.	383,475.	0.	0.	383,475.	383,475.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) JOHANNA PFAELZER ARTISTIC DIRECTOR	(i)	281,646.	0.	0.	0.	15,902.	297,548.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) SUSAN MEDAK MANAGING DIRECTOR	(i)	285,107.	0.	0.	0.	8,812.	293,919.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) AMY POTOZKIN CASTING DIRECTOR	(i)	82,929.	0.	91,496.	0.	7,144.	181,569.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) THERESA VON KLUG GENERAL MANAGER	(i)	148,954.	0.	0.	0.	23,906.	172,860.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) LYNN EVE KOMAROMI DIRECTOR OF DEVELOPMENT	(i)	151,142.	0.	0.	0.	17,960.	169,102.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) STEVE TATE DIRECTOR OF MARKETING	(i)	125,589.	0.	16,045.	0.	13,516.	155,150.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**Part III Supplemental Information**

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

PART I, LINES 4A-B:

AMY POTOZKIN, CASTING DIRECTOR, RECEIVED SEVERANCE PAY OF \$91,496.

OF THE \$383,475 THAT ANTHONY TACCONE, FORMER ARTISTIC DIRECTOR, RECEIVED IN

DEFERRED COMPENSATION, \$279,532 WAS FOR HIS 457(F) PLAN.

**Supplemental Information on Tax-Exempt Bonds**

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.**  
▶ **Attach to Form 990.** ▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

Name of the organization **BERKELEY REPERTORY THEATRE** Employer identification number **94-1679756**

<b>Part I Bond Issues</b>											
(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
						Yes	No	Yes	No	Yes	No
<b>A</b> CALIFORNIA ENTERPRISE DEVELOPMENT AUTHORITY	35-2273601	NONE	03/22/19	32,910,239.	CONSTRUCTION/CAPITAL PROJECTS		X		X		X
<b>B</b>											
<b>C</b>											
<b>D</b>											

<b>Part II Proceeds</b>										
	A		B		C		D			
<b>1</b> Amount of bonds retired .....	262,382.									
<b>2</b> Amount of bonds legally defeased .....										
<b>3</b> Total proceeds of issue .....	33,683,991.									
<b>4</b> Gross proceeds in reserve funds .....										
<b>5</b> Capitalized interest from proceeds .....	326,749.									
<b>6</b> Proceeds in refunding escrows .....										
<b>7</b> Issuance costs from proceeds .....	481,627.									
<b>8</b> Credit enhancement from proceeds .....										
<b>9</b> Working capital expenditures from proceeds .....										
<b>10</b> Capital expenditures from proceeds .....										
<b>11</b> Other spent proceeds .....	5,520,896.									
<b>12</b> Other unspent proceeds .....	26,907,716.									
<b>13</b> Year of substantial completion .....	2021									
	Yes	No	Yes	No	Yes	No	Yes	No		
<b>14</b> Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)? .....		X								
<b>15</b> Were the bonds issued as part of a refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)? .....		X								
<b>16</b> Has the final allocation of proceeds been made? .....	X									
<b>17</b> Does the organization maintain adequate books and records to support the final allocation of proceeds? .....	X									

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule K (Form 990) 2020

**Part III Private Business Use**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
<b>1</b> Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds? .....		X						
<b>2</b> Are there any lease arrangements that may result in private business use of bond-financed property? .....		X						
<b>3a</b> Are there any management or service contracts that may result in private business use of bond-financed property? .....		X						
<b>b</b> If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
<b>c</b> Are there any research agreements that may result in private business use of bond-financed property? .....		X						
<b>d</b> If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? ...								
<b>4</b> Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government .....		%		%		%		%
<b>5</b> Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government .....		%		%		%		%
<b>6</b> Total of lines 4 and 5 .....		%		%		%		%
<b>7</b> Does the bond issue meet the private security or payment test? .....		X						
<b>8a</b> Has there been a sale or disposition of any of the bond-financed property to a non-governmental person other than a 501(c)(3) organization since the bonds were issued?		X						
<b>b</b> If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of .....		%		%		%		%
<b>c</b> If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2? .....								
<b>9</b> Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2? .....		X						

**Part IV Arbitrage**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
<b>1</b> Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate? .....		X						
<b>2</b> If "No" to line 1, did the following apply?								
<b>a</b> Rebate not due yet? .....	X							
<b>b</b> Exception to rebate? .....		X						
<b>c</b> No rebate due? .....		X						
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed .....								
<b>3</b> Is the bond issue a variable rate issue? .....		X						

**Part IV Arbitrage** (continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
<b>4a</b> Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue? .....		X						
<b>b</b> Name of provider .....								
<b>c</b> Term of hedge .....								
<b>d</b> Was the hedge superintegrated? .....								
<b>e</b> Was the hedge terminated? .....								
<b>5a</b> Were gross proceeds invested in a guaranteed investment contract (GIC)? .....		X						
<b>b</b> Name of provider .....								
<b>c</b> Term of GIC .....								
<b>d</b> Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? .....								
<b>6</b> Were any gross proceeds invested beyond an available temporary period? .....		X						
<b>7</b> Has the organization established written procedures to monitor the requirements of section 148? .....		X						

**Part V Procedures To Undertake Corrective Action**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation isn't available under applicable regulations? .....		X						

**Part VI Supplemental Information.** Provide additional information for responses to questions on Schedule K. See instructions.

SCHEDULE K, PART II, LINE 3:

TOTAL PROCEEDS OF ISSUE INCLUDES \$773,752 OF CUMULATIVE INTEREST EARNED ON PROCEEDS HELD IN AN INTEREST-BEARING ACCOUNT.

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2020**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

Name of the organization **BERKELEY REPERTORY THEATRE** Employer identification number **94-1679756**

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art .....	X	1	3,000.	FMV
2 Art - Historical treasures .....				
3 Art - Fractional interests .....				
4 Books and publications .....				
5 Clothing and household goods .....	X		28,560.	FMV
6 Cars and other vehicles .....				
7 Boats and planes .....				
8 Intellectual property .....				
9 Securities - Publicly traded .....	X	10	271,934.	FMV
10 Securities - Closely held stock .....				
11 Securities - Partnership, LLC, or trust interests .....				
12 Securities - Miscellaneous .....				
13 Qualified conservation contribution - Historic structures .....				
14 Qualified conservation contribution - Other .....				
15 Real estate - Residential .....				
16 Real estate - Commercial .....				
17 Real estate - Other .....				
18 Collectibles .....				
19 Food inventory .....	X	3	7,707.	FMV
20 Drugs and medical supplies .....				
21 Taxidermy .....				
22 Historical artifacts .....				
23 Scientific specimens .....				
24 Archeological artifacts .....				
25 Other ▶ ( SOUND SPEAKER )	X	1	10,000.	FMV
26 Other ▶ ( )				
27 Other ▶ ( )				
28 Other ▶ ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement ..... **29** 0

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2020

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

SCHEDULE M, PART I, COLUMN (B):

THIS NUMBER REPRESENTS THE NUMBER OF CONTRIBUTIONS, NOT THE NUMBER OF ITEMS CONTRIBUTED.

SCHEDULE M, LINE 32B:

CARS DONATED TO BERKELEY REPERTORY THEATRE ARE SOLD BY CHARITABLE AUTO RESOURCES, INC. FOR A FEE. NET PROCEEDS ARE RECEIVED BY BERKELEY REPERTORY THEATRE.

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

Department of the Treasury  
Internal Revenue Service

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

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

**2020**

Open to Public  
Inspection

Name of the organization

BERKELEY REPERTORY THEATRE

Employer identification number

94-1679756

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

THEATRE PROGRAMMING, AND WE SERVED NEARLY 100 ARTISTS THROUGH

COMMISSIONS, A HYBRID SUMMER RESIDENCY LAB, AND OPPORTUNITIES FOR

EMPLOYMENT.

IN 2020/21, BERKELEY REP OFFERED AUDIENCES A SUITE OF ONLINE ARTS

EXPERIENCES DUBBED REP ON-AIR THAT INCLUDED A COMBINATION OF ON-DEMAND

ORIGINAL AUDIO AND VIDEO WORKS PRODUCED IN-HOUSE BY BERKELEY REP;

WHAT'S IN A PLAY?, A BOOK GROUP FOR PLAYS OFFERED VIA ZOOM; AS WELL AS

STREAMED VIDEO PERFORMANCES FROM SOME OF THE THEATRE'S LONGTIME

COLLABORATORS. OUR GOALS WITH THESE PROGRAMS WERE TO PROVIDE AUDIENCES

WITH OPPORTUNITIES TO ENGAGE WITH ART FROM HOME AND BRIDGE THE

ISOLATION OF SHELTERING IN PLACE, AND TO SUPPLEMENT INCOME FOR ARTISTS,

THE VAST MAJORITY OF WHOM LOST SOME IF NOT ALL OF THEIR INCOME DURING

THE PANDEMIC.

IN FALL 2020, WE WERE THRILLED TO PRODUCE A NEW AUDIO VERSION OF TONY

TACCONE AND BENNET S. COHEN'S ADAPTATION OF THE SINCLAIR LEWIS NOVEL IT

CAN'T HAPPEN HERE, WHICH APPEARED AS A STAGE PRODUCTION IN OUR 2016/17

SEASON. IT CAN'T HAPPEN HERE WAS THE FIRST VIRTUAL SHOW BERKELEY REP

DEVELOPED IN-HOUSE AFTER THE COVID-19 SHELTER-IN-PLACE ORDER WENT INTO

EFFECT IN MARCH 2020. RELEASED TO COINCIDE WITH THE 2020 PRESIDENTIAL

ELECTION, THE FREE-TO-STREAM RADIO PLAY WAS BOTH AN OPPORTUNITY TO

BRING AN IMPORTANT STORY TO AUDIENCES AND A MEANS TO ENCOURAGE DIALOGUE

AND MOTIVATE CITIZENS TO EXERCISE THEIR CIVIC DUTY AND VOTE. WE JOINED

WITH OVER 100 BROADCAST PARTNERS ACROSS THE UNITED STATES INCLUDING

THEATRES, UNIVERSITIES, COMMUNITY GROUPS, AND MORE TO SHARE OUR

PRODUCTION WITH THEIR CONSTITUENCIES AND OUR STUDY GUIDE WITH STUDENTS.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) 2020

032211 11-20-20



Name of the organization BERKELEY REPERTORY THEATRE	Employer identification number 94-1679756
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IN THE FALL, REP ON-AIR ALSO FEATURED THE PRESENTATION OF STREAMED PERFORMANCES FROM THREE BERKELEY REP FAVORITES: DIRECTOR EMMA RICE SHARED HER SWEET AND WHIMSICAL ROMANTICS ANONYMOUS; SOLO PERFORMER HERSHEY FELDER BROUGHT US GERSHWIN ALONE AND A PARIS LOVE STORY FEATURING THE MUSIC OF CLAUDE DEBUSSY; AND FOR THE HOLIDAYS, DIRECTOR MARY ZIMMERMAN'S WISTFUL THE STEADFAST TIN SOLDIER INDUCED POWERFUL LONGING FOR THE RETURN TO LIVE THEATRE.

FOR OUR FIRST REP ON-AIR OFFERING OF 2021, PLACE/SETTINGS: BERKELEY, WE COMMISSIONED 10 WELL-KNOWN WRITERS WITH DEEP TIES TO BERKELEY TO WRITE ABOUT A BERKELEY LOCATION MEANINGFUL OR MEMORABLE TO THEM. WE RELEASED THE STORIES IN A WEEKLY PODCAST AND TICKETHOLDERS RECEIVED AN ILLUSTRATED MAP THAT INVITED LOCAL LISTENERS TO SAFELY VENTURE OUT INTO THE CITY TO EXPERIENCE THE STORIES ON-LOCATION. PLACE/SETTINGS: BERKELEY GARNERED OVER 11,000 LISTENS ACROSS ITS 10 EPISODES.

IN APRIL, WE LAUNCHED THE WAVES IN QUARANTINE, A SIX MOVEMENT VIDEO EXPLORATION OF LISA PETERSON AND DAVID BUCKNAM'S MUSICAL ADAPTATION OF VIRGINIA WOOLF'S THE WAVES. THE PIECE FEATURED A TALENTED CAST, INCLUDING FOUR-TIME TONY AWARD NOMINEE RAL ESPARZA (WHO CO-CONCEIVED THE PROJECT WITH LISA PETERSON). WITH THE (ONLINE) HELP OF BERKELEY REP'S ARTISTIC AND PRODUCTION TEAMS, THE CAST FILMED AND RECORDED THEIR OWN FOOTAGE AND AUDIO FROM THEIR VARIOUS HOMES AND LOCALES. THE WAVES IN QUARANTINE RECEIVED OVER 17,000 VIEWS ACROSS ITS SIX VIDEO MOVEMENTS, AND MANY INTERNATIONAL VIEWERS REGISTERED TO RECEIVE ACCESS TO THE SHOW.

WITH WHAT'S IN A PLAY?, BERKELEY REP'S ARTISTIC STAFF OFFERED FREE MODERATED DISCUSSIONS THROUGHOUT THE YEAR ABOUT PLAYS REPRESENTING A WIDE RANGE OF FORMS AND CONTENT. PARTICIPANTS OF A WIDE VARIETY OF BACKGROUNDS TUNED IN FROM ALL OVER THE BAY AREA, AS WELL AS FROM

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AUSTRALIA, FRANCE, THE UK, BROOKLYN, AND KENTUCKY, AND MANY NEW FRIENDSHIPS WERE FORMED. IN 154 SESSIONS DURING THE 2020/21 SEASON, TOTAL ATTENDANCE NUMBERS FOR WHAT'S IN A PLAY? REACHED OVER 2,500 WITH MANY REPEAT ATTENDEES FROM OVER 400 HOUSEHOLDS.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:  
 ZOOM BY BERKELEY REP'S EXPERIENCED TEACHING ARTISTS. SURVEYS CONDUCTED DURING THE WORKSHOP PERIODS HELPED TEACHING ARTIST ADAPT TO THE NEEDS OF A NEW TEACHING ENVIRONMENT AND UNDERSTAND THE CHALLENGES STUDENTS WERE FACING, SUCH AS TECHNOLOGY AND INTERNET CONNECTION ISSUES, CHILDCARE RESPONSIBILITIES, SHARING LEARNING SPACES WITH SIBLINGS, AND DEALING WITH THE SOCIAL/EMOTIONAL IMPACTS AND PRIVACY CONCERNS OF PEERS AND TEACHERS SEEING INTO THEIR HOMES.  
 IN ADDITION TO SUPPORTING STUDENT LEARNING, THE MULTI-WEEK NATURE OF OUR IN-CLASS WORKSHOPS ALSO WAS INSTRUMENTAL IN HELPING SUPPORT BAY AREA TEACHING ARTISTS. WITH THE SCARCITY OF WORK FOR ARTISTS DURING THIS PERIOD, MANY TEACHING ARTISTS WERE RETICENT TO JEOPARDIZE VITAL UNEMPLOYMENT BENEFITS BY ACCEPTING SHORT ONE-OFF PROJECTS. WITH THE HELP OF GOVERNMENT AND PRIVATE FOUNDATION FUNDING, BERKELEY REP WAS ABLE TO PROVIDE GUARANTEED LONG-TERM EMPLOYMENT THROUGH MULTI-WEEK WORKSHOP COMMITMENTS THAT SERVED AS AN ANCHOR AROUND WHICH TEACHING ARTISTS COULD BUILD OTHER EMPLOYMENT OPPORTUNITIES.  
 BERKELEY REP TYPICALLY OFFERS AT LEAST FIVE STUDENT MATINEE PERFORMANCES EACH SEASON FOR MIDDLE AND HIGH SCHOOL STUDENTS. WITH NO IN-PERSON PRODUCTIONS IN 2020/21, THE SCHOOL OF THEATRE EXPLORED CREATIVE WAYS TO OFFER A VIRTUAL STUDENT MATINEE EXPERIENCE. IN THE FALL, SCHOOL OF THEATRE STAFF WELCOMED THE OPPORTUNITY TO EXPERIMENT WITH A VIRTUAL STUDENT MATINEE FOR A HIGH SCHOOL CLASS IN OAKLAND.

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USING THE STUDY-GUIDE THE THEATRE CREATED FOR OUR 2018 PRODUCTION OF HEIDI SCHRECK'S WHAT THE CONSTITUTION MEANS TO ME, STAFF PARTNERED WITH THE TEACHER TO DEVELOP A CURRICULUM ABOUT THE SHOW FOR HER STUDENTS, WHO WATCHED THE BROADWAY PRODUCTION ON AMAZON PRIME. OUR EXPERIENCE MAY PROVIDE A MODEL FOR THE THEATRE TO USE TECHNOLOGY IN FUTURE TO EXTEND OUR REACH INTO SCHOOLS THROUGHOUT NORTHERN CALIFORNIA WITHOUT EASY ACCESS TO HIGH-QUALITY ARTS EDUCATION PROGRAMMING AND TO ACCOMMODATE SCHOOLS UNABLE TO SCHEDULE FIELD TRIPS DUE TO ONGOING COVID-19 SAFETY PROTOCOLS.

BERKELEY REP'S TEEN CORE COUNCIL, A GROUP OF STUDENT LEADERS FROM AROUND THE BAY AREA, EXPERIMENTED WITH NEW WAYS TO CONNECT THEIR PEERS TO ARTS EXPERIENCES ONLINE: ACTIVITIES INCLUDED AN ONLINE TEEN NIGHT, ARTIST INTERVIEWS ON SOCIAL MEDIA, AND PILOTING A THREE-EPIISODE PODCAST SERIES. IN PLACE OF THE ANNUAL TEEN ONE-ACTS FESTIVAL, THE CULMINATING TEEN COUNCIL EVENT WAS A 72-HOUR FILM FESTIVAL. AS WITH MOST OF OUR PROGRAMMING, PARTICIPATION AMONGST OUR TEEN POPULATIONS WAS LOWER THAN IN PRE-PANDEMIC YEARS. WE RECOGNIZE THAT IT WAS A LOT TO ASK EVEN OUR MOST COMMITTED TEENS TO SPEND THEIR FREE TIME DOING ONLINE ACTIVITIES WHEN THEY WERE AVERAGING A MINIMUM OF SIX HOURS ONLINE FOR SCHOOL EVERY DAY. BECAUSE OF THIS, WE ANTICIPATE CHALLENGES IN THE COMING SEASON AS WE WORK TO BUILD STRONG RELATIONSHIPS WITH TEEN COUNCIL MEMBERS, MANY OF WHOM MISSED A FULL YEAR OF PROGRAMMING WITH US. AS WE MONITOR AN EVER-CHANGING PUBLIC HEALTH SITUATION AND RESPOND TO FAMILIES' VARYING COMFORT LEVELS WITH IN-PERSON PROGRAMMING, WE LOOK FORWARD TO EASING BACK INTO OUR USUAL SLATE OF TEEN PROGRAMMING AS THE THEATRE RETURNS TO IN-PERSON EVENTS IN 2021/22.

AFTER HAVING PAUSED THE PROGRAM IN SPRING 2020, BERKELEY REP OPENED

APPLICATIONS IN SUMMER 2021 FOR OUR PRESTIGIOUS NEXT GENERATION

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FELLOWSHIP PROGRAM FOR COLLEGE GRADUATES CONSIDERING A CAREER IN THE ARTS. STAFF USED THE PERIOD WHILE THE PROGRAM WAS DORMANT TO CREATE POLICIES AND PROCEDURES TO ALLOW US TO REINSTATE IT SAFELY AND INCLUDE ALL THE LEARNING AND MENTORSHIP OPPORTUNITIES THAT ARE CENTRAL TO BERKELEY REP'S FELLOWSHIP EXPERIENCE. AS PART OF BERKELEY REP'S RECRUITMENT EFFORTS FOR THE FELLOWSHIP PROGRAM, BEGINNING IN MAY 2021 THE SCHOOL HOSTED A THREE-SESSION ONLINE BIPOC PLAY READING SERIES FOR EMERGING BIPOC THEATRE MAKERS, ADMINISTRATORS, AND TECHNICIANS. TO ASSIST PROSPECTIVE FELLOWSHIP APPLICANTS, BERKELEY REP ALSO HOSTED AN ONLINE INFORMATION SESSION IN JULY. MORE THAN 50 INTERESTED CANDIDATES PARTICIPATED LIVE (MANY MORE WATCHED THE ON-DEMAND RECORDING), AS MEMBERS OF BERKELEY REP'S STAFF AND TWO FORMER FELLOWS SHARED APPLICATION TIPS, INSIGHTS ABOUT LIFE AS A FELLOW, AND THOUGHTS ABOUT FUTURE JOB OPPORTUNITIES AS THEATRES NATIONWIDE BEGIN TO REOPEN.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

EXISTENTIAL CHALLENGES OF THE PANDEMIC, AND THAT WHEN WE DID, THERE WOULD BE VIBRANT, VITAL STORIES AWAITING US.

IN AUGUST 2021, WE HOSTED A SCALED-DOWN VERSION OF OUR GROUND FLOOR SUMMER LAB, WHICH IN PRE-PANDEMIC YEARS GATHERS AS MANY AS 100 ARTISTS AT OUR WEST BERKELEY CAMPUS EACH SUMMER TO WORK ON 12-22 PROJECTS. FOR THE 2021 SUMMER LAB, WE REALIZED THAT THE MOST SIGNIFICANT IMPACT THE PROGRAM COULD MAKE IN THE CURRENT ENVIRONMENT WAS TO SUPPORT OUR LOCAL ARTS COMMUNITY, SO WE HOSTED AN ALL-LOCAL SUMMER LAB, INVITING 27 LOCAL ARTISTS TO WORK ON 12 PROJECTS. THE ARTISTS' PALPABLE RELIEF WHEN THEY ENTERED OUR BUILDING AND SAW OTHER ARTISTS WITH WHOM TO WORK AFTER A YEAR OF ISOLATION WAS AS MOVING AS IT WAS MOMENTOUS IT REMINDED US OF THE IMPORTANT ROLE BERKELEY REP PLAYS IN THE CREATION AND DEVELOPMENT

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OF NEW THEATRICAL WORK. THE GENEROUS ARTIST-TO-ARTIST COLLABORATION  
ACROSS PROJECTS WAS MORE STRIKING THIS YEAR THAN EVER BEFORE, AS  
ARTISTS SERVED AS EACH OTHER'S ACTORS WHEN NEEDED, AS WELL AS AUDIENCE  
MEMBERS AND RESPONDENTS.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

THE 2009 ADDISON STREET WORKFORCE HOUSING PROJECT IN DOWNTOWN BERKELEY  
THAT WILL CONTAIN 45 APARTMENT UNITS AND TWO NEW SCHOOL OF THEATRE  
SPACES IS CURRENTLY ON SCHEDULE WITH AN EXPECTED COMPLETION DATE IN  
AUGUST 2022. AFTER A PAUSE IN WORK DUE TO COVID-19, CONSTRUCTION  
RESUMED ON THE PROJECT IN DECEMBER 2020. WHILE THERE HAVE BEEN SOME  
ISSUES WITH BUILDING MATERIAL PROCUREMENT THIS YEAR, OUR GENERAL  
CONTRACTOR HAS BEEN ABLE TO KEEP SUPPLIES AND BUILDING MATERIALS  
ARRIVING ON TIME.  
IN ADDITION TO THE 45 APARTMENT UNITS FOR VISITING ARTIST AND FELLOW  
HOUSING, THE BUILDING WILL HOUSE A LARGE STUDIO PERFORMANCE SPACE THAT  
WILL PROVIDE THE SCHOOL OF THEATRE WITH A DEDICATED PERFORMANCE VENUE  
FOR STUDENT WORK. THE SPACE ALSO WILL SERVE AS A NEW HOME FOR THE  
GROUND FLOOR TO SHOWCASE READINGS, WORKSHOP PRESENTATIONS, AND OTHER  
EARLY-STAGE WORK THAT WOULD BENEFIT FROM EXPOSURE TO AN AUDIENCE.  
BERKELEY REP USED THIS PERIOD WHILE THE COVID-19 PANDEMIC INTERRUPTED  
OUR REGULAR OPERATIONS TO LAUNCH 5-YEAR STRATEGIC INITIATIVES FOCUSED  
ON ARTISTIC PROGRAMMING, AUDIENCE DEVELOPMENT, ANTIRACISM AND  
INCLUSION, ARTS EDUCATION, COMMUNITY DIALOGUE, ORGANIZATION  
INFRASTRUCTURE, AND CLIMATE CHANGE. IN 2020/21, TRUSTEES AND STAFF  
WORKED CLOSELY TO CRAFT A VISION FOR HOW THESE FOCUS AREAS WILL INFORM  
THE THEATRE'S INTERNAL AND EXTERNAL OPERATIONS OVER THE NEXT FIVE  
YEARS. WHILE A FEW INITIATIVES ARE STILL IN AN IDEATION STAGE, WE HAVE

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BEGUN TO TAKE ACTION ON SEVERAL RECOMMENDATIONS MADE BY THE TASK FORCES.

WITH ADMINISTRATION AND ARTISTIC STAFF PRIMARILY WORKING REMOTELY OVER THE LAST 19 MONTHS, ONE MAJOR AREA WAS UPDATING TECHNOLOGY TO STREAMLINE THE ORGANIZATION'S INFORMATION FLOW AND COMMUNICATIONS TOOLS. UPGRADES HAVE INCLUDED TRANSITIONING TO A NEW ACCOUNTING SOFTWARE, CONSOLIDATING COMMUNICATIONS ONTO MICROSOFT TEAMS, SWITCHING TO A NEW PHONE SYSTEM, AND MIGRATING OUR SERVER FILES TO CLOUD-BASED DATA STORAGE SOLUTIONS. INFRASTRUCTURE UPGRADES HAVE THE TWIN BENEFIT OF IMPROVING THE ORGANIZATION'S OPERATIONS AND HELPING ADVANCE THE THEATRE'S CLIMATE INITIATIVES. SINCE 2007, BERKELEY REP HAS MADE A CONSCIOUS COMMITMENT TO ENERGY RESPONSIBILITY. IN 2020/21, WITH WILDFIRES AND OTHER CLIMATE-RELATED DISASTERS IMPACTING OUR COMMUNITIES AND UNDERSCORING THE URGENCY FOR ACTION, BERKELEY REP REAFFIRMED OUR RESPONSIBILITY TO CONTRIBUTE TO THE WELL-BEING OF OUR PLANET AND WE BEGAN OUTLINING A PATH TOWARD CARBON NEUTRALITY. EFFORTS HAVE INCLUDED OUR SHIFTING TO LED LIGHTING IN OUR REHEARSAL HALLS AND IN THE NEVO EDUCATION CENTER; WE HOPE SOON TO TRANSITION OUR THEATRICAL STAGE LIGHTS TO LEDS. THE PANDEMIC HAS REDUCED OUR DEPENDENCE ON IN-PERSON MEETINGS, THEREBY DECREASING THE NEED FOR TRAVEL AND LOWERING OUR GREENHOUSE GAS EMISSIONS.

ONGOING CONVERSATIONS AMONG OUR BOARD AND OUR STAFF ABOUT THE THEATRE'S ROLE AND RESPONSIBILITY AS A RESOURCE TO THE COMMUNITY HAVE FOREGROUNDDED THE IMPORTANCE OF EXPANDING THE THEATRE'S RELATIONSHIP TO OUR COMMUNITY THROUGH DEEP, NON-TRANSACTIONAL PARTNERSHIPS. AS A RESULT, BERKELEY REP HAS CREATED IN DIALOGUE, A NEW PROGRAMMATIC INITIATIVE THAT WILL PLACE THE CAPACITY OF OUR THEATRE-MAKING SKILLS AND RESOURCES IN SERVICE OF OUR COMMUNITY. IN 2020/21 WE APPOINTED A

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NEW ASSOCIATE MANAGING DIRECTOR WHO, IN COLLABORATION WITH A  
 SOON-TO-BE-HIRED ASSOCIATE ARTISTIC DIRECTOR, WILL LEAD DEVELOPMENT OF  
 IN DIALOGUE.  
 BERKELEY REP IS COMMITTED TO BECOMING AN ANTIRACIST ORGANIZATION  
 THROUGH THE EFFORTS OF OUR BOARD, MANAGEMENT, AND STAFF. WE ARE  
 COMMITTED TO ENSURING BLACK, INDIGENOUS, AND PEOPLE OF COLOR (BIPOC)  
 ARE HOLISTICALLY REPRESENTED THROUGHOUT ALL LEVELS OF OUR ORGANIZATION:  
 ON OUR BOARD, IN LEADERSHIP ROLES, ON- AND BACKSTAGE, AND IN OUR  
 OFFICES, REHEARSAL ROOMS, PRODUCTION FACILITIES, AND AUDIENCE.  
 THE BOARD GOVERNANCE COMMITTEE REVIEWED AND AMENDED BOARD POLICIES AND  
 THE BOARD NOMINATION PROCESS TO AFFIRM THAT FINANCIAL OBLIGATIONS ARE  
 NOT A BARRIER TO BOARD PARTICIPATION. TWO-THIRDS OF NEW TRUSTEES WHO  
 JOINED US IN 2020/21 IDENTIFY AS BIPOC. THE BOARD OF DIRECTORS HAS  
 COMMITTED TO MAINTAINING TIME AT EVERY BOARD MEETING FOR ANTI-RACISM  
 TRAINING AND LEARNING. THE BOARD/STAFF ANTIRACISM WORKING GROUP IS  
 COMPRISED OF EQUAL NUMBERS OF BOARD AND STAFF, AND SERVES AS A SPACE  
 FOR ONGOING JEDI DIALOGUE, EDUCATION, AND PLANNING, WHILE CREATING A  
 STRUCTURE FOR INTERNAL ACCOUNTABILITY.  
 IN ADDITION TO OUR ONGOING BIPOC AFFINITY SPACE AND A WHITE  
 ACTION/LEARNING SPACE, IN DECEMBER 2020 BERKELEY REP STAFF CREATED A  
 STAFF-LED EDUCATION COMMITTEE TO PROGRAM AND FACILITATE ANTIRACISM  
 CONVERSATIONS AND TRAININGS DURING ALL-STAFF MEETINGS. BERKELEY REP'S  
 DIRECTOR OF HUMAN RESOURCES AND DIVERSITY HAS LED AN IN-DEPTH AUDIT OF  
 THE THEATRE'S RECRUITMENT, SELECTION, AND HIRING PRACTICES, AND WE ARE  
 NOW IN THE PROCESS OF FORMALIZING A NEW HIRING POLICY. WE HAVE REVISED  
 JOB POSTINGS WITH A CRITICAL EYE TOWARD ELIMINATING LANGUAGE AND  
 REQUIREMENTS THAT MAY RESULT IN GATEKEEPING, AND WE HAVE RECONFIGURED  
 OUR HIRING COMMITTEES TO BE AT LEAST HALF BIPOC. WE ALSO CONDUCTED A

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WAGE ANALYSIS AND WILL CONTINUE TO POST SALARY RANGES FOR ALL OPEN POSITIONS PUBLICLY.

THROUGHOUT 2020/21, BERKELEY REP'S EXECUTIVE LEADERSHIP TEAM WITH INPUT FROM THE BOARD AND STAFF WORKED TO DRAFT AN ANTIRACISM COMMITMENT, WHICH WAS POSTED ON THE THEATRE'S WEBSITE IN SEPTEMBER 2021. THE STATEMENT ACKNOWLEDGES BERKELEY REP'S POWER AND PRIVILEGE AS A HISTORICALLY AND PREDOMINANTLY WHITE LEGACY THEATRE THAT HAS PROFITED FROM THE KNOWLEDGE, STORIES, AND BODIES OF BLACK AND BROWN PEOPLE; OUTLINES THE ACTIONS WE HAVE TAKEN SO FAR IN OUR ANTIRACISM WORK; AND AFFIRMS OUR COMMITMENT TO CONTINUE THE WORK OF BECOMING AN ORGANIZATION THAT WELCOMES, SUPPORTS, AND HONORS THE FULLNESS AND COMPLEXITY OF ALL PEOPLE'S IDENTITIES.

WHEN ARTISTIC DIRECTOR JOHANNA PFAELZER JOINED THE COMPANY IN 2019/20, WE FELT THE TIME WAS RIGHT TO REFRESH BERKELEY REP'S BRAND IDENTITY TO REFLECT THE BOLD IMAGINATION AND SPIRIT OF INNOVATION FOR WHICH THE THEATRE IS KNOWN. BERKELEY REP WORKED WITH GRAPHIC DESIGNER PAULA SCHER OF NEW YORK-BASED DESIGN FIRM PENTAGRAM AND HER TEAM TO DEVELOP A BRAND IDENTITY THAT ESTABLISHES A BOLD AND CONTEMPORARY VISUAL LANGUAGE FOR THE THEATRE IN LINE WITH ITS PROGRAMMING AND REPUTATION. IN JUNE 2021, BERKELEY REP UNVEILED OUR NEW BRAND IMAGE TO COINCIDE WITH THE ANNOUNCEMENT OF THE THEATRE'S 2021/22 SEASON. AS PART OF THE REBRAND, BERKELEY REP ALSO INVESTED IN A MUCH-NEED REDESIGN OF THE THEATRE'S WEBSITE.

EXPENSES \$ 204,470. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION B, LINE 11B:  
THE MANAGING DIRECTOR, IN CONSULTATION WITH THE BOARD OR FINANCE COMMITTEE, AS THE MANAGING DIRECTOR DEEMS APPROPRIATE, IS RESPONSIBLE FOR THE TIMELY



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PREPARATION OF THE RETURN. THE MANAGING DIRECTOR SHALL PROVIDE THE FINANCE COMMITTEE WITH A SUBSTANTIALLY COMPLETE FORM 990 SUFFICIENTLY IN ADVANCE OF THE FILING DEADLINE TO ENABLE A DETAILED AND CONSCIENTIOUS REVIEW BY THE MEMBERS OF THE FINANCE COMMITTEE. SUBSEQUENTLY, THE BOARD WILL BE INVITED TO REVIEW THE FORM 990 IN ITS ENTIRETY IN ADVANCE OF THE FILING DEADLINE.

FORM 990, PART VI, SECTION B, LINE 12C:

THE ORGANIZATION'S CONFLICT OF INTEREST POLICY COVERS ALL TRUSTEES, THE MANAGING DIRECTOR AND ARTISTIC DIRECTOR. NO TRUSTEE MAY USE HIS OR HER POSITION AT THE ORGANIZATION FOR PERSONAL GAIN OR TO BENEFIT ANOTHER AT THE EXPENSE OF THE ORGANIZATION, ITS MISSION, OR ITS REPUTATION. NEW TRUSTEES MUST SIGN THE CONFLICT OF INTEREST DISCLOSURE STATEMENT AFFIRMING THEY HAVE READ THE CONFLICT OF INTEREST POLICY, ARE NOT AWARE OF ANY DIRECT OR INDIRECT FINANCIAL OR OTHER MATERIAL INTEREST THAT IS REQUIRED TO BE DISCLOSED, AND WILL PROMPTLY REPORT ANY FUTURE SITUATION THAT MIGHT CONSTITUTE A CONFLICT OF INTEREST. ANNUAL SIGNATURES ARE NOT REQUIRED. IF A CONFLICT OF INTEREST FAILS TO BE DISCLOSED THE BOARD WILL INVESTIGATE THE SITUATION AND TAKE APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTION AS NECESSARY.

FORM 990, PART VI, SECTION B, LINE 15:

COMPENSATION FOR THE ARTISTIC DIRECTOR AND THE MANAGING DIRECTOR IS NEGOTIATED BY THE BOARD PRESIDENT AND A COMMITTEE OF THE BOARD OF TRUSTEES AND APPROVED BY THE BOARD THROUGH ITS APPROVAL OF WRITTEN EMPLOYMENT AGREEMENTS AND THE ANNUAL BUDGET PROCESS. THE BOARD (OR A BOARD COMMITTEE) REVIEWS DATA GATHERED FROM THEATRE COMMUNICATIONS GROUP AND OTHER PUBLIC DATA, TAKING INTO ACCOUNT INDIVIDUAL PERFORMANCE AND THE COST OF LIVING IN THE BERKELEY, CALIFORNIA AREA. THE BOARD REGULARLY EVALUATES THE

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PERFORMANCE OF THE ARTISTIC DIRECTOR AND MANAGING DIRECTOR. OTHER SALARIES

ARE SUGGESTED BY MANAGEMENT AND APPROVED THROUGH THE BUDGET PROCESS.

FORM 990, PART VI, SECTION C, LINE 19:

BERKELEY REPERTORY THEATRE'S FINANCIAL STATEMENTS ARE ANNUALLY PROVIDED TO

DUN AND BRADSTREET. FINANCIAL STATEMENTS FOR MOST RECENTLY COMPLETED FISCAL

YEAR ARE AVAILABLE ON OUR WEBSITE AND UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

RENTAL EXPENSES	337.
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FORM 990, PART XII, LINE 2C:

THE PROCESS HAD NOT CHANGED FROM THE PRIOR YEAR.