



See a Social Security Number? Say Something!  
Report Privacy Problems to <https://public.resource.org/privacy>  
Or call the IRS Identity Theft Hotline at 1-800-908-4490



# Return of Organization Exempt From Income Tax

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

**2006**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

**A** For the 2006 calendar year, or tax year beginning **OCT 1, 2006** and ending **SEP 30, 2007**

<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 <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>Shakespeare Festival LA</b>	<b>D</b> Employer identification number <b>13-3167013</b>
	Please use IRS label or print or type See Specific Instructions Number and street (or P O box if mail is not delivered to street address) Room/suite <b>1238 West First Street</b>	<b>E</b> Telephone number <b>(213) 481-2273</b>
City or town, state or country, and ZIP + 4 <b>Los Angeles, CA 90026</b>		<b>F</b> Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

**H** and **I** are not applicable to section 527 organizations.

**H(a)** Is this a group return for affiliates?  Yes  No

**H(b)** If "Yes," enter number of affiliates **N/A**

**H(c)** Are all affiliates included? **N/A**  Yes  No (If "No," attach a list)

**H(d)** Is this a separate return filed by an organization covered by a group ruling?  Yes  No

**I** Group Exemption Number **N/A**

**G** Website: **www.shakespearefestivalla.org**

**J** Organization type (check only one)  501(c) ( **3** ) (insert no)  4947(a)(1) or  527

**K** Check here  if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

**L** Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 **1,330,862.**

**M** Check  if the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF)

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances**

SCANNED APR 25 2008

Revenue	<b>1</b> Contributions, gifts, grants, and similar amounts received					
	<b>a</b> Contributions to donor advised funds	<b>1a</b>				
	<b>b</b> Direct public support (not included on line 1a)	<b>1b</b>		<b>848,813.</b>		
	<b>c</b> Indirect public support (not included on line 1a)	<b>1c</b>				
	<b>d</b> Government contributions (grants) (not included on line 1a)	<b>1d</b>		<b>411,585.</b>		
	<b>e</b> Total (add lines 1a through 1d) (cash \$ <b>1,260,398.</b> noncash \$ )	<b>1e</b>			<b>1,260,398.</b>	
	<b>2</b> Program service revenue including government fees and contracts (from Part VII, line 93)	<b>2</b>				
	<b>3</b> Membership dues and assessments	<b>3</b>				
	<b>4</b> Interest on savings and temporary cash investments	<b>4</b>			<b>78.</b>	
	<b>5</b> Dividends and interest from securities	<b>5</b>			<b>2,689.</b>	
Expenses	<b>6 a</b> Gross rents	<b>6a</b>				
	<b>b</b> Less rental expenses	<b>6b</b>				
	<b>c</b> Net rental income or (loss) Subtract line 6b from line 6a	<b>6c</b>				
	<b>7</b> Other investment income (describe )	<b>7</b>				
	<b>8 a</b> Gross amount from sales of assets other than inventory	(A) Securities	<b>8a</b>			
		(B) Other	<b>8b</b>			
			<b>8c</b>			
		<b>d</b> Net gain or (loss) Combine line 8c, columns (A) and (B)	<b>8d</b>			
	<b>9</b> Special events and activities (attach schedule) If any amount is from gaming, check here <input type="checkbox"/>	<b>a</b> Gross revenue (not including \$ <b>545,091.</b> of contributions reported on line 1b)	<b>9a</b>		<b>32,249.</b>	
		<b>b</b> Less direct expenses other than fundraising expenses	<b>9b</b>		<b>32,249.</b>	
<b>c</b> Net income or (loss) from special events Subtract line 9b from line 9a		<b>9c</b>			<b>0.</b>	
<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> Gross profit or (loss) from sales of inventory (attach schedule) Subtract line 10b from line 10a	<b>10c</b>				
<b>11</b> Other revenue (from Part VII, line 103)	<b>11</b>			<b>35,448.</b>		
<b>12</b> Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	<b>12</b>			<b>1,298,613.</b>		
<b>13</b> Program services (from line 44, column (B))		<b>13</b>		<b>1,157,382.</b>		
	<b>14</b> Management and general (from line 44, column (C))	<b>14</b>		<b>83,308.</b>		
	<b>15</b> Fundraising (from line 44, column (D))	<b>15</b>		<b>119,986.</b>		
	<b>16</b> Payments to affiliates (attach schedule)	<b>16</b>				
	<b>17</b> Total expenses. Add lines 16 and 44, column (A)	<b>17</b>			<b>1,360,676.</b>	
Net Assets	<b>18</b> Excess or (deficit) for the year Subtract line 17 from line 12	<b>18</b>		<b>&lt;62,063.&gt;</b>		
	<b>19</b> Net assets or fund balances at beginning of year (from line 73, column (A))	<b>19</b>		<b>668,355.</b>		
	<b>20</b> Other changes in net assets or fund balances (attach explanation)	<b>20</b>		<b>0.</b>		
	<b>21</b> Net assets or fund balances at end of year Combine lines 18, 19, and 20	<b>21</b>			<b>606,292.</b>	

RECEIVED  
APR 08 2008

G17 22

**Part II Statement of Functional Expenses**

All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
<b>22a</b> Grants paid from donor advised funds (attach schedule) (cash \$ <u>0</u> noncash \$ <u>0</u> ) If this amount includes foreign grants, check here <input type="checkbox"/>				
<b>22b</b> Other grants and allocations (attach schedule) (cash \$ <u>0</u> noncash \$ <u>0</u> ) If this amount includes foreign grants, check here <input type="checkbox"/>				
<b>23</b> Specific assistance to individuals (attach schedule)				
<b>24</b> Benefits paid to or for members (attach schedule)				
<b>25a</b> Compensation of current officers, directors, key employees, etc listed in Part V-A Stmt 3	88,026.	54,136.	16,725.	17,165.
<b>b</b> Compensation of former officers, directors, key employees, etc listed in Part V-B	0.	0.	0.	0.
<b>c</b> Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>26</b> Salaries and wages of employees not included on lines 25a, b, and c	485,144.	434,553.	10,369.	40,222.
<b>27</b> Pension plan contributions not included on lines 25a, b, and c				
<b>28</b> Employee benefits not included on lines 25a - 27	38,693.	33,201.	3,613.	1,879.
<b>29</b> Payroll taxes	82,363.	70,009.	6,589.	5,765.
<b>30</b> Professional fundraising fees				
<b>31</b> Accounting fees				
<b>32</b> Legal fees				
<b>33</b> Supplies				
<b>34</b> Telephone				
<b>35</b> Postage and shipping				
<b>36</b> Occupancy	28,009.	24,500.	3,509.	
<b>37</b> Equipment rental and maintenance	4,081.		4,081.	
<b>38</b> Printing and publications				
<b>39</b> Travel	54,876.	50,357.	1,002.	3,517.
<b>40</b> Conferences, conventions, and meetings				
<b>41</b> Interest	26,180.	26,180.		
<b>42</b> Depreciation, depletion, etc. (attach schedule)	46,041.	36,785.	7,320.	1,936.
<b>43</b> Other expenses not covered above (itemize):				
a _____				
b _____				
c _____				
d _____				
e _____				
f _____				
g <b>See Statement 2</b>	507,263.	427,661.	30,100.	49,502.
<b>44</b> Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	1,360,676.	1,157,382.	83,308.	119,986.

**Joint Costs.** Check  if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No  
 If "Yes," enter (i) the aggregate amount of these joint costs \$ N/A, (ii) the amount allocated to Program services \$ N/A,  
 (iii) the amount allocated to Management and general \$ N/A, and (iv) the amount allocated to Fundraising \$ N/A

Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ▶ To enchant, enrich and build theatrical community.	Program Service Expenses (Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others)
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	
a See Statement 4	
(Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	488,319.
b See Statement 5	
(Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	26,264.
c See Statement 6	
(Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	183,227.
d Will to Lead encourages Will Power to Youth alumni to remain a part of our community by offering follow-up services such as leadership training, after-school tutoring, and cultural field trips. This year, 122 youth participated in the program. During the period covered, 122 clients were served.	
(Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	111,224.
e Other program services (attach schedule) See Statement 7	
(Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	348,348.
f Total of Program Service Expenses (should equal line 44, column (B), Program services) ▶	1,157,382.

**Part IV Balance Sheets** (See the instructions.)

**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year
<b>Assets</b>	45 Cash - non-interest-bearing	155,115.	45	133,337.
	46 Savings and temporary cash investments	15,672.	46	19,518.
	47 a Accounts receivable	47a 19,126.		
	b Less: allowance for doubtful accounts	47b	47c	19,126.
	48 a Pledges receivable	48a		
	b Less: allowance for doubtful accounts	48b	48c	
	49 Grants receivable	75,000.	49	208,700.
	50 a Receivables from current and former officers, directors, trustees, and key employees		50a	
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		50b	
	51 a Other notes and loans receivable	51a		
	b Less: allowance for doubtful accounts	51b	51c	
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges		53	
	54 a Investments - publicly-traded securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54a	
	b Investments - other securities Stmt 9 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	58,869.	54b	61,558.
55 a Investments - land, buildings, and equipment: basis	55a			
b Less: accumulated depreciation	55b	55c		
56 Investments - other		56		
57 a Land, buildings, and equipment: basis	57a 1,195,509.			
b Less: accumulated depreciation	57b 451,471.	790,079.	57c	744,038.
58 Other assets, including program-related investments (describe ▶ _____)			58	
59 <b>Total assets</b> (must equal line 74). Add lines 45 through 58		1,254,453.	59	1,186,277.
<b>Liabilities</b>	60 Accounts payable and accrued expenses	36,098.	60	29,985.
	61 Grants payable		61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees		63	
	64 a Tax-exempt bond liabilities		64a	
	b Mortgages and other notes payable		64b	
	65 Other liabilities (describe ▶ See Statement 8 )	550,000.	65	550,000.
66 <b>Total liabilities.</b> Add lines 60 through 65		586,098.	66	579,985.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.</b>			
	67 Unrestricted	543,355.	67	531,292.
	68 Temporarily restricted	125,000.	68	75,000.
	69 Permanently restricted		69	
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.</b>			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
	73 <b>Total net assets or fund balances.</b> Add lines 67 through 69 or lines 70 through 72 (Column (A) must equal line 19 and column (B) must equal line 21)	668,355.	73	606,292.
	74 <b>Total liabilities and net assets/fund balances.</b> Add lines 66 and 73	1,254,453.	74	1,186,277.





Part VI Other Information (continued)

82 a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?
82b 40,920.
83 a Did the organization comply with the public inspection requirements for returns and exemption applications?
83b X
84 a Did the organization solicit any contributions or gifts that were not tax deductible?
84b N/A
85 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?
85a N/A
85b Did the organization make only in-house lobbying expenditures of \$2,000 or less?
85c N/A
85d Section 162(e) lobbying and political expenditures
85d N/A
85e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices
85e N/A
85f Taxable amount of lobbying and political expenditures (line 85d less 85e)
85f N/A
85g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?
85g N/A
85h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?
85h N/A
86 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12
86a N/A
86b Gross receipts, included on line 12, for public use of club facilities
86b N/A
87 501(c)(12) organizations. Enter: a Gross income from members or shareholders
87a N/A
87b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)
87b N/A
88 a At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3?
88a X
88b At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)?
88b X
89 a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 0., section 4912 0.; section 4955 0.
89b 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year?
89b X
89c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 0.
89d Enter: Amount of tax on line 89c, above, reimbursed by the organization 0.
89e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?
89e X
89f All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?
89f X
89g For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?
89g X
90 a List the states with which a copy of this return is filed CA
90b Number of employees employed in the pay period that includes March 12, 2006 26
91 a The books are in care of Shakespeare Festival LA Telephone no (213) 481-2273
Located at 1238 West First Street, Los Angeles, CA ZIP + 4 90026
91b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?
91b X
If 'Yes,' enter the name of the foreign country N/A
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.

**Part VI Other Information** (continued) Yes No

c At any time during the calendar year, did the organization maintain an office outside of the United States? 91c    
 If "Yes," enter the name of the foreign country N/A

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here   
 and enter the amount of tax-exempt interest received or accrued during the tax year 92 | N/A

**Part VII Analysis of Income-Producing Activities** (See the instructions.)

**Note:** Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	78.	
96 Dividends and interest from securities			14	2,689.	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a <u>Miscellaneous</u>			06	35,448.	
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		0.		38,215.	0.
105 Total (add line 104, columns (B), (D), and (E))					38,215.

**Note:** Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
▼	

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts** (See the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No

**Note:** If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

**Part XI** Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13). N/A

106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes	No

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	----- -----			
b	----- -----			
c	----- -----			
<b>Totals</b>				

107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes	No

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	----- -----			
b	----- -----			
c	----- -----			
<b>Totals</b>				

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

Yes	No

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.

Please Sign Here

Signature of officer: Ben Donenberg Date: 4/2/08  
 Type or print name and title: Ben Donenberg

Paid Preparer's Use Only

Preparer's signature: [Signature] Date: 3/26/08 Check if self-employed:   
 Firm's name (or yours if self-employed), address, and ZIP + 4: Harrington Group, CPAs, LLP  
2670 Mission Street, Suite 200  
San Marino, CA 91108  
 Preparer's SSN or PTIN (See Gen Inst X): 95-4557617  
 Phone no: (626) 403-6801

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

**Organization Exempt Under Section 501(c)(3)**

OMB No 1545-0047

(Except Private Foundation) and Section 501(e), 501(f), 501(k),  
501(n), or 4947(a)(1) Nonexempt Charitable Trust

**2006**

Department of the Treasury  
Internal Revenue Service

**Supplementary Information-(See separate instructions.)**

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization: **Shakespeare Festival LA** Employer identification number: **13 3167013**

**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**  
(See page 2 of the instructions List each one If there are none, enter "None ")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Sara Adelman 1238 West First Street, Los Angeles,	Managing Director 40.00	55,000.	0.	0.
Chris Anthony 1238 West First Street, Los Angeles,	Dir. of Youth and Ed 40.00	55,000.	0.	0.
-----				
-----				
-----				
Total number of other employees paid over \$50,000 ▶	0			

**Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services**  
(See page 2 of the instructions List each one (whether individuals or firms) If there are none, enter "None ")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		
-----		
-----		
-----		
-----		
Total number of others receiving over \$50,000 for professional services ▶	0	

**Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services**  
(List each contractor who performed services other than professional services, whether individuals or firms If there are none, enter "None " See page 2 of the instructions )

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		
-----		
-----		
-----		
-----		
Total number of other contractors receiving over \$50,000 for other services ▶	0	

**Part III** **Statements About Activities** (See page 2 of the instructions )

**Yes No**

<p><b>1</b> During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B )</p> <p>Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities</p>	<p><b>1</b></p>		<p><b>X</b></p>
<p><b>2</b> During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions )</p>			
<p><b>a</b> Sale, exchange, or leasing of property?</p>	<p><b>2a</b></p>		<p><b>X</b></p>
<p><b>b</b> Lending of money or other extension of credit?</p>	<p><b>2b</b></p>		<p><b>X</b></p>
<p><b>c</b> Furnishing of goods, services, or facilities?</p>	<p><b>2c</b></p>		<p><b>X</b></p>
<p><b>d</b> Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?</p>	<p><b>2d</b></p>	<p><b>X</b></p>	
<p><b>e</b> Transfer of any part of its income or assets?</p>	<p><b>2e</b></p>		<p><b>X</b></p>
<p><b>3 a</b> Did the organization make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments )</p>	<p><b>3a</b></p>		<p><b>X</b></p>
<p><b>b</b> Did the organization have a section 403(b) annuity plan for its employees?</p>	<p><b>3b</b></p>		<p><b>X</b></p>
<p><b>c</b> Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement</p>	<p><b>3c</b></p>		<p><b>X</b></p>
<p><b>d</b> Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?</p>	<p><b>3d</b></p>	<p><b>X</b></p>	
<p><b>4 a</b> Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g If "No," complete lines 4f and 4g</p>	<p><b>4a</b></p>		<p><b>X</b></p>
<p><b>b</b> Did the organization make any taxable distributions under section 4966?</p>	<p><b>4b</b></p>	<p>N/A</p>	
<p><b>c</b> Did the organization make a distribution to a donor, donor advisor, or related person?</p>	<p><b>4c</b></p>	<p>N/A</p>	
<p><b>d</b> Enter the total number of donor advised funds owned at the end of the tax year</p>			<p>N/A</p>
<p><b>e</b> Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year</p>			<p>N/A</p>
<p><b>f</b> Enter the total number of separate funds or accounts owned at the end of the year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts</p>			<p>0.</p>
<p><b>g</b> Enter the aggregate value of assets in all funds or accounts included on line 4f at the end of the tax year</p>			<p>0.</p>

**Part IV Reason for Non-Private Foundation Status** (See pages 4 through 7 of the instructions )

I certify that the organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5  A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
- 6  A school Section 170(b)(1)(A)(ii) (Also complete Part V )
- 7  A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
- 8  A federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
- 9  A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state ▶
- 10  An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A )
- 11a  An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A )
- 11b  A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A )
- 12  An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc , functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2) (Also complete the **Support Schedule** in Part IV-A )
- 13  An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3) Check the box that describes the type of supporting organization  
 Type I       Type II       Type III-Functionally Integrated       Type III-Other

**Provide the following information about the supported organizations.** (See page 7 of the instructions )

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
<b>Total</b>					▶

- 14  An organization organized and operated to test for public safety Section 509(a)(4) (See page 7 of the instructions )

**Part IV-A Support Schedule** (Complete only if you checked a box on line 10, 11, or 12) **Use cash method of accounting.**  
**Note:** You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	1,104,237.	799,876.	1,004,877.	1,010,070.	3,919,060.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	0.	0.	98,158.	269,111.	367,269.
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	2,203.	13,371.	527.	854.	16,955.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets.	21,105.	6,499.	12,901.	See Statement 11	40,505.
23 Total of lines 15 through 22	1,127,545.	819,746.	1,116,463.	1,280,035.	4,343,789.
24 Line 23 minus line 17	1,127,545.	819,746.	1,018,305.	1,010,924.	3,976,520.
25 Enter 1% of line 23	11,275.	8,197.	11,165.	12,800.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 79,530.
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2002 through 2005 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b 0.
c Total support for section 509(a)(1) test. Enter line 24, column (e)					26c 3,976,520.
d Add: Amounts from column (e) for lines 18 16,955. 19 _____ 22 40,505. 26b _____					26d 57,460.
e Public support (line 26c minus line 26d total)					26e 3,919,060.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 98.5550%
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year	(2005) N/A	(2004) N/A	(2003) N/A	(2002) N/A	
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year	(2005) N/A	(2004) N/A	(2003) N/A	(2002) N/A	
c Add: Amounts from column (e) for lines 15 16 _____ 17 _____ 20 _____ 21 _____					27c N/A
d Add: Line 27a total _____ and line 27b total _____					27d N/A
e Public support (line 27c total minus line 27d total)					27e N/A
f Total support for section 509(a)(2) test. Enter amount on line 23, column (e)					27f N/A
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h N/A %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15

None

**Part V** Private School Questionnaire (See page 9 of the instructions )

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement )		
_____			
_____			
_____			
32	Does the organization maintain the following		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement )	32d	
_____			
_____			
33	Does the organization discriminate by race in any way with respect to		
a	Students' rights or privileges?	33a	
b	Admissions policies?	33b	
c	Employment of faculty or administrative staff?	33c	
d	Scholarships or other financial assistance?	33d	
e	Educational policies?	33e	
f	Use of facilities?	33f	
g	Athletic programs?	33g	
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement )	33h	
_____			
_____			
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement	34b	
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	35	

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 10 of the instructions )

N/A

(To be completed ONLY by an eligible organization that filed Form 5768)

Check  a  if the organization belongs to an affiliated group Check  b  if you checked "a" and "limited control" provisions apply

<b>Limits on Lobbying Expenditures</b>		(a) Affiliated group totals	(b) To be completed for all electing organizations
(The term "expenditures" means amounts paid or incurred.)		N/A	
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount Enter the amount from the following table -		
	<b>If the amount on line 40 is -</b>		
	<b>The lobbying nontaxable amount is -</b>		
	Not over \$500,000		20% of the amount on line 40
	Over \$500,000 but not over \$1,000,000		\$100,000 plus 15% of the excess over \$500,000
	Over \$1,000,000 but not over \$1,500,000		\$175,000 plus 10% of the excess over \$1,000,000
	Over \$1,500,000 but not over \$17,000,000		\$225,000 plus 5% of the excess over \$1,500,000
	Over \$17,000,000		\$1,000,000
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43	
44	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44	

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below See the instructions for lines 45 through 50 on page 13 of the instructions )

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				N/A (e) Total
	(a) 2006	(b) 2005	(c) 2004	(d) 2003	
45	Lobbying nontaxable amount				0.
46	Lobbying ceiling amount (150% of line 45(e))				0.
47	Total lobbying expenditures				0.
48	Grassroots nontaxable amount				0.
49	Grassroots ceiling amount (150% of line 48(e))				0.
50	Grassroots lobbying expenditures				0.

**Part VI-B Lobbying Activity by Nonelecting Public Charities**

(For reporting only by organizations that did not complete Part VI-A) (See page 13 of the instructions )

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes	No	Amount
a Volunteers		X	
b Paid staff or management (Include compensation in expenses reported on lines c through h.)		X	
c Media advertisements		X	
d Mailings to members, legislators, or the public		X	
e Publications, or published or broadcast statements		X	
f Grants to other organizations for lobbying purposes		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means		X	
i Total lobbying expenditures (Add lines c through h.)			0.

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities



Form 990	Special Events and Activities				Statement	1
Description of Event	Gross Receipts	Contribut. Included	Gross Revenue	Direct Expenses	Net Income	
Special events	577,340.	545,091.	32,249.	32,249.		0.
To Fm 990, Part I, line 9	577,340.	545,091.	32,249.	32,249.		0.

Form 990	Other Expenses				Statement	2
Description	(A) Total	(B) Program Services	(C) Management and General	(D) Fundraising		
Taxes and fees	12,324.	11,989.	221.	114.		
Publicity/Public Relations	4,938.	3,765.		1,173.		
Professional development fees	1,940.	750.	916.	274.		
Insurance expense	15,762.	12,685.	3,077.			
Expandable equipment	202.			202.		
Front House/Box office expense	18,684.	18,684.				
Youth & education expense	123,613.	123,613.				
Production/Program Contractors	52,444.	47,919.		4,525.		
Marketing	81,173.	54,510.	5,725.	20,938.		
Office expense	85,867.	57,430.	8,038.	20,399.		
Production expense	94,450.	92,793.	198.	1,459.		
Professioanl fees	15,866.	3,523.	11,925.	418.		
Total to Fm 990, ln 43	507,263.	427,661.	30,100.	49,502.		



Description of Program Service One

Summer Festival-Shakespeare Festival/LA, Inc. (the Organization) is a nonprofit theatre in Los Angeles, founded in 1985 and incorporated in 1987, that is driven to enchant, enrich, and build community through professional theatrical traditions that are interpretively, geographically, and economically accessible to all. The Organization is best known for its annual Summer Festival, a three-week, professional, outdoor, critically acclaimed, union-contracted production of Shakespeares best-loved plays. The festival opens at the Cathedral of Our Lady of the Angels in Downtown, Los Angeles, and then moves to the South Coast Botanic Garden in Palos Verdes, California. Summer 2007 presented Shakespeares A Midsummer Nights Dream to a total of 6,630 diverse audience members of the Southern California area. At selected performances, non-perishable canned goods are collected in lieu of an admission charge, advancing the notion that theater can feed more than a soul, and a theatrical experience can engender a sense of social responsibility. During the period covered, 6630 clients were served.

To Form 990, Part III, line a

Grants

Expenses

	488,319.
--	----------

Description of Program Service Two

Will Power to Schools (WPS) is a teacher-training program that supplies middle and high school teacher with curriculum materials and a field trip for their students. Along with transportation to the Summer Festival and workshops preceding the performance, we provide participants with class sets of the play and curriculum materials on Shakespeares text and on our productions historical and cultural setting. Teachers who participate in Will Power to Schools benefit from weekend professional development workshops that employ innovative strategies to enliven and enrich the ways Shakespeare is introduced to students. The ultimate goals of the program are to invigorate teachers, improve the reading and literacy skills of grades 6-12, and increase students knowledge and appreciation of classic literary texts. Since 1993, Will Power to Schools has trained more than 1,200 teachers who serve 70,000 students. In fiscal year 2007, thirty-seven public school teachers from twenty-nine schools participated in two-day workshops and 180 students from these teachers classrooms attended the Summer Festival. During the period covered, 219 clients were served.

To Form 990, Part III, line b

Grants

Expenses

26,264.

---



---

Form 990                      Statement of Program Service Accomplishments                      Statement      6

---

Description of Program Service Three

Will Power to Youth Spring (WPY) is our nationally recognized seven-week, arts-based educational enrichment and employment program for underserved high school students. The program provides youth with literacy, leadership, job training and the opportunity to create an adaptation of a Shakespeare play that reflects their own thoughts and feelings about Shakespeares themes. WPY gives underserved youth the opportunity to develop skills necessary to complete high school and pursue higher education and high-paying jobs. Last spring, twenty-nine youth worked together to create a community and produce their own adaptation of Romeo and Juliet. During the period covered, 29 clients were served.

	Grants	Expenses
To Form 990, Part III, line c		183,227.

---



---

Form 990                                      Other Program Services                                      Statement      7

---

Description of Other Program Services

Replication of Will Power to Youth. Our summer session of Will Power to Youth in Richmond, Virginia marked the programs first venture to replicate outside of California. Months of preparation for the pilot replication program culminated in the seven-week program on the East Coast. Shakespeare Festival/LA conducted the session in collaboration with the National Endowment for the Arts, the Department of Justices Office of Juvenile Justice and Delinquency prevention, the Office of the Attorney General of the Commonwealth of Virginia, and Richmond Shakespeare. Over the course of seven weeks, students ages 14-21, from low income families were paid wages to participate in literacy, human relations, and artistic training. The program culminated in four public performances of an adaptation of Romeo and Juliet,

	Grants and Allocations	Expenses
--	---------------------------	----------

adapted, designed and performed by the twenty-two youth participants. During the period covered, 32 clients were served.

0. 323,826.

Youth Arts Professionals Institute is a professional development and training program for professional artists interested in working with arts education programs. It provides artists who create collaborative work with youth the rare opportunity to examine their practice as both teachers and artists. During the period covered, 20 clients were served.

0. 24,522.

Total to Form 990, Part III, line e

348,348.

Form 990	Other Liabilities	Statement	8
----------	-------------------	-----------	---

Description

Amount

Note payable to City of Los Angeles

550,000.

Total to Form 990, Part IV, line 65, Column B

550,000.

Form 990	Other Securities	Statement	9
----------	------------------	-----------	---

Security Description

Cost/FMV

Other Securities

Money market funds

FMV

61,558.

To Form 990, line 54b, Col B

61,558.

---



---

Form 990      Part V-A - List of Current Officers, Directors, Trustees and Key Employees      Statement 10

---

Name and Address	Title and Avg Hrs/Wk	Compen- sation	Employee Ben Plan Contrib	Expense Account
Ben Donenberg 1238 W. First Street Los Angeles, CA 90026	Producing Art Director 40.00	88,026.	0.	0.
Hale Behzadi 1238 W. First Street Los Angeles, CA 90026	Director 0.00	0.	0.	0.
Frank Brownstead 1238 W. First Street Los Angeles, CA 90026	Board member 0.00	0.	0.	0.
Ann Margaret Cunningham 1238 W. First Street Los Angeles, CA 90026	Board member 0.00	0.	0.	0.
Craig Darian 1238 W. First Street Los Angeles, CA 90026	Board member 0.00	0.	0.	0.
Ben Donenberg 1238 W. First Street Los Angeles, CA 90026	Board member 0.00	0.	0.	0.
Sy Exter 1238 W. First Street Los Angeles, CA 90026	Board member 0.00	0.	0.	0.
Lynda Boone Fetter 1238 W. First Street Los Angeles, CA 90026	Board member 0.00	0.	0.	0.
Lessing Gold 1238 W. First Street Los Angeles, CA 90026	Board member 0.00	0.	0.	0.
Barry L. Hirsch 1238 W. First Street Los Angeles, CA 90026	Board member 0.00	0.	0.	0.
Michael Narvid 1238 W. First Street Los Angeles, CA 90026	Board member 0.00	0.	0.	0.

Joel Prell 1238 W. First Street Los Angeles, CA 90026	Board member 0.00	0.	0.	0.
Pamela Robinson 1238 W. First Street Los Angeles, CA 90026	Board member 0.00	0.	0.	0.
Mike Ryan 1238 W. First Street Los Angeles, CA 90026	Board member 0.00	0.	0.	0.
Mee Hae Semcken 1238 W. First Street Los Angeles, CA 90026	Board member 0.00	0.	0.	0.
Fred Speer 1238 W. First Street Los Angeles, CA 90026	Board member 0.00	0.	0.	0.
Patrick Stansfield 1238 W. First Street Los Angeles, CA 90026	Board member 0.00	0.	0.	0.
W. Torrey Sun 1238 W. First Street Los Angeles, CA 90026	Board member 0.00	0.	0.	0.
Jerry Washburn 1238 W. First Street Los Angeles, CA 90026	Board member 0.00	0.	0.	0.
William Wegner 1238 W. First Street Los Angeles, CA 90026	Board member 0.00	0.	0.	0.
Rita Wilson 1238 W. First Street Los Angeles, CA 90026	Board member 0.00	0.	0.	0.
Alison Choppelas 1238 W. First Street Los Angeles, CA 90026	Board member 0.00	0.	0.	0.
Whitney Nifong 1238 W. First Street Los Angeles, CA 90026	Board member 0.00	0.	0.	0.
Ethel Narvid 1238 W. First Street Los Angeles, CA 90026	Board member 0.00	0.	0.	0.

Shakespeare Festival LA

13-3167013

Frank J. Sherwood  
1238 W. First Street  
Los Angeles, CA 90026

Board member  
0.00

0.      0.      0.

Los Angeles, CA 90026

Totals Included on Form 990, Part V-A

88,026.      0.      0.

Schedule A

Other Income

Statement 11

<u>Description</u>	<u>2005 Amount</u>	<u>2004 Amount</u>	<u>2003 Amount</u>	<u>2002 Amount</u>
Miscellaneous	21,105.	6,499.	12,901.	0.
Total to Schedule A, line 22	<u>21,105.</u>	<u>6,499.</u>	<u>12,901.</u>	<u>0.</u>

# Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
  - If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).
- Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.**

**Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed).

Section 501(c) corporations required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

*All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.*

**Electronic Filing (e-file).** Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for section 501(c) corporations required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on *e-file for Charities & Nonprofits*.

<b>Type or print</b>	Name of Exempt Organization <b>Shakespeare Festival LA</b>	Employer identification number <b>13-3167013</b>
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P.O. box, see instructions. <b>1238 West First Street</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>Los Angeles, CA 90026</b>	

**Check type of return to be filed** (file a separate application for each return):

- |  |   |                                    |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation)                 | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL         | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ         | <input type="checkbox"/> Form 990-T (trust other than above)      | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF         | <input type="checkbox"/> Form 1041-A                              | <input type="checkbox"/> Form 8870 |

- The books are in the care of ▶ **Shakespeare Festival LA**  
 Telephone No. ▶ **(213) 481-2273** FAX No. ▶ **(213) 975-9833**
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the whole group, check this box ▶ . If it is for part of the group, check this box ▶  and attach a list with the names and EINs of all members the extension will cover.

**1** I request an automatic 3-month (6-months for a section 501(c) corporation required to file Form 990-T) extension of time until **May 15, 2008**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:  
 ▶  calendar year \_\_\_\_\_ or  
 ▶  tax year beginning **OCT 1, 2006**, and ending **SEP 30, 2007**.

**2** If this tax year is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period

<b>3a</b> If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>3a</b>	\$	
<b>b</b> If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	<b>3b</b>	\$	
<b>c Balance Due.</b> Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>3c</b>	\$	<b>N/A</b>

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.