May 2, 2025

Dennis Town Hall
Community Preservation Committee
685 Route 134
South Dennis, MA 02660

Re: Application request for funding the restoration of the Cape Cinema

Dear Committee Members,

Please find enclosed an application from the Cape Cod Center for the Arts—requesting funds for the Cape Cinema.

As proud stewards of this historic institution in Dennis Village, we are seeking support to preserve one of our town's architectural and cultural treasures.

We welcome your consideration of our request and hope to have the opportunity to present our project to you in further detail, as necessary.

My best regards,

Nora Carey

Nora Carey
Executive Director | Cape Cod Center for the Arts

CAPE COD CENTER FOR THE ARTS

APPLICATION FOR DENNIS COMMUNITY PRESERVATION FUNDS

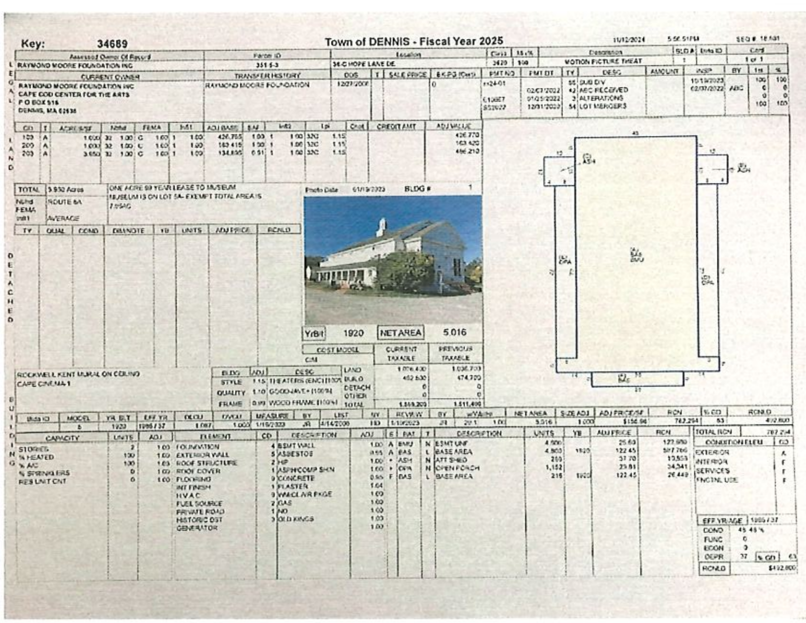
CALENDAR YEAR 2025 (FY2026)

Grant Request for The Cape Cinema, 36 Hope Lane | Dennis MA 02638
April 25, 2025

SYNOPSIS

1. **Project Title:** Preservation & Restoration the Cape Cinema
2. **Organization Name:** Cape Cod Center For the Arts, Inc
3. **Amount Requested From CPA:** $275,000
4. **Purpose:** Historic Preservation
5. **Project Site Location:** 36 Hope Lane | Dennis, MA | Parcel ID 351-5-3 | 5.95 Acres

The Cape Cinema | Building is identified with "36" stamped on the structure.



Key: 34689   Town of DENNIS - Fiscal Year 2025   11/12/2024   5:56:51PM   SEQ # 18,581

Assessed Owner Of Record	Parcel ID	Location	Class		Description	BLD #	Card
RAYMOND MOORE FOUNDATION INC	351-5-3	36-C HOPE LANE DE	3620	100	MOTION PICTURE THEAT	1	1 of 1

CURRENT OWNER: RAYMOND MOORE FOUNDATION INC, CAPE COD CENTER FOR THE ARTS, P O BOX 516, DENNIS, MA 02638

TRANSFER HISTORY: RAYMOND MOORE FOUNDATION — DOS 12/27/2007 — BK-PG 0

PMT NO	PMT DT	TY	DESC	AMOUNT	INSP	BY	1st	%
24-01		55	SUB D/V		10/18/2023		100	100
	02/07/2022	42	ABC RECEIVED		02/07/2022	ABC	0	0
61	01/25/2022	3	ALTERATIONS				0	0
2022	12/31/2022	54	LOT MERGERS				100	100

CD	T	ACRE/SF	Nbhd		FEMA		Infl		ADJ BASE	SAF	Infl2		Lpi		ADJ VALUE
100	A	1.000	32	1.00	C	1.00	1	1.00	426,755	1.00	1	1.00	320	1.15	436,770
200	A	1.000	32	1.00	C	1.00	1	1.00	163,415	1.00	1	1.00	320	1.15	163,420
200	A	3.650	32	1.00	C	1.00	1	1.00	134,895	0.91	1	1.00	320	1.15	496,210

TOTAL 5.950 Acres — ONE ACRE 99 YEAR LEASE TO MUSEUM; MUSEUM IS ON LOT 5A- EXEMPT TOTAL AREA IS 7.95AC
Nbhd ROUTE 6A; Infl AVERAGE

Photo Date 01/19/2023 BLDG # 1

YrBlt 1920 NET AREA 5,016

ROCKWELL KENT MURAL ON CEILING
CAPE CINEMA 1

BLDG	ADJ	DESC
STYLE	1.15	THEATERS (ENC) (100%)
QUALITY	1.10	GOOD/AVE+ (100%)
FRAME	0.99	WOOD FRAME (100%)

COST MODEL C/I	CURRENT TAXABLE	PREVIOUS TAXABLE
LAND	1,076,400	1,036,700
BUILD	492,800	474,700
DETACH	0	0
OTHER	0	0
TOTAL	1,569,200	1,511,400

Bldg ID	MODEL	YR BLT	EFF YR	DLCU	DVCU	MEASURE	BY	LIST	BY	REVIEW	BY	NET AREA	SIZE ADJ	ADJ PRICE/SF	RCN	% GD	RCNLD
	5	1920	1986 / 37	1.087	1.000	1/19/2023	JR	4/14/2006	HD	1/19/2023	JR	5,016	1.000	$156.96	787,294	63	492,800

CAPACITY	UNITS	ADJ
STORIES	2	1.00
% HEATED	100	1.00
% A/C	100	1.03
% SPRINKLERS	0	1.00
RES UNIT CNT	0	1.00

ELEMENT	CD	DESCRIPTION	ADJ
FOUNDATION	4	BSMT WALL	1.00
EXTERIOR WALL	5	ASBESTOS	0.95
ROOF STRUCTURE	2	HIP	1.00
ROOF COVER	1	ASPH/COMP SHN	1.00
FLOORING	9	CONCRETE	0.95
INT FINISH	1	PLASTER	1.04
H.V.A.C	9	WM/CL AIR PKGE	1.00
FUEL SOURCE	2	GAS	1.00
PRIVATE ROAD	1	NO	1.00
HISTORIC DST	3	OLD KINGS	1.00
GENERATOR			1.00

S	RAT	T	DESCRIPTION	UNITS	YB	ADJ PRICE	RCN
A	BMU	N	BSMT UNF	4,800		25.60	122,880
A	BAS	L	BASE AREA	4,800	1920	122.45	587,766
*	ASH	N	ATT SHED	260		37.70	13,553
*	OPA	N	OPEN PORCH	1,152		23.81	34,341
F	BAS	L	BASE AREA	216	1920	122.45	26,449

TOTAL RCN 787,294

CONDITION ELEM	CD
EXTERIOR	A
INTERIOR	F
SERVICES	F
FNCTNL USE	F

EFF YR/AGE 1986 / 37
COND 45.46 %
FUNC 0
ECON 0
DEPR 37 % GD 63
RCNLD $492,800

CAPE COD CENTER FOR THE ARTS

6. Synopsis of Project:

The Cape Cod Center for the Arts, Inc. (CCCA), proud steward of the historic Cape Cinema in Dennis Village, is seeking support to continue its vital work preserving one of the town's architectural and cultural treasures. Built in 1930 and designed by renowned New York architect Alfred Easton Poor, the Cape Cinema's design was inspired by the Congregational Church in Centerville and houses a nationally significant 6,400-square-foot mural by celebrated American artist Rockwell Kent.

This project proposes the thoughtful restoration of the Cinema's exterior, including the removal and replacement of weathered clapboards to ensure structural integrity, restoration of original windows and trim, improvements to perimeter drainage, and the addition of insulation to enhance energy efficiency and protect the landmark mural within. These improvements will build upon the successful roof replacement completed in 2019, made possible by the Town of Dennis through a generous $47,500 grant via the Community Preservation Act (CPA).

By investing in this next phase of restoration, the Town of Dennis will help safeguard the historic character and facade of the Cape Cinema, while ensuring its long-term preservation as a cultural hub for residents and visitors alike.

APPLICANT INFORMATION

7. Project Title:	Preservation & Restoration of the Cape Cinema
8. Organization Name:	Cape Cod Center For the Arts, Inc
9. Address:	*Physical*: 820 Main Street, Dennis MA 02638 *Postal*: P.O. Box 2001, Dennis MA 02638
Telephone:	508.835.3838
Fax:	N/A
E-mail:	nora@capeplayhouse.com
Website:	www.capeplayhouse.com
10. Federal Tax Identification :	04-3334834
11. Primary Contact Person:	-Nora Carey | Executive Director | 508.385.3838 nora@capeplayhouse.com -Dennis Corcoan | Treasurer | 781.910.1357 denniscork@gmail.com
Primary Contact who can approve & receive the funds:	- Nora Carey | Executive Director | 508.385.3838 nora@capeplayhouse.com - Dennis Corcoran | Treasurer | 781.910.1357 denniscork@gmail.com

CAPE COD CENTER FOR THE ARTS

APPLICANT BACKGROUND

12. Brief Applicant History:

The Cape Cod Center For the Arts, Inc (CCCA), a 501(c)(3) nonprofit organization, owns and operates the historic Cape Playhouse, which is situated on a 22-acre campus in Dennis Village. The Playhouse, established in 1927, is the oldest continuously operating summer theatre in America. The CCCA also owns the Cape Cinema building, established in 1930 on the same campus, which is operated by a third party. With its opening, the Playhouse became a major force in establishing the summer theater movement in America and the Cinema has been a trailblazer in showcasing independent, foreign, and art house films. Together, the Playhouse and Cinema have helped shape the cultural identity of Dennis and Cape Cod, offering generations of residents and visitors exceptional theatrical and cinematic experiences in historically significant venues.

13. Names of Governing Board, Trustees, or Directors:

DIRECTORS

Nora Carey | Executive Director | Cape Cod Center for the Arts
Eric Rosen | Artistic Director | The Cape Playhouse

14. Summary of Comparable Projects Completed:

2019: The CCCA was awarded a **$250,000** Community Preservation Act (CPA) grant from the Town of Dennis to support restoration work identified in an architectural assessment of its historic buildings. The assessment was commissioned by the CCCA and conducted by Brown Lindquist Fenuccio & Raber Architects, Inc. The total project cost was $475,000, with the CCCA contributing $75,000 and securing an additional $150,000 grant from the Massachusetts Cultural Council to complete the funding.

The CPA funds were used to restore the front section of the Playhouse, which includes the lobby, restrooms, and auditorium. Restoration work included new shingles, trim, and perimeter drainage on the west, east, and south facades. New windows were installed on the south facade, and the decorative shutters on the west and east facades were restored. Three staircases—one on the west side and two on the east side—were replaced to enhance safety and improve patron flow.

In conjunction with this work, installation of insulation behind the newly reshingled facades, as well as new roof shingles and insulation for the front section of the building was completed—with CCCA & the Mass Cultural Council.

2022: Prior to undertaking major exterior improvements, the CCCA commissioned a comprehensive engineering study to assess the structural integrity of the entire Cape Playhouse building. In addition, a Structural Improvements Plan was developed specifically for the auditorium section of the theatre. The total cost of this critical planning initiative was **$173,500,** funded in part by a $65,000 grant from the Massachusetts Department of Tourism, with the remaining $108,500 provided by CCCA. This foundational work has guided the organization's preservation strategy and ensures the long-term stability of this historic venue.

2024: The Cape Cod Center for the Arts (CCCA) completed a transformative $225,000 landscape renovation at the entrance of the Cape Playhouse. The project was designed to enhance both safety and aesthetics by creating a spacious, paved gathering area where patrons can congregate away from vehicle traffic, introducing designated ADA-compliant parking spaces, and regrading the entrance "teardrop." What was once a dusty dirt field was thoughtfully converted into a welcoming green space featuring grass, trees, and shrubbery, offering visitors an inviting first impression of the historic theatre. Funding for this project was made possible through a successful "Fund-a-Need" initiative at the 2023 Annual Gala, which raised $100,000, and a generous contribution of $125,000 from a private donor.

PROJECT INFORMATION

15. Project Concept:

As outlined in the Synopsis (#6), this project involves the removal of all existing clapboards down to the structural wall supports. Currently, the building lacks insulation, and both contractors have confirmed that the majority of the existing clapboards are coated with lead-based paint. As a result, specialized safety protocols will be implemented during removal to ensure compliance with environmental and health regulations.

Following removal, the building will be insulated, and new white cedar clapboards will be installed. Repairs and improvements to existing windows will include the installation of new flashing and PVC trim to ensure long-term durability and energy efficiency. Additionally, the vinyl siding currently on the west façade will be removed and replaced with cedar clapboards to maintain consistency and historical integrity.

The entire exterior will then receive two coats of high-quality white paint to complete the restoration.

16. Project Goals/Objectives:

The goal of this project is to preserve the historic Cape Cinema, ensuring it remains a vibrant cultural destination for both residents and visitors in the heart of Cape Cod. Its continued operation is essential to the cultural vitality of the community and the broader region. The Cinema's strong reputation and loyal following from across the Cape draw patrons who, in turn, support the local economy—benefiting nearby restaurants, shops, and businesses throughout Dennis.

17. Describe any legal issues, ramifications, impediments about this Project, if any:

N/A

18. Describe how this Project accomplishes the goals and objectives of the CPA:

The project falls within the Historic Preservation criteria, and specifically addresses the following concerns:

- *Protects, preserves, enhances, restores, and/or rehabilitates historic, cultural, architectural resources of significance, especially those that are threatened*
- *Protects, preserves, enhances, restores and/or rehabilitates the historic function of a property or site*
- *Demonstrates the ability to provide permanent protection of the historic resource*
- *Identifies, preserves and enhances the heritage of the Town of Dennis*
- *Optimizes the use and enjoyment of the Town's historic resources by residents and visitors*

19. Describe how this Project is relevant to the current and future needs of Dennis:

The Cape Cinema, along with its partner institutions on the shared 22-acre campus, forms a vital part of the historic and cultural fabric of Dennis. For over 95 years, the campus has offered residents and visitors alike unique and enriching cultural experiences. The arts are universally valued—they entertain, inspire, educate, and foster deeper understanding across communities. As the Town of Dennis continues to evolve to meet the needs of its residents, the Cape Cinema will remain a cornerstone of the local cultural landscape, serving as a key destination for the arts and helping to preserve the distinctive character of Dennis Village for future generations.

20. Describe how this Projects relates to the Dennis Local Comprehensive Plan:

Two items in the Community Vision Statement of the Comprehensive Plan are particularly relevant to this project:

- *Dennis is a town of natural and man-made beauty. To ensure that it is not lost, it is necessary to protect our natural resources and to give continuity to building design.*

  The Cape Cinema represents a quintessential historic Cape Cod architectural aesthetic, and this project will ensure that the architectural features are rehabilitated and preserved.
- *Dennis is a resort town, and it is intended to be attractive to our visitors and part-time residents who help pay our bills and who expect our community to change, but to be unsullied by uncontrolled development.*

  The Cape Cinema is an economic driver for the town of Dennis. By ensuring that the Cape Cinema is protected and preserved, this project will help make certain that Dennis continues to be an attraction for tax-paying residents and visitors and be a positive determining factor for people to relocate to the town or to choose Dennis as a vacation destination.

CAPE COD CENTER FOR THE ARTS

PROJECT IMPLEMENTATION & BUDGET

21. Total CPA Funding Request: $275,000

22. A Financial Plan, which must include a line item budget:

Stage House Section of the Cape Playhouse

TREATMENT	CPA REQUEST	PRIVATE & CCCA FUNDING
Project Management	28,000	
Demo & site work	40,350	
Carpentry: White Cedar Clapboard Replacement for the entire building	103,250	
Wall Insulation	-	109,500
Flashing and glazing: windows & doors	8,000	
Exterior paint	86,400	
Mechanical adjustments (plumbing & electricity)	9,000	
Total	**275,000**	**109,500**

Please see the following photos of the Cape Cinema which indicate the general conditions of the building.

East Facade of the Cape Cinema


South Facade of the Cape Cinema - view visible from Route 6A

23. Evidence of interest from potential lenders: N/A

24. List of of other funding source(s), include private/public in-kind:

The CCCA has a commitment from Rober Rivers of $100,000 to help fund the project. (Please see supporting letter, age xx).

25. A five-year income and expenses plan for this project, if applicable: N/A

If the funds for this project are granted by the Dennis CPC and the Town of Dennis, it is our intention to commence and complete the scope of work within 12 to 16 months—as of the date when the funds have been approved.

SUPPORT DOCUMENTS

26. Letters of support from community organizations or other such sources: Please see pages 12 to 14 with letters from the following individuals.

i. Robert Rivers |Executive Chair | Eastern Bank

ii. Shirley Fennell | Longstanding Patron of the Cape Cod Center for the Arts Patron

iii. Christoher Merrill | VP Commercial Lender | Cape Cod Five

27. References:

i. Sanders, Walsh & Eaton, CPA's
68 Tupper Road, Unit 3
Sandwich, MA 02563
Attn: Ed Watts | Tel: 774.338.5444 | ew@swecpa.com

ii. Silva Accounting Professionals
261 Whites Path, Unit 5
South Yarmouth, MA 02664
Attn: Valerie de Silva | Tel. 508.398.9300 | tammy@capecodcfo.com

iii. Cape Cod Five Bank
1500 Iyannough Road
Hyannis, MA 02601
Attn: Christopher Merrill |508-247-2253 |cmerrill@capecodfive.com

CAPE COD CENTER FOR THE ARTS

28. Other relevant materials specific to the project: NA,

29. Copy of the most recent US Income Tax Form 990: Please see pages 17 to 32.

30. Certificate of Non-Collusion: Please see page 33

31. Document entitled "Application Submitted By": Please see page 34.

Eastern Bank
125 High Street
Oliver Tower, Suite 901
Boston, MA 02110

May 2, 2025

Dennis Community Preservation Committee
Town Hall
685 Route 134
South Dennis, MA 02660

Dear Members of the Dennis Community Preservation Committee :

As Chair of Board of Eastern Bank, a Dennis homeowner for over 20 years, and as someone who deeply values the importance of arts and culture in our communities, I am writing to express my strong support for the Cape Cod Center for the Arts' application for Community Preservation Committee (CPC) funding to support the restoration of the historic Cape Cinema.

The Cape Cinema is a cultural landmark and plays a vital role in sustaining the creative spirit of Dennis. For nearly a century, it has brought world-class film, music, and performance to residents and visitors alike. The Cinema is not only a treasured institution, but also a driver of economic vitality and community cohesion within Dennis Village.

Recognizing the significance of this project, I have personally committed $100,000 toward the restoration effort. I believe that this investment will help preserve an irreplaceable part of the town's cultural heritage while ensuring that future generations can continue to experience the transformative power of the arts in this historic setting.

I urge the Committee to fully support this application. Restoration of the Cape Cinema is not only consistent with the goals of the CPC, but it is also an investment in the long-term vibrancy and distinctiveness of the Town of Dennis.

Thank you for your thoughtful consideration.

Sincerely,

Robert F. Rivers
Executive Chair
Eastern Bank

Shirley Fennell
P.O. Box 742
East Dennis, MA 02641

May 2, 2025

Dennis Community Preservation Committee
Town Hall
685 Route 134
South Dennis, MA 02660

Re: Letter of Support – Cape Cinema Restoration Grant Application

Dear Members of the Community Preservation Committee,

I am writing to express my enthusiastic support for the Cape Cod Center for the Arts' application for Community Preservation Committee funding to support the restoration of the Cape Cinema in Dennis.

As a longtime patron of the Cape Cod Center for the Arts and a homeowner in East Dennis, I have witnessed firsthand the incredible cultural, educational, and economic value that the Center—and particularly the Cape Cinema and Cape Playhouse—bring to our community. My family has been deeply connected to Cape Cod for many years, both as homeowners and local business owners, and we remain committed to supporting the preservation of its rich artistic legacy.

Over the years, I have had the privilege of supporting the Center's ongoing efforts to maintain and improve its historic campus. Most recently, I contributed toward the replacement of the auditorium roof on the Cape Playhouse and supported enhancements to the entrance area—projects that have significantly improved both the safety and visual appeal of this beloved institution.

The Cape Cinema is a vital and iconic part of Dennis's cultural fabric,and it deserves thoughtful restoration. I believe this project aligns beautifully with the values and intent of the Community Preservation Act, preserving an irreplaceable piece of our shared history while ensuring it remains accessible and relevant for generations to come.

I strongly urge you to support this grant request and help sustain the Cape Cod Center for the Arts in its mission to enrich our community through the arts.

With appreciation,

Shirley Fennell

Shirley Fennell

CAPE COD 5

May 2, 2025

Dennis Community Preservation Committee
Town Hall
685 Route 134
South Dennis, MA 02660

Re: Letter of Support for Cape Cinema Restoration Grant Application

Dear Members of the Dennis Community Preservation Committee,

On behalf of Cape Cod Five, I am pleased to offer our strong support for the Cape Cod Center for the Arts' application for the Dennis Community Preservation Committee funding toward the restoration of the historic Cape Cinema.

As a longstanding community-focused financial institution, Cape Cod Five recognizes the essential role that arts and culture play in maintaining the vitality, identity, and economic health of our region. The Cape Cinema is a cultural landmark that not only serves the residents of Dennis, but also attracts visitors and artists from across the Cape and beyond.

We have been proud to partner with the Cape Cod Center for the Arts in recent efforts to strengthen its infrastructure—most recently through financing the acquisition of a nearby property on Hope Lane, which will be serving as housing for visiting performers. This type of investment helps ensure the sustainability of the performing arts on Cape Cod.

We fully support the Center's vision to restore and preserve the Cape Cinema for future generations, and we believe this project aligns closely with the objectives of the Community Preservation Act.

Thank you for your thoughtful consideration of this important initiative.

Sincerely,

Christopher T Merrill

Christopher Merrill
Vice President, Commercial Lending
Cape Cod Five Savings Bank
Tel: 508-247-2253 | cmerrill@capecodfive.com

CCCA1 02/17/2025 5:50 PM

Form **990** Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No. 1545-0047 **2023** Open to Public Inspection

A For the 2023 calendar year, or tax year beginning , and ending

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

C Name of organization: Cape Cod Center for the Arts, Inc.

Doing business as

Number and street (or P.O. box if mail is not delivered to street address): PO Box 2001 Room/suite

City or town, state or province, country, and ZIP or foreign postal code: Dennis MA 02638

D Employer identification number: 04-3334834

E Telephone number: 508-385-3838

G Gross receipts $ 3,853,437

F Name and address of principal officer: Linda DeRuvo-Keegan, 1888 Old Kings Highway, East Dennis MA 02641

H(a) Is this a group return for subordinates? [ ] Yes [X] No

H(b) Are all subordinates included? [ ] Yes [ ] No If "No," attach a list. See instructions

I Tax-exempt status: [X] 501(c)(3) [ ] 501(c) ( ) (insert no.) [ ] 4947(a)(1) or [ ] 527

J Website: www.capecodcenterforthearts.org

H(c) Group exemption number

K Form of organization: [X] Corporation [ ] Trust [ ] Association [ ] Other

L Year of formation: 1996 M State of legal domicile: MA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: Promote public education.

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

3 Number of voting members of the governing body (Part VI, line 1a)	3	8
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	8
5 Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	116
6 Total number of volunteers (estimate if necessary)	6	0
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	7,525
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0

	Prior Year	Current Year
Revenue		
8 Contributions and grants (Part VIII, line 1h)	1,327,713	1,017,462
9 Program service revenue (Part VIII, line 2g)	1,681,609	2,523,269
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,586	13,854
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	174,182	262,455
12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,186,090	3,817,040
Expenses		
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)		0
14 Benefits paid to or for members (Part IX, column (A), line 4)		0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,220,054	1,275,995
16a Professional fundraising fees (Part IX, column (A), line 11e)		0
b Total fundraising expenses (Part IX, column (D), line 25) 183,492		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	1,909,659	2,195,606
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	3,129,713	3,471,601
19 Revenue less expenses. Subtract line 18 from line 12	56,377	345,439
Net Assets or Fund Balances	**Beginning of Current Year**	**End of Year**
20 Total assets (Part X, line 16)	3,518,923	3,891,825
21 Total liabilities (Part X, line 26)	1,188,594	1,217,923
22 Net assets or fund balances. Subtract line 21 from line 20	2,330,329	2,673,902

Part II Signature Block

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

Sign Here

Signature of officer Date

Dennis Corcoran Treasurer

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check [ ] if self-employed	PTIN
Joseph F. McGee, CPA	Joseph F. McGee, CPA	02/17/25		P01584870

Firm's name: Sanders, Walsh & Eaton, CPAs, LLC Firm's EIN: 84-1894608

Firm's address: PO Box F, Osterville, MA 02655 Phone no. 508-428-0790

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

For Paperwork Reduction Act Notice, see the separate instructions.

DAA

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:

Promote public education.

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

If "Yes," describe these new services on Schedule O.

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

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses $ 2,863,211 including grants of $) (Revenue $ 2,523,269)

Promote and maintain, for the educational benefit of the public, film, seasonal theater, and video art, literature, artifacts, films, pictures and memorabilia.

4b (Code:) (Expenses $ including grants of $) (Revenue $)

N/A

4c (Code:) (Expenses $ including grants of $) (Revenue $)

N/A

4d Other program services (Describe on Schedule O.)

(Expenses $ 114,519 including grants of $) (Revenue $)

4e Total program service expenses 2,977,730

16.

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? *If "Yes," complete Schedule C, Part III*	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		X
c	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d	X	
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	16		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I.* See instructions	17		X
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	X	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21		X

17.

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of any individual described in line 28a? *If "Yes," complete Schedule L, Part IV*	28b		X
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in noncash contributions? *If "Yes," complete Schedule M*	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? **Note:** All Form 990 filers are required to complete Schedule O.	38	X	

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 ☐

					Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	31			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c		

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

				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 116			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	X	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?		3a	X	
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation on Schedule O*		3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		X
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b		
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?		7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h		X
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		8		
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	**Section 501(c)(7) organizations.** Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state? **Note:** See the instructions for additional information the organization must report on Schedule O.		13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation on Schedule O*		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.		15		X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.		16		X
17	**Section 501(c)(21) organizations.** Did the trust, any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.		17		

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

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

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
b	Describe on 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*	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe on Schedule O how this was done*	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	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	15a	X	
b	Other officers or key employees of the organization. If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	15b	X	
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?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed MA

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.

[ ] 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.

Dennis Corcoran 118 Sea Street
East Dennis MA 02641 508-385-3838

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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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 the 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 dotted line)	(C) Position: Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) William Templeton Trustee	1.00 0.00	X		X				0	0	0
(2) Linda DeRuvo-Keegan President	2.00 0.00	X		X				0	0	0
(3) William Harpin Trustee	1.00 0.00	X		X				0	0	0
(4) Dennis Corcoran Treasurer	2.00 0.00	X		X				0	0	0
(5) Paul Lambert Trustee	1.00 0.00	X						0	0	0
(6) John Juntis, Jr. Clerk	2.00 0.00	X						0	0	0
(7) Kathryn H Dunford Trustee	1.00 0.00	X						0	0	0
(8) Laura Toy Trustee	1.00 0.00	X						0	0	0
(9) Nora Carey Executive Director	40.00 0.00	X		X				114,519	0	15,165
(10)										
(11)										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(12)										
(13)										
(14)										
(15)										
(16)										
(17)										
(18)										
(19)										
1b Subtotal								114,519		15,165
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								114,519		15,165

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 1

			Yes	No
3	Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3		X
4	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? *If "Yes," complete Schedule J for such individual*	4		X
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	5		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

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization 0

Part VIII Statement of Revenue

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

			Business Code				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns		1a						
	b	Membership dues		1b						
	c	Fundraising events		1c						
	d	Related organizations		1d						
	e	Government grants (contributions)		1e						
	f	All other contributions, gifts, grants, and similar amounts not included above		1f	1,017,462					
	g	Noncash contributions included in lines 1a-1f		1g	$					
	h	**Total.** Add lines 1a–1f					1,017,462			
Program Service Revenue			Business Code							
	2a	Box office					2,515,744	2,515,744		
	b	Advertising	541800				7,525		7,525	
	c									
	d									
	e									
	f	All other program service revenue								
	g	**Total.** Add lines 2a–2f					2,523,269			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)					15,387	14,802		585
	4	Income from investment of tax-exempt bond proceeds								
	5	Royalties								
					(i) Real	(ii) Personal				
	6a	Gross rents		6a						
	b	Less: rental expenses		6b						
	c	Rental inc. or (loss)		6c						
	d	Net rental income or (loss)								
					(i) Securities	(ii) Other				
	7a	Gross amount from sales of assets other than inventory		7a						
	b	Less: cost or other basis and sales exps.		7b	1,533					
	c	Gain or (loss)		7c	-1,533					
	d	Net gain or (loss)					-1,533	-1,533		
	8a	Gross income from fundraising events (not including $ of contributions reported on line 1c). See Part IV, line 18		8a	144,650					
	b	Less: direct expenses		8b	34,864					
	c	Net income or (loss) from fundraising events					109,786			
	9a	Gross income from gaming activities. See Part IV, line 19		9a						
	b	Less: direct expenses		9b						
	c	Net income or (loss) from gaming activities								
	10a	Gross sales of inventory, less returns and allowances		10a	65,046					
	b	Less: cost of goods sold		10b						
	c	Net income or (loss) from sales of inventory					65,046	65,046		
Miscellaneous Revenue			Business Code							
	11a	Rental					43,996			43,996
	b	Other income					43,627			43,627
	c									
	d	All other revenue								
	e	**Total.** Add lines 11a–11d					87,623			
	12	**Total revenue.** See instructions					3,817,040	2,594,059	7,525	88,208

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
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	114,519	114,519		
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,033,931	804,239	114,847	114,845
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	23,119	18,495	2,312	2,312
10 Payroll taxes	104,426	83,540	10,443	10,443
11 Fees for services (nonemployees):				
a Management				
b Legal	2,437		2,437	
c Accounting	95,694		95,694	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 Advertising and promotion	160,370	125,452	17,459	17,459
13 Office expenses	23,381	18,705	2,338	2,338
14 Information technology				
15 Royalties	234,252	234,252		
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	28,754		28,754	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	79,479	63,583	7,948	7,948
23 Insurance	97,160	77,730	9,715	9,715
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a Production	939,150	939,150		
b Bank & credit card fees	300,103	300,103		
c Repairs & maintenance	80,199	64,159	8,020	8,020
d Utilities	53,760	43,008	5,376	5,376
e All other expenses	100,867	90,795	5,036	5,036
25 **Total functional expenses.** Add lines 1 through 24e	3,471,601	2,977,730	310,379	183,492
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				

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
Assets	1	Cash—non-interest-bearing			1	
	2	Savings and temporary cash investments		1,039,073	2	783,794
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		23,620	4	36,179
	5	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			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		196,178	9	82,170
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 2,915,647			
	b	Less: accumulated depreciation	10b 1,104,795	1,381,676	10c	1,810,852
	11	Investments—publicly traded securities		152,761	11	511,663
	12	Investments—other securities. See Part IV, line 11			12	
	13	Investments—program-related. See Part IV, line 11			13	
	14	Intangible assets		91,801	14	89,369
	15	Other assets. See Part IV, line 11		633,814	15	577,798
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)		3,518,923	16	3,891,825
Liabilities	17	Accounts payable and accrued expenses		15,527	17	22,839
	18	Grants payable			18	
	19	Deferred revenue		131,833	19	148,403
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
	22	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			22	
	23	Secured mortgages and notes payable to unrelated third parties		518,084	23	533,372
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	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		523,150	25	513,309
	26	**Total liabilities.** Add lines 17 through 25		1,188,594	26	1,217,923
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here** ☒ **and complete lines 27, 28, 32, and 33.**				
	27	Net assets without donor restrictions		2,221,121	27	2,673,902
	28	Net assets with donor restrictions		109,208	28	
		Organizations that do not follow FASB ASC 958, check here ☐ **and complete lines 29 through 33.**				
	29	Capital stock or trust principal, or current funds			29	
	30	Paid-in or capital surplus, or land, building, or equipment fund			30	
	31	Retained earnings, endowment, accumulated income, or other funds			31	
	32	Total net assets or fund balances		2,330,329	32	2,673,902
	33	Total liabilities and net assets/fund balances		3,518,923	33	3,891,825

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,817,040
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,471,601
3	Revenue less expenses. Subtract line 2 from line 1	3	345,439
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,330,329
5	Net unrealized gains (losses) on investments	5	-1,867
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	1
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	2,673,902

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other If the organization changed its method of accounting from a prior year or checked "Other," explain on 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	2a		X
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	2b	X	
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.	2c	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	3a	X	
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	3b	X	

SCHEDULE A (Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
Attach to Form 990 or Form 990-EZ.
Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047
2023
Open to Public Inspection

Name of the organization	Employer identification number
Cape Cod Center for the Arts, Inc.	04-3334834

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

1 [ ] A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 [ ] A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)

3 [ ] A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 [ ] A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:

5 [ ] An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 [ ] A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 [ ] An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 [ ] A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 [ ] An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:

10 [X] An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

11 [ ] An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

12 [ ] An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

- a [ ] **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b [ ] **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c [ ] **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d [ ] **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e [ ] Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 **Total support.** Add lines 7 through 10						

12 Gross receipts from related activities, etc. (see instructions) 12

13 **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

14 Public support percentage for 2023 (line 6, column (f) divided by line 11, column (f)) 14 %

15 Public support percentage from 2022 Schedule A, Part II, line 14 15 %

16a **33 1/3% support test — 2023.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

b **33 1/3% support test — 2022.** 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 **stop here.** The organization qualifies as a publicly supported organization ☐

17a **10%-facts-and-circumstances test — 2023.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ☐

b **10%-facts-and-circumstances test — 2022.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ☐

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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	704,107	837,583	1,141,264	1,327,713	1,017,462	5,028,129
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	1,970,414	69,895	306,851	1,797,731	2,740,242	6,885,133
3 Gross receipts from activities that are not an unrelated trade or business under section 513			49,674	87,563	87,623	224,860
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5	2,674,521	907,478	1,497,789	3,213,007	3,845,327	12,138,122
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support.** (Subtract line 7c from line 6.)						12,138,122

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6	2,674,521	907,478	1,497,789	3,213,007	3,845,327	12,138,122
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	830	899	1,275	1,325	585	4,914
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	830	899	1,275	1,325	585	4,914
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on	1,302					1,302
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 **Total support.** (Add lines 9, 10c, 11, and 12.)	2,676,653	908,377	1,499,064	3,214,332	3,845,912	12,144,338

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

15	Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f))	15	99.95 %
16	Public support percentage from 2022 Schedule A, Part III, line 15	16	99.93 %

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2023** (line 10c, column (f), divided by line 13, column (f))	17	%
18	Investment income percentage from **2022** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests — 2023.** 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 — 2022.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations *(continued)*

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

Section B. Type I Supporting Organizations

			Yes	No
1	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? *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.*	**1**		
2	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? *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.*	**2**		

Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *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).*	**1**		

Section D. All Type III Supporting Organizations

			Yes	No
1	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?	**1**		
2	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? *If "No," explain in **Part VI** how the organization maintained a close and continuous working relationship with the supported organization(s).*	**2**		
3	By reason of the relationship described on 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? *If "Yes," describe in **Part VI** the role the organization's supported organizations played in this regard.*	**3**		

Section E. Type III Functionally Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (**see instructions**).*

a ☐ The organization satisfied the Activities Test. *Complete **line 2** below.*

b ☐ The organization is the parent of each of its supported organizations. *Complete **line 3** below.*

c ☐ The organization supported a governmental entity. *Describe in **Part VI** how you supported a governmental entity (see instructions).*

			Yes	No
2	Activities Test. ***Answer lines 2a and 2b below.***			
a	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? *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.*	**2a**		
b	Did the activities described on 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? *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.*	**2b**		
3	Parent of Supported Organizations. ***Answer lines 3a and 3b below.***			
a	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? *If "Yes" or "No," provide details in **Part VI.***	**3a**		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in **Part VI** the role played by the organization in this regard.*	**3b**		

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 **Adjusted Net Income** (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 **Total** (add lines 1a, 1b, and 1c)	1d		
e **Discount** claimed for blockage or other factors (*explain in detail in* ***Part VI***):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 0.035.	6		
7 Recoveries of prior-year distributions	7		
8 **Minimum Asset Amount** (add line 7 to line 6)	8		

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 **Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

7 ☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

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

Section D – Distributions		**Current Year**
1 Amounts paid to supported organizations to accomplish exempt purposes	1	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4 Amounts paid to acquire exempt-use assets	4	
5 Qualified set-aside amounts (prior IRS approval required—*provide details in **Part VI***)	5	
6 Other distributions (*describe in **Part VI***). See instructions.	6	
7 **Total annual distributions.** Add lines 1 through 6.	7	
8 Distributions to attentive supported organizations to which the organization is responsive (*provide details in **Part VI***). See instructions.	8	
9 Distributable amount for 2022 from Section C, line 6	9	
10 Line 8 amount divided by line 9 amount	10	

Section E – Distribution Allocations (see instructions)	**(i)** **Excess Distributions**	**(ii)** **Underdistributions Pre-2023**	**(iii)** **Distributable Amount for 2023**
1 Distributable amount for 2023 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2023 (reasonable cause required–*explain in **Part VI***). See instructions.			
3 Excess distributions carryover, if any, to 2023			
a From 2018			
b From 2019			
c From 2020			
d From 2021			
e From 2022			
f **Total** of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2023 distributable amount			
i Carryover from 2018 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2023 from Section D, line 7: $			
a Applied to underdistributions of prior years			
b Applied to 2023 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, *explain in **Part VI***. See instructions.			
6 Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, *explain in **Part VI***. See instructions.			
7 **Excess distributions carryover to 2024.** Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2019			
b Excess from 2020			
c Excess from 2021			
d Excess from 2022			
e Excess from 2023			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

CERTIFICATE OF NON-COLLUSION

The undersigned certifies under penalties of perjury that this proposal has been made and submitted in good faith and without collusion or fraud with any other person. As used in this certification, the word "person" shall mean any natural person, business, partnership, corporation, union, committee, club, or other organization, entity, or group of individuals.

Chief Executive Officer(s):

NORA CAREY
Name (print)

Name (print)

Nora Carey
Signature

EXECUTIVE DIRECTOR
Title

APRIL 25, 2025
Date

Signature

Title

Date

APPLICATION SUBMITTED BY:

Name of Organization: CAPE COD CENTER FOR THE ARTS - FOR THE CAPE CINEMA

Address: 820 MAIN STREET

Phone Number: 508.385.3838

Email: nora@capeplayhouse.com

Chief Executive Officer: NORA CAREY

Signature: Nora Carey

Name: (if more than one) ______________________

Signature: ______________________