(Rev. January 2022)

Department of the Treasury Internal Revenue Service

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

File a separate application for each return.
 Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

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

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or Name of exempt organization or other filer, see in	nstructions.	Тахр	ayer identification numb	er (TIN)			
print MANHATTAN THEATRE CLUB, INC.			23-7086643				
File by the Number, street, and room or suite no. If a P.O. bo	ox, see instru	ctions.	20 /000010				
due date for filing your 311 WEST 43RD STREET							
return. See City, town or post office, state, and ZIP code. Fo	r a foreign ac	dress, see instructions.					
INEW YORK, NY 10036							
Enter the Return Code for the return that this application	n is for (file	a separate application for eac	ch return)	L	0 1		
Application	Return	Application		Re	eturn		
ls For	Code	Is For		<u>с</u>	ode		
Form 990 or Form 990-EZ	01	Form 1041-A			08		
Form 4720 (individual)	03	Form 4720 (other than ind	ividual)		09		
Form 990-PF	04	Form 5227			10		
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11		
Form 990-T (trust other than above)	06	Form 8870			12		
Form 990-T (corporation)	07						
 If the organization does not have an office or place of business in the United States, check this box							
 If the tax year entered in line 1 is for less than 12 n Change in accounting period 							
3a If this application is for Forms 990-PF, 990-T, nonrefundable credits. See instructions.			38	a \$	NONI		
	bIf this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.3b \$						
c Balance due. Subtract line 3b from line 3a. Ir using EFTPS (Electronic Federal Tax Payment System	-		if required, by		NON		
Caution: If you are going to make an electronic funds withdraw nstructions.				Ŧ			
For Privacy Act and Panerwork Reduction Act Notice, see inst				rm 8868 (Rev			

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

Form 8868 (Rev. 1-2022)

Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

Open to Public

G

OMB No. 1545-0047

		of the Treasury enue Service		rm990 for instructions a			•			nspect	
			ndar year, or tax year beginning		l ending		~	06	/30/20		
	e . ui		C Name of organization				D		er identifica		mber
B	Check if a	applicable:	MANHATTAN THEATRE CLUB, INC	I							
	Addres	ss change	Doing business as	•				23-70	86643		
	ł	change	Number and street (or P.O. box if mail is not deliv	vered to street address)		Room/su			ne number		
	Initial		311 WEST 43RD STREET					(212)	399-30	100	
	+	eturn/terminated	City or town, state or province, country, and ZIP	or foreign postal code			G	Gross re		700	
	Ameno	ded return	NEW YORK, NY 10036	5 1					31,61	1 85	18
	Applic	ation pending	.	S JENNINGS			H(a) Is this a	group return		Yes	X No
]		311 WEST 43RD STREET, NEW Y				subordin H(b) Are all s		included?	Yes	No
<u> </u>	Тах-ех	kempt status:		nsert no.) 4947(a)(1)	or	527			list. See insti	J L	
	Webs		W.MTC-NYC.ORG	113eit 110.) 4347 (a)(1)	0	521	H(c) Group				
		of organizatio		Other	I Yea	or of format	ion: 1970			micile [.]	NY
	artl	Summ		Culoi	12100			in olate	on logal do		
	1		cribe the organization's mission or most sign	ificant activities: MANH2	ΔΤΤΔΝ Τ	HEATR	E CLUB	TNC	TS A		
e		•	G PRODUCER OF NEW WORKS ALO	-				1110.	ID A		
anc							0.				
Governance	2	Check this	box if the organization discontinue	d its operations or di	sposed of	more t	han 25%	ofits	net asset		
Š	3		voting members of the governing body (Part							5.	36
	4		independent voting members of the governi								33
ties	5		per of individuals employed in calendar year 2								813
Activities &	6		per of volunteers (estimate if necessary)								736
Act	-		ated business revenue from Part VIII, column								NONE
			ted business taxable income from Form 990-7								NONE
	-					<u> </u>	Prior Yea		Cur	rent Ye	
	8	Contributi	ns and grants (Part VIII, line 1h)				19,435			,587,	
nue	9		ervice revenue (Part VIII, line 2g)				9,083			,881,	
Revenue	10		t income (Part VIII, column (A), lines 3, 4, and					,297.			,189.
Ř	11		nue (Part VIII, column (A), lines 5, 6d, 8c, 9c,					,618.			,476.
	12		nue - add lines 8 through 11 (must equal Part				28,652		26	,877,	
	13		I similar amounts paid (Part IX, column (A), lin					NONE			NONE
	14		aid to or for members (Part IX, column (A), line					NONE			NONE
Ś	45		ther compensation, employee benefits (Part I)				12,683			,590,	934.
Expenses	16a		al fundraising fees (Part IX, column (A), line 1					,061.			,050.
pel	b		aising expenses (Part IX, column (D), line 25)			•		,			
ш	17		enses (Part IX, column (A), lines 11a-11d, 11f-			-	14,165	,098.	14	,346,	628.
	18		nses. Add lines 13-17 (must equal Part IX, co				27,620			,536,	
	19		ess expenses. Subtract line 18 from line 12				1,032			,658,	
ses	_						ning of Curr			l of Year	
sets lanc	20 21 22	Total asse	s (Part X, line 16)				86,929	,772.	91.	,418,	254.
Ass ABa	21		ties (Part X, line 26)				38,620			,179,	
Net	22		or fund balances. Subtract line 21 from line 2	20			48,309			, 238,	
Pa	art II		ure Block								
Un	der pe	nalties of pe	jury, I declare that I have examined this return, ind	cluding accompanying sched	lules and sta	atements, a	and to the be	est of my	knowledge	and be	lief, it is
tru	e, corre	ect, and com	lete. Declaration of preparer (other than officer) is b	ased on all information of wh	ich preparer	has any kr	nowledge.				
							0	5/15/	2024		
Sig		Signature o	officer				Date	-, -,	-		
Не	re	CHRIS	JENNINGS	EXECU	TIVE DI	RECTO	R				
			t name and title								
		Print/Type	preparer's name Preparer's	signature	Date		Check	if	PTIN		
Paio		CATHER	INE BENDALL CPA CATHER	INE BENDALL C	P 05/3	15/202			P00521	196	
	parer	Firm's par					Firm's EIN 22-202				
Use	e Only	Firm's add		R NEW YORK, NY 1	L0018		Phone no.		12-751		0
Ma	y the		ss this return with the preparer shown a							es	No
_			Iction Act Notice, see the separate instruction								(2022)
	-										

MANHATTAN THEATRE CLUB, II	NC.
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For	rm 990 (2022)		Page 2
Ρ	art III Statement of Program Service Accomplishments		
1	Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission:	<u></u>	Х
•	SEE SCHEDULE O		
_			
2	Did the organization undertake any significant program services during the year wh 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 pro	ogram
	services?		Yes X No
4	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its the	ree largest program	services as measured by
•	expenses. Section $501(c)(3)$ and $501(c)(4)$ organizations are required to report the total expenses, and revenue, if any, for each program service reported.		
4a	a (Code:) (Expenses \$1,321,419including grants of \$) (Revenue \$	10,756,135.)
	SEE SCHEDULE O	,(/
4b	b (Code:) (Expenses \$ 1,145,721. including grants of \$) (Revenue \$	125,525.)
	SEE SCHEDULE O	/、、	,
4c	c (Code:) (Expenses \$ 895,244. including grants of \$) (Revenue \$)
	SEE SCHEDULE O		
4d	d Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)	
-	e Total program service expenses 23,362,384.		
JSA 2E1	^A 1020 1.000 3456LU L44A 05/15/2024 10:14:06 V22-7.11 9052839		Form 990 (2022) 6
	JAJUHU HAAA UJ/LJ/GUGA LU·LA·UU VGG-/.LL VUJGOJV		U

Form 990 (2022)

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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	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		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			37
7	"Yes," complete Schedule D, Part I. Did the organization receive or hold a conservation easement, including easements to preserve open space,	6		Х
7	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		v
0	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	_		Х
8	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	o		
9	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	9		
10	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,		21	
••	VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
-	complete Schedule D, Part VI	11a	х	
b	Did the organization report an amount for investments-other securities in Part X, line 12, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
с	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		х
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	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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	Х	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII.	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		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			ĺ
40	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?	40		77
20-	If "Yes," complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		X
р 21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	20b		<u> </u>
4 I	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x
JSA			990	(2022)
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Form **990** (2022) **7**

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Form 9	MANHATTAN THEATRE CLUB, INC. 23-7086	643	F	- Page 4
Part				
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
24 2	employees? If "Yes," complete Schedule J. Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	23	X	
24 a	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
Ь	to defease any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	240		
204	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
26	<i>If "Yes," complete Schedule L, Part I</i> Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	25b		X
26	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		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these	07		37
28	persons? If "Yes," complete Schedule L, Part III	27		X
20	Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	X	<u> </u>
С	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	х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	200	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		Х
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,"	22		37
33	<i>complete Schedule N, Part II</i> . Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		X
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34	Х	
	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		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	550		<u></u>
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
_	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and	20	77	
Part	 19? Note: All Form 990 filers are required to complete Schedule O	38	Х	
r art	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 175	-		
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
JSA 2E1030			990	(2022)
1030	3456LU L44A 05/15/2024 10:14:06 V22-7.11 9052839		8	

Form	990 (2022)		F	Page 5					
Par	t 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 813								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х						
	3a Did the organization have unrelated business gross income of \$1,000 or more during the year?								
	b If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i>								
	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		Х					
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		Х					
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х					
	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		Х					
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).								
а	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	Х						
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х						
С	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								
е	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?								
f	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?								
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g							
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h							
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.								
	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:								
	Initiation fees and capital contributions included on Part VIII, line 12 10a								
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b								
	Section 501(c)(12) organizations. Enter:								
	Gross income from members or shareholders								
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)								
40-		12a							
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	120							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.								
	Is the organization licensed to issue qualified health plans in more than one state?	13a							
a	Note: See the instructions for additional information the organization must report on Schedule O.								
h	Enter the amount of reserves the organization is required to maintain by the states in which								
N	the organization is licensed to issue qualified health plans								
c	Enter the amount of reserves on hand								
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х					
	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?	15		Х					
	If "Yes," see the instructions and file Form 4720, Schedule N.								
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х					
-	If "Yes," complete Form 4720, Schedule O.								
17	Section 501(c)(21) organizations. Did the trust, or 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?	17							
	If "Yes," complete Form 6069.								

Form 9	90 (202	2) MANHATTAN THEATRE CLUB, INC. 23-7086	643	F	Page 6
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.			
		Check if Schedule O contains a response or note to any line in this Part VI			Х
Sect	ion A.	Governing Body and Management			
		<u></u>		Yes	No
10	Entor	the number of voting members of the governing body at the end of the tax year 1a 36			
Id		e 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			
		ittee, explain on Schedule O. the number of voting members included on line 1a, above, who are independent 1b 33			
D					
2		ny officer, director, trustee, or key employee have a family relationship or a business relationship with	2		x
	•	her officer, director, trustee, or key employee?	2		
3		e organization delegate control over management duties customarily performed by or under the direct	2		v
		vision of officers, directors, trustees, or key employees to a management company or other person?	3 4		X
4		e organization make any significant changes to its governing documents since the prior Form 990 was filed?	4 5		X X
5		e organization become aware during the year of a significant diversion of the organization's assets?	5 6		
6		e organization have members or stockholders?	o		X
7a		e organization have members, stockholders, or other persons who had the power to elect or appoint	-		
		r more members of the governing body?	7a		X
b		any governance decisions of the organization reserved to (or subject to approval by) members,			
		nolders, or persons other than the governing body?	7b		X
8		e organization contemporaneously document the meetings held or written actions undertaken during			
	the ye	ar by the following:			
а		overning body?	8a	Х	
b	Each	committee with authority to act on behalf of the governing body?	8b	Х	
9	Is the	re any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
		ganization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X
Secti	on B.	Policies (This Section B requests information about policies not required by the Internal Revenue	Code	/	
				Yes	No
10a		e organization have local chapters, branches, or affiliates?	10a		X
b	lf "Yes	s," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliat	es, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the	e organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Descr	ibe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did th	e organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were	officers, directors, or trustees, and key employees required to disclose annually interests that could give			
		conflicts?	12b	X	
С	Did th	ne organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	descri	ibe on Schedule O how this was done	12c	Х	
13	Did th	e organization have a written whistleblower policy?	13	Х	
14	Did th	e organization have a written document retention and destruction policy?	14	Х	
15	Did th	ne process for determining compensation of the following persons include a review and approval by			
	indep	endent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The o	rganization's CEO, Executive Director, or top management official	15a	Х	
b	Other	officers or key employees of the organization	15b	Х	
	lf "Yes	s" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did th	e organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a	taxable entity during the year?	16a		Х
b	If "Yes	s," did the organization follow a written policy or procedure requiring the organization to evaluate its			
		ipation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organ	ization's exempt status with respect to such arrangements?	16b		
Secti	on C.	Disclosure			
17	List th	e states with which a copy of this Form 990 is required to be filedCA , CT , DC , FL , MD , MA , NJ , NY , PA	,TX	, VA,	
18	Sectio	on 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T	(sec	tion 5	01(c)
	<u>(3)s</u> o	nly) available for public inspection. Indicate how you made these available. Check all that apply.		-	x - 7
	X	Own website X Another's website X Upon request Other <i>(explain on Schedule O)</i>			
19	Descr	ibe on Schedule O whether (and if so, how) the organization made its governing documents, conflict o	f inter	est n	olicv
-		nancial statements available to the public during the tax year.		6	- , ,
20		the name, address, and telephone number of the person who possesses the organization's books and record	s		
		S JENNINGS 311 WEST 43RD STREET NEW YORK, NY 10036	-		
		399-3000	Form	990	(2022)
JSA 2E1042	1 000				. /
042	2450	TH T 447 OF /1F /2024 10.14.0C 1222 7 11 00F2020		10	

Page 7

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

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 the 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.

					C)					_
(A)	(B)	(do r	Position (do not check more than one				200	(D)	(E)	(F)
Name and title	Average hours	box, unless person is both an				Reportable compensation	Reportable compensation	Estimated amount of other		
	per week	· ·				or/trust		from the	from related	compensation
	(list any	우파	Б	Q	2	g <u>∓</u>	Г	organization (W-2/	organizations (W-2/	from the
	hours for related	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	1099-MISC/ 1099-NEC)	1099-MISC/ 1099-NEC)	organization and related organizations
	organizations	lual	tiona	7	nplo	st co yee		1099-NEC)	1099-NEC)	Telated organizations
	below	trust	altru		yee	mpe				
	dotted line)	ee	Istee			ensa				
						ted				
(1) BARRY GROVE	40.00									F1 001
EXEC. PRODUCER THRU 06/2023	NONE	X		Х				598,515.	NONE	51,291.
(2) CAROLYN MEADOW	40.00									2.0.01.0
ARTISTIC DIRECTOR	NONE	X		Х				505,758.	NONE	30,819.
(3) LYNNE S. RANDALL	40.00					37		176 570		20.000
DIRECTOR OF DEVELOPMENT	NONE					X		176,579.	NONE	39,000.
(4) MATTHEW D. SVIGALS	40.00							100 100		F0 014
DIRECTOR OF FINANCE	NONE				X			126,480.	NONE	59,914.
(5) AMY G. LOE DIR. OF ARTISTIC OPERATIONS	40.00 NONE					37		102 602	NONE	CD 400
(6) DEBRA A. WAXMAN-PILLA	40.00					X		123,603.	NONE	62,498.
DIRECTOR OF MARKETING	NONE					x		122,655.	NONE	41,961.
(7) JEFFREY W. DODSON	40.00							122,055.	NONE	41,901.
MASTER ELECTRICIAN	NONE					x		152,169.	NONE	NONE
(8) SCOTT C. LAULE	40.00							152,105.	NONE	INCINE
HEAD PROPERTYMAN	NONE					x		131,436.	NONE	10,501.
(9) LINDSEY B. SAG	40.00									10,301.
GENERAL MANAGER	NONE	-			x			87,113.	NONE	54,643.
(10) JUDY TATE	0.50							01,1101		0170101
DIRECTOR/TEACHING ARTIST	NONE	x						14,484.	NONE	NONE
(11) DAVID HODGSON	2.00									
CHAIRMAN	NONE	x		Х				NONE	NONE	NONE
(12) TOM SECUNDA	2.00									
PRESIDENT	NONE	x		Х				NONE	NONE	NONE
(13) JAMIE FOWLER	2.00									
SECRETARY	NONE	X		Х				NONE	NONE	NONE
(14) NIGEL SMITH	2.00									
TREASURER	NONE	Х		Х				NONE	NONE	NONE
										Form 990 (2022)

Form 990 (2022) Part VII Section A. Officers, Directors,	Trustees Ke	v Fn	nlo	Ver	25	and H	lial	hest Compensat	ed Employees (Page 8
(A)	(B)	y L 11	ipic	(0	C)		iigi	(D)	(E)	(F)
Name and title	Average hours per week (list any hours for	box, office	unles er and	heck ss pe d a d	rson lirect	e than c is both or/trust	an ee)	Reportable compensation from the	Reportable compensation from related organizations	Estimated amount of other compensation
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(15) CHRISTINE BARANSKI	0.50									
DIRECTOR	NONE	Х						NONE	NONE	NONE
(16) MARY BACCASH	0.50_	-								
DIRECTOR	NONE	Х						NONE	NONE	NONE
(17) LAURA BARON	0.50	-								
DIRECTOR	NONE	Х						NONE	NONE	NONE
(18) OPAL BENNETT	0.50									
DIRECTOR	NONE	Х						NONE	NONE	NONE
(19) MATTHEW BLANK	0.50									
DIRECTOR	NONE	Х						NONE	NONE	NONE
(20) BARBARA BRITT	0.50									
DIRECTOR	NONE	Х						NONE	NONE	NONE
(21) MARTHA LEMER BYRNE	0.50									
DIRECTOR	NONE	Х						NONE	NONE	NONE
(22) ASAD A. CHAUDRY	0.50									
DIRECTOR	NONE	Х						NONE	NONE	NONE
(23) GARY CHURGIN	0.50									
DIRECTOR	NONE	X						NONE	NONE	NONE
(24) HOWARD FIFE	0.50									
DIRECTOR	NONE	x						NONE	NONE	NONE
(25) MARIE GALLAGHER	0.50									
DIRECTOR	NONE	x						NONE	NONE	NONE
the Curb total								2,038,792.	NONE	350,627.
c Total from continuation sheets to Part V					• •	• • •	5	NONE		NONE
d Total (add lines 1b and 1c)	-				•••			2,038,792.	NONE	
2 Total number of individuals (including but	not limited to t				bove	e) who	· ·			
reportable compensation from the organiz	ation 🕨					22				

3	Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>
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
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

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of 1 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	
2	more than \$100,000 in compensation from the organization	e listed above) who received	

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Yes No

3

4

5

(A)	(B)			(0	C)			(D)	(E)	(F)
(A) Name and title	Average hours per week (list any hours for related organizations below dotted line)	box,	unles er and	Pos neck ss pe	ition more rson	e than c is both or/trust employee	an	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
		ee	Istee			insated				
26) MARY ANN GIFFUNI	0.50_	-								
DIRECTOR	NONE	X						NONE	NONE	NONE
27) JAKE GYLLENHAAL	0.50_									
DIRECTOR	NONE	X						NONE	NONE	NONE
28) ELIZABETH HANEY	0.50_									
DIRECTOR	NONE	X						NONE	NONE	NONE
29) DANIEL HEALY	0.50_									
DIRECTOR	NONE	X						NONE	NONE	NONE
30) CLYDE B. JONES III	0.50_									
DIRECTOR	NONE	X						NONE	NONE	NONE
31) CHRIS LANNING	0.50_									
DIRECTOR	NONE	X						NONE	NONE	NONE
32) HIROFUMI OTSUKA	0.50_									
DIRECTOR	NONE	X						NONE	NONE	NONE
33) BERNADETTE PETERS	0.50_									
DIRECTOR	NONE	X						NONE	NONE	NONE
34) GWENDOLYN RICKS-SPENCER	0.50_									
DIRECTOR	NONE	X						NONE	NONE	NONE
35) JEAN SCANNEL	0.50_									
DIRECTOR	NONE	X						NONE	NONE	NONE
36) ROBERT SINCLAIR	0.50_									
DIRECTOR	NONE	Х						NONE	NONE	NONI
1b Sub-total			• •							
c Total from continuation sheets to Part	•				• •					
d Total (add lines 1b and 1c)				• •	• •					

			Yes	No
3	Did the organization list any former officer, director, or trustee, key employee, or highest compensated			
	employee on line 1a? If "Yes," complete Schedule J for such individual	3		
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organizations greater than \$150,000? If "Yes," complete Schedule J for such			
	individual	4		
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		
6	action B. Independent Contractors			

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of 1 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 more than \$100,000 in compensation from the organization ►		

JSA 2E1055 1.000

(A)	(B)			(0	C)			(D)	(E)		(F)	
Name and title	Average hours per week (list any	box,	not ch unles:	Pos neck is pe	ition more rson	e than or is both a	an	Reportable compensation from	Reportable compensation from related	Estimate amount other compensa		of
	hours for related organizations below dotted line)	or director		Officer		or/truster Highest compensated employee	p Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	fr org an	pensat om the anizatio d relate anizatio	e on ed
7) JEFFREY SINE IRECTOR	0.50 NONE	x						NONE	NONE			NO
8) PETER SOLOMON IRECTOR	0.50 NONE	x						NONE	NONE			NC
9) MICHAEL STEINBERG IRECTOR	0.50 NONE	x						NONE	NONE			NC
0) NILAJA SUN IRECTOR	0.50 NONE	x						NONE	NONE			NC
1) LISA TOWBIN IRECTOR	0.50 NONE	x						NONE	NONE			N
2) JOEL VON RANSON IRECTOR	0.50 NONE	x						NONE	NONE	z :		N
3)_RICHARD_WESLEY IRECTOR	0.50_ NONE	x						NONE	NONE			N
4) CHRIS JENNINGS XEC. DIRECTOR AS OF 06/2023	0	-		х				NONE	NONE			N
 b Sub-total c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c) Total number of individuals (including but not reportable compensation from the organizatio 	ection A			• •	•••		► ► re	ceived more than	\$100,000 of			
Did the organization list any former offic employee on line 1a? If "Yes," complete Sched										3	Yes	N
For any individual listed on line 1a, is the organization and related organizations gr	sum of rep	ortab	le c	om	pen	sation	ar	nd other compens	sation from the			
<i>individual</i> Did any person listed on line 1a receive or	accrue co	mpen	satic	on f	from	n any	unr			4	X	
for services rendered to the organization? If "Y ection B. Independent Contractors	es," comple	te Sch	nedu	le J	l for	such p	oers	son	<u></u>	5		
Complete this table for your five highest com compensation from the organization. Report of year.												
								(B)		(C)		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization \blacktriangleright 17 JSA 2E1055 1.000

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Form 990 (2022)

MANHATTAN THEATRE CLUB, INC. Part VIII Statement of Revenue

Г ٦

		Check if Schedule O contains a respor	nse or note to an	y line in this Part V	/111		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts,	1a	Federated campaigns 1a					
ant	b	Membership dues					
ΩĔ	c	Fundraising events	1,583,799.				
fts, ır A	d	Related organizations					
<u>i</u> <u>i</u> <u>i</u>	е	Government grants (contributions) 1e	3,919,638.				
Sir	f	All other contributions, gifts, grants,					
er utio		and similar amounts not included above . 1f	10,084,118.				
<u>Ģ</u>	g	Noncash contributions included in					
Contributions, Gifts, Grants, and Other Similar Amounts		lines 1a-1f	\$ 289,442.				
<u>ה</u> 2	h	Total. Add lines 1a-1f		15,587,555.			
			Business Code				
Program Service Revenue	2a	BOX OFFICE & SUBSCRIPTION INCOME	711110	10,156,373.	10,156,373.		
lerv	b	RENTAL INCOME	611600	299,048.	299,048.		
n S eni	с	FACILITY FEE INCOME	711110	187,210.	187,210.		
Sev	d	SUBSIDIARY RIGHTS	711110	47,266.	47,266.		
5 E	е	EDUCATION INCOME	711110	125,525.	125,525.		
₽.	f	All other program service revenue	711110	66,238.	66,238.		
	g	Total. Add lines 2a-2f		10,881,660.			
	3	Investment income (including dividends,	interest, and				
		other similar amounts)	ſ	136,819.		NONE	136,819
	4	Income from investment of tax-exempt bond	•	NONE			
	5	Royalties	(ii) Personal	NONE			
	0.						
	6a	Gross rents 6a					
	b	Less: rental expenses 6b	e none				
	С Д		-	NONE			
	d 7a	Net rental income or (loss)	(ii) Other	INOME			
	10	sales of assets					
		other than inventory 7a 4,123,902.					
a	b	Less: cost or other basis					
evenue		and sales expenses 7b 4,128,532.					
eve	c	Gain or (loss) 7c -4,630.					
ч Ц	d	Net gain or (loss)		-4,630.			-4,630
Other	8a	Gross income from fundraising					
õ		events (not including \$2,189,265.					
		of contributions reported on line					
		1c). See Part IV, line 18	605,466.				
	b	Less: direct expenses	605,466.				
	с	Net income or (loss) from fundraising events					
	9a	Gross income from gaming					
		activities. See Part IV, line 19 9a	NONE				
	b	Less: direct expenses	NONE				
	c	Net income or (loss) from gaming activities.		NONE			
	10a	Gross sales of inventory, less					
		returns and allowances	NONE				
	b	Less: cost of goods sold 10b	NONE				
	c	Net income or (loss) from sales of inventory.		NONE			
sne			Business Code				
Miscellaneous Revenue	11a	REAL ESTATE TAXES REFUND	900099	276,476.	276,476.		
scellaneo Revenue	b						
Re	c						
Ň	d	All other revenue	L	196 A96			
	<u>е</u> 12	Total. Add lines 11a-11d		276,476. 26,877,880.	11,158,136.	NONE	132,189
	14			20,011,000.	±±,±00,±00.	TNOINE	1 134,109

Part IX Statement of Functional Expenses

 Do not include amounts reported on li 8b, 9b, and 10b of Part VIII. 1 Grants and other assistance to domestic and domestic governments. See Part IV, line 2 Grants and other assistance to individuals. See Part IV, line 22 3 Grants and other assistance to organizations, foreign government foreign individuals. See Part IV, lines 4 Benefits paid to or for members 5 Compensation of current officers, trustees, and key employees 6 Compensation not included above to persons (as defined under section 4958 (c)(3)(B 7 Other salaries and wages 8 Pension plan accruals and contributio section 401(k) and 403(b) employer con 9 Other employee benefits 10 Payroll taxes 11 Fees for services (nonemployees): a Management 	organizations he 21	(A) Total expenses NONE NONE NONE	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
 and domestic governments. See Part IV, lin Grants and other assistance to individuals. See Part IV, line 22 Grants and other assistance to organizations, foreign government foreign individuals. See Part IV, lines Benefits paid to or for members Compensation of current officers, trustees, and key employees Compensation not included above to persons described in section 4958(c)(3)(B Other salaries and wages Pension plan accruals and contribution section 401(k) and 403(b) employees Payroll taxes Fees for services (nonemployees): 	to foreign ents, and 15 and 16	NONE			
 Grants and other assistance to individuals. See Part IV, line 22 Grants and other assistance to organizations, foreign governme foreign individuals. See Part IV, lines Benefits paid to or for members Compensation of current officers, trustees, and key employees Compensation not included above to persons (as defined under section 495 persons described in section 4958(c)(3)(B Other salaries and wages Pension plan accruals and contributio section 401(k) and 403(b) employer control Other employee benefits Payroll taxes Fees for services (nonemployees): 	domestic to foreign ents, and 15 and 16	NONE			
 individuals. See Part IV, line 22 3 Grants and other assistance to organizations, foreign governme foreign individuals. See Part IV, lines 4 Benefits paid to or for members 5 Compensation of current officers, trustees, and key employees 6 Compensation not included above to persons (as defined under section 495 persons described in section 4958(c)(3)(B 7 Other salaries and wages 8 Pension plan accruals and contribution section 401(k) and 403(b) employer construction 9 Other employee benefits 10 Payroll taxes 11 Fees for services (nonemployees): 	to foreign ents, and 15 and 16	NONE			
 3 Grants and other assistance to organizations, foreign government foreign individuals. See Part IV, lines 4 Benefits paid to or for members 5 Compensation of current officers, trustees, and key employees 6 Compensation not included above to persons (as defined under section 495 persons described in section 4958(c)(3)(B 7 Other salaries and wages 8 Pension plan accruals and contribution section 401(k) and 403(b) employer complexes 10 Payroll taxes 11 Fees for services (nonemployees): 	to foreign ents, and 15 and 16	NONE			
 organizations, foreign governme foreign individuals. See Part IV, lines Benefits paid to or for members Compensation of current officers, trustees, and key employees Compensation not included above to persons (as defined under section 495 persons described in section 4958(c)(3)(B Other salaries and wages Pension plan accruals and contribution section 401(k) and 403(b) employer cruic Other employee benefits Payroll taxes Fees for services (nonemployees): 	ents, and 15 and 16				
 foreign individuals. See Part IV, lines Benefits paid to or for members Compensation of current officers, trustees, and key employees Compensation not included above to persons (as defined under section 4958(c)(3)(B Other salaries and wages Pension plan accruals and contribution section 401(k) and 403(b) employer or Other employee benefits Payroll taxes Fees for services (nonemployees): 	15 and 16				
 4 Benefits paid to or for members 5 Compensation of current officers, trustees, and key employees 6 Compensation not included above to persons (as defined under section 4958(c)(3)(B 7 Other salaries and wages 8 Pension plan accruals and contribution section 401(k) and 403(b) employer constrained of the section 401(k) and 403(b) employer constrained of the section 401 (k) and 403(b) for th					
 5 Compensation of current officers, trustees, and key employees 6 Compensation not included above to persons (as defined under section 495 persons described in section 4958(c)(3)(B 7 Other salaries and wages 8 Pension plan accruals and contribution section 401(k) and 403(b) employer control of the employee benefits 10 Payroll taxes 11 Fees for services (nonemployees): 					
 trustees, and key employees 6 Compensation not included above to persons (as defined under section 495 persons described in section 4958(c)(3)(B 7 Other salaries and wages 8 Pension plan accruals and contribution section 401(k) and 403(b) employer constraints 9 Other employee benefits 10 Payroll taxes 11 Fees for services (nonemployees): 	, arrectors,	тиОлид			
 6 Compensation not included above to persons (as defined under section 495 persons described in section 4958(c)(3)(B 7 Other salaries and wages 8 Pension plan accruals and contribution section 401(k) and 403(b) employer cr 9 Other employee benefits 10 Payroll taxes 11 Fees for services (nonemployees): 		1,659,164.	939,302.	360,508.	359,354
 persons (as defined under section 495 persons described in section 4958(c)(3)(B 7 Other salaries and wages 8 Pension plan accruals and contribution section 401(k) and 403(b) employer or 9 Other employee benefits 10 Payroll taxes 11 Fees for services (nonemployees): 		1,000,101.	555,502.	500,500.	
 persons described in section 4958(c)(3)(B 7 Other salaries and wages 8 Pension plan accruals and contribution section 401(k) and 403(b) employer cr 9 Other employee benefits 10 Payroll taxes 11 Fees for services (nonemployees): 					
 7 Other salaries and wages 8 Pension plan accruals and contribution section 401(k) and 403(b) employer or 9 Other employee benefits 10 Payroll taxes 11 Fees for services (nonemployees): 	.,.,,	NONE			
 8 Pension plan accruals and contribution section 401(k) and 403(b) employer or 9 Other employee benefits 10 Payroll taxes 11 Fees for services (nonemployees): 		8,665,414.	7,279,586.	621,281.	764,547
 section 401(k) and 403(b) employer of 9 Other employee benefits 10 Payroll taxes 11 Fees for services (nonemployees): 		372,922.	372,922.	021/2011	
 9 Other employee benefits 10 Payroll taxes			,		
10 Payroll taxes11 Fees for services (nonemployees):	·	1,918,399.	1,673,383.	107,279.	137,737
11 Fees for services (nonemployees):		975,035.	779,435.	90,115.	105,485
		NONE			
b Legal		83,014.	64,335.	18,679.	
c Accounting		123,259.		123,259.	
d Lobbying		30,250.			30,250
e Professional fundraising services. See Pa		599,050.			599,050
f Investment management fees		6,333.		6,333.	
g Other. (If line 11g amount exceeds 10% of					
(A), amount, list line 11g expenses on Schedule C		339,335.	185,237.	154,098.	
12 Advertising and promotion		4,167,119.	3,732,682.		434,437
13 Office expenses		163,664.	101,141.	17,447.	45,076
14 Information technology		87,792.	43,896.	17,558.	26,338
15 Royalties		671,628.	671,628.		
16 Occupancy		2,855,752.	2,212,028.	322,459.	321,265
17 Travel		551,362.	530,122.	8,222.	13,018
18 Payments of travel or entertainment	nt expenses				
for any federal, state, or local public	c officials	NONE			
19 Conferences, conventions, and meeti	ings	NONE			
20 Interest		NONE			
21 Payments to affiliates		NONE			
22 Depreciation, depletion, and amortiza	ation	1,524,534.	1,323,998.	120,321.	80,215
23 Insurance		216,405.	162,304.	32,461.	21,640
24 Other expenses. Itemize expenses r	not covered				
above. (List miscellaneous expenses on					
line 24e amount exceeds 10% of line					
(A), amount, list line 24e expenses on s	,	1 000 045			
a DIRECT PHYSICAL PRODUC	TION	1,888,345.	1,888,345.		
b ARTISTIC FEES		1,156,964.	1,156,964.	15 444	
c DUES, FEES & SUBSCRIPT		186,532.	147,321.	15,410.	23,801
d PRODUCTION AND DEVELOP	'MEN'I'	97,755.	97,755.	110 550	
e All other expenses		196,585.		119,770.	76,815
25 Total functional expenses. Add lines 126 Joint costs. Complete this line of	through 24e	10 F76 610 -	00 000 004	0 1 2 5 0 0 0	
organization reported in column (B) from a combined educational can fundraising solicitation. Check here	-	28,536,612.	23,362,384.	2,135,200.	3,039,028

following SOP 98-2 (ASC 958-720)

Form 990 (2022)

JSA 2E1053 2.000

Page	1	1	

	t X	Check if Schedule O contains a response or note to any line in this Pa	art X		
_			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	7,350,121.	1	4,267,679
	2	Savings and temporary cash investments	3,915,236.	2	2,961,075
	3	Pledges and grants receivable, net	12,223,618.	3	10,088,325
	4	Accounts receivable, net	5,649.	4	1,776,229
	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	NONE	5	NOI
	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).	NONE	6	NO
2	7	Notes and loans receivable, net	NONE	7	NO
	8	Inventories for sale or use	NONE	8	NO
	9	Prepaid expenses and deferred charges	102,832.	9	332,419
1	0 a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D			
	b	Less: accumulated depreciation	18,783,959.	10c	18,993,161
1		Investments - publicly traded securities	11,597,599.	11	14,145,146
1	2	Investments - other securities. See Part IV, line 11	265,637.	12	265,63
1	3	Investments - program-related. See Part IV, line 11	NONE	13	NO
1	4	Intangible assets	NONE	14	NO
1	5	Other assets. See Part IV, line 11	32,685,121.	15	38,588,58
1	6	Total assets. Add lines 1 through 15 (must equal line 33)	86,929,772.	16	91,418,25
1	7	Accounts payable and accrued expenses	1,426,437.	17	1,327,33
1	8	Grants payable	NONE	18	NO
1		Deferred revenue	2,593,294.	19	2,675,71
2	0	Tax-exempt bond liabilities	NONE	20	NO
2		Escrow or custodial account liability. Complete Part IV of Schedule D	NONE	21	NO
		Loans and other payables to any current or former officer, director,			
2		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons	NONE	22	NO
2	3	Secured mortgages and notes payable to unrelated third parties	NONE		NO
2	4	Unsecured notes and loans payable to unrelated third parties	2,000,000.	24	NO
2	5	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	32,600,484.	25	39,176,748
2	6	Total liabilities. Add lines 17 through 25	38,620,215.	26	43,179,798
		Organizations that follow FASB ASC 958, check here X and complete lines 27, 28, 32, and 33.			
2	7	Net assets without donor restrictions	39,096,093.	27	36,336,044
2	8	Net assets with donor restrictions	9,213,464.	28	11,902,412
2 2 3 3 3		Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.		-	
2	9	Capital stock or trust principal, or current funds		29	
3		Paid-in or capital surplus, or land, building, or equipment fund		30	
3		Retained earnings, endowment, accumulated income, or other funds		31	
3		Total net assets or fund balances	48,309,557.	32	48,238,450
	3	Total liabilities and net assets/fund balances	86,929,772.	33	91,418,25

	MANHATTAN THEATRE CLUB, INC. 23-7	086643			
Form 9	90 (2022)			Pa	ge 12
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	26,8	77,	880
2	Total expenses (must equal Part IX, column (A), line 25)	2	28,5	36,	612
3	Revenue less expenses. Subtract line 2 from line 1	3	-1,6	58,	732
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	48,3	09,	<u>557</u> .
5	Net unrealized gains (losses) on investments	5	1,5	87,	<u>631</u> .
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			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10	48,2	38,	<u>456</u> .
Part					
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other,"	explain on			
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		<u>2a</u>		X
	If "Yes," check a box below to indicate whether the financial statements for the year were c	ompiled or			
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were au	dited on a			
	separate basis, consolidated basis, or both:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for c	versight of			
	the audit, review, or compilation of its financial statements and selection of an independent accourt	tant?	. 2c	X	L
	If the organization changed either its oversight process or selection process during the tax year,	explain on			
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?				X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not u				
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such	audits	. 3b		

Form 990 (2022)

SCHE	DULE	A
(Form	990)	

Public Charity Status and Public Support

 (Form 990)
 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.

 Department of the Treasury Internal Revenue Service
 Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

spection

Interna	Revenue	Service

Nam	e of the organization					Employer identifi	cation number
MAN	NHATTAN THEATRE CLUB, 1	INC.				23-7	086643
Pa	rt Reason for Public Cha	arity Status. (All	organizations must	comple	ete this p	part.) See instructior	IS.
The	organization is not a private four	ndation because it	is: (For lines 1 through	gh 12, ch	eck only	one box.)	
1	A church, convention of chu	•				70(b)(1)(A)(i).	
2	A school described in section	on 170(b)(1)(A)(ii)	. (Attach Schedule E	(Form 99	0).)		
3	A hospital or a cooperative		•		. ,		
4	A medical research organiz	-	conjunction with a ho	spital des	scribed in	n section 170(b)(1)(A)	(iii). Enter the
	hospital's name, city, and st						
5	An organization operated f		a college or universit	y owned	d or ope	erated by a governme	ntal unit described in
	section 170(b)(1)(A)(iv). (C	• •					
6	A federal, state, or local go	-			-		
7	X An organization that norma	-	-	ipport fro	om a go	vernmental unit or fro	om the general public
-	described in section 170(b)		-	-			
8	A community trust describe						
9	An agricultural research org				-	-	
	or university or a non-land-g	grant college of ag	friculture (see instruct	ions). Ei	nter the	name, city, and state of	r the college or
10	university: An organization that normal receipts from activities relat support from gross investm acquired by the organization	ted to its exempt f ent income and u n after June 30, 19	unctions, subject to c nrelated business tax 975. See section 509	ertain ex able inco (a)(2). (C	ceptions me (les: Complete	s; and (2) no more thar s section 511 tax) from e Part III.)	n 331/3 % of its
11	An organization organized a	•	, ,				
12	An organization organized a		-	-			
	one or more publicly suppor	-					
	the box on lines 12a throug					-	-
а	Type I. A supporting orga	•	•	•		•	
	the supported organizatio	., .	• • • • •		ajority of	the directors of truste	es of the
h	supporting organization. Y	•	•		with ito	ourserted ergenizati	an(a) by baying
b	Type II. A supporting orgatic control or management o	-					
	organization(s). You must			the sam	e persor		age the supported
с	Type III functionally integ	•		ated in co	onnectio	n with and functional	ly integrated with
U	its supported organization						ly integrated with,
d	Type III non-functionally						ted organization(s)
	that is not functionally inte			-			- · ·
	requirement (see instructi			-		-	
е	Check this box if the orga		-				I. Type III
	functionally integrated, or						
f	Enter the number of supported						
g	Provide the following information	on about the suppo	orted organization(s).				
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	listed in you	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
				Yes	No		
(A)							
(B)							
(C)							
(D)							
(E)							
				L			

Total

Page 2

Schedule A (Form 990) 2022

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.)

2 Tax revues levid for the organization's benefit and either paid to or expended on its behalf NONE 3 The value of services or facilities furnished by a governmental unit to the organization without charge NONE 4 Total. Add lines 1 through 3 16,195,393. 18,241,181. 12,752,463. 19,435,282. 15,587,555. 82,211,874. 5 The portion of total contributions by each person (other than a gyoernmental unit publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)szz. supp. paget 10,586,560. 6 Public support. Subtract line 5 from line 4 71,625,314. Section B. Total Support Calendar year (or fiscal year beginning in) 7 Amounts from line 4	<u>Sec</u>	tion A. Public Support						
membership fees received. (Do not include any "unusual grants"),	Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
or expandation's benefit and either patt or or expanded on its behalf	1	membership fees received. (Do not	16,195,393.	18,241,181.	12,752,463.	19,435,282.	15,587,555.	82,211,874.
furnished by a governmental unit to the organization without charge	2	organization's benefit and either paid to						NONE
5 The portion of total contributions by acch 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 (1) 100, 500; P2020 10, 386, 560, 10, 386, 560, 6 6 Public support. Subtract line 5 from line 4 10, 386, 560, 10, 386, 560, 6 7 Amounts from line 4 11, 6, 195, 393, 18, 241, 181, 9 amounts from line 4,, 16, 195, 393, 18, 241, 181, 12, 752, 463, 19, 435, 282, 15, 587, 555, 18, 211, 874, 9 amounts from line 4,, 16, 195, 393, 18, 241, 181, 12, 752, 463, 19, 435, 282, 15, 587, 555, 15, 201, 874, 9 amounts from line 4,, 16, 195, 393, 18, 241, 181, 12, 752, 463, 19, 435, 282, 15, 587, 555, 15, 201, 874, 19, 463, 133, 3, 374, 227, 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI),, 12, 14, 74, 74, 54, 133, 12 Gross receipts from related activities, etc. (see instructions),, 12, 44, 070, 505, 13 First 5 years. If the Form 390 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: The organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here: The organization did not check the box on line 13, and line 14 is 331/3 % or more, check this box and stop here. The organization did not check the box on line 13, and line 14 is 331/3 % or more, check this box and stop here. The organization dualifies as a publicly supported organization,, 12 10 W-facts-and-circumstances test - 2021. If the organization did not check a box on line 13, and line 14 is 331/3 % or more, check this box and stop here. The organization dualifies as a publicly supported organization part VI how the organization meets the facts-and-circumstances test, chec	3	furnished by a governmental unit to the						NONE
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).585,566. 10,586,560. 6 Public support. Subtract line 5 from line 4 10,586,560. 7 Amount line 5 from line 4 10,586,560. 7 Amount Shown on line 11, column (f).582, 3579. 558. 7 Amounts from line 4 10,195,393. 7 Amounts from line 4 10,195,393. 7 Amounts from line 4 10,195,393. 18,241,181. 12,752,463. 19,435,282. 9 Net income from unretated business activities, whether or not the business is regularly carried on	4	Total. Add lines 1 through 3	16,195,393.	18,241,181.	12,752,463.	19,435,282.	15,587,555.	82,211,874.
6 Public support. Subtract line 5 from line 4 71,625,314. Section B. Total Support Calendar year (or fiscal year beginning in) A mounts from line 4	5	each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						10 586 560
Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2018 (b) 2019 (c) 2020 (d) 2021 (e) 2022 (f) Total 7 Amounts from line 4 16,195,393 18,241,181 12,752,463 19,435,282 15,587,555 82,211,874. 8 Gross income from interest, dividends, payments received on securities loans, rents, royalites, and income from unrelated business is regularly carried on	6							
Calendar year (or fiscal year beginning in) (a) 2018 (b) 2019 (c) 2020 (d) 2021 (e) 2022 (f) Total 7 Amounts from line 4 16.195.393. 18.241.181. 12.752.463. 19.435.282. 15.587.555. 82.211.674. 8 Gross income from interest, dividends, payments received on securities loans, rents, royalites, and income from unrelated business activities, whether on the business is regularly carried on . 915,123. 1.045,178. 636,646. 294,157. 483,133. 3.374,237. 9 Net income from unrelated business activities, whether on the business is regularly carried on . 915,123. 1.045,178. 636,646. 294,157. 483,133. 3.374,237. 10 Other income. Do not include gain or loos from the sale of captal assets (Explain in Part VI.) 74,704. 54,133. 27,043. 30,618. 342,714. 529,212. 11 Total support. Add lines 7 through 10. 86.115,233. 12 42,070,505. 2 Gross receipts from related activities, etc. (see instructions) . 12 42,070,505. 3 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) 15 82.2.25 %								/1,025,514.
7 Amounts from line 4 16,195,393 18,241,181 12,752,463 19,435,282 15,587,555 82,211,874 8 Gross income from interest, dividends, payments received on securities leans, rents, royatites, and income from similar sources 915,123 1,045,178 636,646 294,157 483,133 3,374,237 9 Net income from unrelated business activities, whether or not the business is regularly carried on . 915,123 1,045,178 636,646 294,157 483,133 3,374,237 9 Net income. Do not include gain or loss from the sale of capital assets (Explain in Part VI) 74,704 54,133 27,043 30,618 342,714 529,212 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI) 74,704 54,133 27,043 30,618 342,714 529,212 12 Gross receipts from related activities, etc. (see instructions) 12 42,070,505 12 42,070,505 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) 14 83.17 % 24 Public support percentage from 2021 Schedule A, Part II, line 14 16, and line 14 is 33.1/3 % or more, check this box and stop here. The organ		**	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
Gross income from interest, dividends, perpresentation on the securities loans, rents, royalities, and income from similar sources 915,123 1,045,178 636,646 294,157 483,133 3,374,237 9 Net income from unrelated business activities, whether or not the business is regularly carried on			. ,	()	. ,	. ,	. ,	
activities, whether or not the business is regularly carried on		Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from						3,374,237.
loss from the sale of capital assets (Explain in Part VI.) 74,704. 54,133. 27,043. 30,618. 342,714. 529,212. 11 Total support. Add lines 7 through 10. 86,115,323. 86,115,323. 12 Gross receipts from related activities, etc. (see instructions) 12 42,070,505. 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)	9	activities, whether or not the business						NONE
12 Gross receipts from related activities, etc. (see instructions) 12 42,070,505. 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) 12 Section C. Computation of Public Support Percentage 14 83.17 % 14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f)) 14 83.17 % 15 Public support percentage from 2021 Schedule A, Part II, line 14 15 82.25 % 16a 33 1/3 % support test - 2021. If the organization did not check the box on line 13, and line 14 is 331/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization 1 17a 10%-facts-and-circumstances test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization 1 17a 10%-facts-and-circumstances test - 2022. 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, check this box and stop here. Explain in Part VI how 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, check this box and stop here. Explain in Part VI how the organizati	10	loss from the sale of capital assets	74,704.	54,133.	27,043.	30,618.	342,714.	529,212.
12 Gross receipts from related activities, etc. (see instructions) 12 42.070.505. 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) Section C. Computation of Public Support Percentage 14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f)) 14 83.17 % 15 Public support percentage from 2021 Schedule A, Part II, line 14 15 82.25 % 16a 331/3 % support test - 2022. If the organization did not check the box on line 13, and line 14 is 331/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization IX b 331/3 % support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization IX b 331/3 % support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3 % or more, check this box and stop here. 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, check this box and stop here. Explain in Part VI how 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, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test, check this box and sto	11	Total support. Add lines 7 through 10 .						86,115,323.
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) Section C. Computation of Public Support Percentage 14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f)) 14 83.17 % 15 Public support percentage from 2021 Schedule A, Part II, line 14 15 82.25 % 16a 331/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization IX b 331/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization IX b 331/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization IX 17a 10%-facts-and-circumstances test - 2022. 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, check this box and stop here. Explain in Part VI how 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, check this box and st	12	• •	ee instructions)				12	42,070,505.
Section C. Computation of Public Support Percentage 14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f)) 14 83.17 % 15 Public support percentage from 2021 Schedule A, Part II, line 14 15 82.25 % 16a 331/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization IX b 331/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization IX b 331/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization IX 17a 10%-facts-and-circumstances test - 2022. 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, check this box and stop here. Explain in Part VI how 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, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the f	13	First 5 years. If the Form 990 is for	the organizatio	on's first, second	, third, fourth,	or fifth tax yea	ar as a section	501(c)(3)
15 Public support percentage from 2021 Schedule A, Part II, line 14 15 82.25 % 16a 33 1/3 % support test - 2022. If the organization did not check the box on line 13, and line 14 is 331/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization. Image: State Sta	Sec							
15 Public support percentage from 2021 Schedule A, Part II, line 14 15 82.25 % 16a 33 1/3 % support test - 2022. If the organization did not check the box on line 13, and line 14 is 331/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization. Image: State Sta	14	Public support percentage for 2022 (lir	ne 6, column (f)	, divided by line	11, column (f))		14	83.17 %
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	18							
		instructions	<u></u>	<u></u>	<u></u>	<u> </u>	<u> </u>	<u></u>

Schedule A (Form 990) 2022

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MANHATTAN THEATRE CLUB, INC. 23-7086643 Schedule A (Form 990) 2022 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 (a) 2018 (b) 2019 (d) 2021 (e) 2022 Calendar year (or fiscal year beginning in) (c) 2020 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 . 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 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 disgualified 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 Public support. (Subtract line 7c from 8 line 6.) <u>.</u> Section B. Total Support (c) 2020 (e) 2022 (f) Total (a) 2018 (b) 2019 (d) 2021 Calendar year (or fiscal year beginning in) 9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources **b** Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b Net income from unrelated business 11 activities not included on line 10b, whether or not the business is regularly carried on. 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, 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) 14 organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f)) 15 15 Public support percentage from 2021 Schedule A, Part III, line 15..... 16 16 Section D. Computation of Investment Income Percentage Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f)) 17 17 Investment income percentage from 2021 Schedule A, Part III, line 17 18 18 19a 331/3% support tests - 2022. If the organization did not check the box on line 14, and line 15 is more than 331/3%, and line 17 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization ... b 331/3% support tests - 2021. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/3%, and

line 18 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization . . Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions. 20 JSA 2E1221 1.000

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(Complete only if you checked a box on line 12 of 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

- 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.
- 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).
- **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.
- **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.
- 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.
- 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.
- **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.
- **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.
- 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).
- **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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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.*
- 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).*
- 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).
- **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.**
- **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.*
- 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.*
- **10 a** 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.*
 - **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.)

Yes No

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

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Schedule A (Form 990)

Schedule A (Form 990) 2022						
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 11b
 - **b** A family member of a person described on line 11a above?
 - 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.

Section B. Type I Supporting Organizations

- 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.
- Did the organization operate for the benefit of any supported organization other than the supported 2 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.

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? <i>If "No," explain in Part VI how</i>			
	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? <i>If "Yes," describe in Part VI the role the organization's</i>			
	supported organizations played in this regard.	3		

Section E. Type III Functionally Integrated Supporting Organizations

1	Che	ck the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins	tructio	ons).	
а		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.			
С		The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (se	e instru	lction	s).
•	• •			Yes	N
2	Activ	ities Test. Answer lines 2a and 2b below.			

- Did substantially all of the organization's activities during the tax year directly further the exempt purposes of а 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.
- **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.
- Parent of Supported Organizations. Answer lines 3a and 3b below. 3

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- 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.
- **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.

Yes No

11c

1

2

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2a

2b

3a

3b

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Schedule A (Form 990) 2022 Page 6 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Part V Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See 1 instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) 1 Net short-term capital gain 1 2 Recoveries of prior-year distributions 2 3 3 Other gross income (see instructions) 4 Add lines 1 through 3. 4 5 5 Depreciation and depletion 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of 6 property held for production of income (see instructions) 7 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior 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 1d d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 2 Acquisition indebtedness applicable to non-exempt-use assets 3 Subtract line 2 from line 1d. 3 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, 4 4 see instructions). 5 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 Multiply line 5 by 0.035. 6 7 7 Recoveries of prior-year distributions 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 5 Income tax imposed in prior year 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).

Schedule A (Form 990) 2022

Schedule A (Form 990) 2022

Part	V Type III Non-Functionally Integrated 509(a)(3)	Supporting Organizat	ions (continued)		
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish ex	xempt purposes		1	
2	Amounts paid to perform activity that directly furthers exer	npt purposes of support	ed		
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpo	zations	3		
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - p	rovide 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 resp	onsive		
	(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	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2022	าร	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022				
	(reasonable cause required - <i>explain in Part VI).</i> See				
	instructions.				
3	Excess distributions carryover, if any, to 2022				
a	From 2017				
b	From 2018				
C	From 2019				
d	From 2020				
e	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
i	Carryover from 2017 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from				
	Section D, line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2022 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, 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 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j and 4c.				
8	Breakdown of line 7:				
a	Excess from 2018				
 b	Excess from 2019				
 C	Excess from 2020				
d	Excess from 2021				
e	Excess from 2022				

Schedule A (Form 990) 2022

(3)					
(-)					
(4)					
(5)					
(0)					
(6)					
(6)					
(6) For Paperwork Reduct	tion Act Notice, see	the Instructions for	or Form 990 or	990-EZ.	Schedule C (Form 9
	tion Act Notice, see	the Instructions for	or Form 990 or	990-EZ.	Schedule C (Form 9
	tion Act Notice, see	the Instructions fo	or Form 990 or	990-EZ.	Schedule C (Form 9
	tion Act Notice, see	the Instructions fo	or Form 990 or	990-EZ.	Schedule C (Form 9
For Paperwork Reduct	tion Act Notice, see				Schedule C (Form 9

(b) Address

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

• Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.

Section 527 organizations: Complete Part I-A only.

SCHEDULE C

Department of the Treasury

(a) Name

(1)

(2)

Internal Revenue Service

(Form 990)

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Nam	e of organization	Employer identification number
MAN	NHATTAN THEATRE CLUB, INC.	23-7086643
Pa	rt I-A Complete if the organization is exempt under section 501(c) or is a section	on 527 organization.
1	Provide a description of the organization's direct and indirect political campaign activi	ties in Part IV. See instructions for
	definition of "political campaign activities."	
2	Political campaign activity expenditures. See instructions	\$
3	Volunteer hours for political campaign activities. See instructions	
Par	t I-B Complete if the organization is exempt under section 501(c)(3).	
1	Enter the amount of any excise tax incurred by the organization under section 4955	\$
2	Enter the amount of any excise tax incurred by organization managers under section 4955	\$
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	Yes No
4a	Was a correction made?	Yes No
b	If "Yes," describe in Part IV.	
Par	rt I-C Complete if the organization is exempt under section 501(c), except sect	ion 501(c)(3).
1	Enter the amount directly expended by the filing organization for section 527 exempt func	tion
	activities	\$
2	Enter the amount of the filing organization's funds contributed to other organizations for sec	tion
	527 exempt function activities	\$
3	Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-P	OL,
	line 17b	\$
4	Did the filing organization file Form 1120-POL for this year?	Yes No

Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing 5 organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(c) EIN

(d) Amount paid from

filing organization's

funds. If none, enter -0-.

(e) Amount of political

contributions received and

promptly and directly delivered to a separate political organization. If none, enter -0-.

OMB No. 1545-0047

Open to Public Inspection

[•] Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

Sch	nedule C (Form 990) 2022 MANHAT	TAN THEATRE CLUB, INC.	23-	-7086643 P	age 2
P	art II-A Complete if the organization section 501(h)).	on is exempt under section 501(c)(3) and	l filed Form 5768 (elec	tion under	
Α		longs to an affiliated group (and list in Part IV e of excess lobbying expenditures).	ach affiliated group meml	per's name, add	lress,
В	Check if the filing organization check	ecked box A and "limited control" provisions ap	oly.		
		ying Expenditures eans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals	
1a	a Total lobbying expenditures to influence	public opinion (grassroots lobbying)	30,250.		
I	o Total lobbying expenditures to influence	a legislative body (direct lobbying)			
C	Total lobbying expenditures (add lines 1	a and 1b)	30,250.		
C	d Other exempt purpose expenditures		28,506,362.		
e	 Total exempt purpose expenditures (add 	d lines 1c and 1d)	28,536,612.		
f	Lobbying nontaxable amount. Enter th	e amount from the following table in both			
	columns.		1,000,000.		
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:			
	Not over \$500,000	20% of the amount on line 1e.			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.			
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.			
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.			
	Over \$17,000,000	\$1,000,000.			
9	g Grassroots nontaxable amount (enter 25	5% of line 1f)	250,000.		
I	n Subtract line 1g from line 1a. If zero or le	ess, enter -0-			
i	Subtract line 1f from line 1c. If zero or le	ss, enter -0-			
j	If there is an amount other than zero	on either line 1h or line 1i, did the organiza	ation file Form 4720		_
	reporting section 4911 tax for this year?			Yes	No

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the separate instructions for lines 2a through 2f.)

	Lobbying Expenditures During 4-Year Averaging Period							
	Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total		
2a	Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.		
b	Lobbying ceiling amount (150% of line 2a, column (e))					6,000,000.		
с	Total lobbying expenditures	58,500.	27,500.	40,000.	30,250.	156,250.		
d	Grassroots nontaxable amount	250,000.	158,308.	250,000.	250,000.	908,308.		
e	Grassroots ceiling amount (150% of line 2d, column (e))					1,362,462.		
f	Grassroots lobbying expenditures	58,500.	27,500.	40,000.	30,250.	156,250.		

Schedule C (Form 990) 2022

Part II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768
	(election under section 501(h)).

For	r each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed 🗕			(b)	
	cription of the lobbying activity.	Yes	No	Amount	
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
a b c	Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?. Media advertisements?				
d e	Mailings to members, legislators, or the public? Publications, or published or broadcast statements?				
f g	Grants to other organizations for lobbying purposes?				
h i	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
j 2a b	Total. Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912				
c d	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Pa	t III-A Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6).	(c)(5)	, or s	ection	

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?			

		0 0	,	, 0		1 0	· · ·		I	/		
Part	III-B	Complete if the	organization	is exem	npt under	' section	501(c)(4),	section 501	(c)(5), or s	ectio	n	
		501(c)(6) and if	either (a) BO	TH Part	III-A, line	es 1 and 2	2, are answ	vered "No"	OR (b) Pai	rt III-A	A, line 3	3, is
		answered "Yes.	"									
4	Dues	accommente and air	nilar am aunta fr							1		

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of		
	political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	
	Carryover from last year.		
	Total		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the		
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying		
	and political expenditures next year?	4	
5	Taxable amount of lobbying and political expenditures. See instructions.	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

SCHEE	DULE D
(Form	990)

Department of the Treasury

Supplemental Financial Statements Complete if the organization answered "Yes" on Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

2 **Open to Public** Inspection

OMB No. 1545-0047

Inter	nal Revenue Service	Go to www.irs.gov/F	Form990 for instructions and th	ne latest informa	ation. Inspec	tion
Nam	e of the organization				Employer identification numbe	r
MAN	NHATTAN THEATF	RE CLUB, INC.			23-7086643	
	art I Organiza	tions Maintaining Donor Adv	sed Funds or Other Simil	lar Funds or	Accounts.	
	Complete	e if the organization answered	"Yes" on Form 990, Part I	V, line 6.		
			(a) Donor advised fund	s	(b) Funds and other accour	nts
1	Total number at e	nd of year				
2		of contributions to (during year)				
3		of grants from (during year)				
4		at end of year				
5		ion inform all donors and donor	advisors in writing that the	assets held	in donor advised	
Ū	•	anization's property, subject to the	5			No
6	-	ion inform all grantees, donors, a				
-		e purposes and not for the bene				
		nissible private benefit?				🗌 No
Pa		tion Easements.				
		e if the organization answered	"Yes" on Form 990, Part I	V, line 7.		
1		servation easements held by the				
	Preservatio	n of land for public use (for example	, recreation or education)	Preservation of	of a historically important lar	nd area
	Protection of	of natural habitat			of a certified historic structu	
	Preservatio	n of open space				
2	Complete lines 2a	a through 2d if the organization he	eld a qualified conservation o	contribution in	the form of a conservation	
		last day of the tax year.			Held at the End of the	Tax Year
а		onservation easements			2a	
b		tricted by conservation easements			2b	
С		rvation easements on a certified			2c	
d		rvation easements included in (c)				
		e listed in the National Register			2d	
3		rvation easements modified, tra			nated by the organization	during the
	tax year				, ,	0
4	Number of states	where property subject to conse	rvation easement is located _			
5		ation have a written policy reg			on, handling of	
	violations, and enf	orcement of the conservation ea	sements it holds?		Yes	No No
6	Staff and volunteer	hours devoted to monitoring, insp	ecting, handling of violations, a	and enforcing	conservation easements durin	g the year
7	Amount of expens	ses incurred in monitoring, inspec	ting, handling of violations, an	nd enforcing co	onservation easements durin	g the year
8	Does each conser	vation easement reported on line 2	2(d) above satisfy the requirer	ments of section	on 170(h)(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?			Yes	
9	In Part XIII, des	cribe how the organization re	ports conservation easeme	nts in its re	venue and expense state	ment and
		nd include, if applicable, the text		anization's fin	ancial statements that des	cribes the
		counting for conservation easeme			A I I I I I I I I I I	
Pa		tions Maintaining Collections			Similar Assets.	
	· · · ·	e if the organization answered				
1a	If the organization	n elected, as permitted under FA treasures, or other similar asse	SB ASC 958, not to report	in its revenue	e statement and balance sh	neet works
	service, provide in	Part XIII the text of the footnote	to its financial statements that	at describes th	lese items.	
b	If the organization	n elected, as permitted under FA	ASB ASC 958, to report in i	its revenue st	atement and balance shee	t works of
		sures, or other similar assets he		cation, or rese	earch in furtherance of pub	lic service,
		ing amounts relating to these iter				
	(i) Revenue inclu	ded on Form 990, Part VIII, line 1				
		ed in Form 990, Part X				
2	-	n received or held works of a			assets for financial gain, p	rovide the
		s required to be reported under F.				
a ⊾		on Form 990, Part VIII, line 1.				
b For		Form 990, Part X				rm 000) 0000
JSA	raperwork Reduction	n Act Notice, see the Instructions for	FUITI 990.		Schedule D (Fo	rm 990) 2022

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Schee		HATTAN THEATRE					086643	Page 2
Pa	rt III Organizations Maintaini	ng Collections of	Art, Historical	Treasures,	or Other S	Similar Assets (d	continued	1)
3	Using the organization's acquisition		other records, c	neck any of t	he followir	ng that make sigr	nificant us	e of its
	collection items (check all that appl	y):	. — .					
a	Public exhibition			an or exchang	ge program	1		
b	Scholarly research		e 🔄 Ot	her				
C A	Preservation for future gener Provide a description of the organ		and avalain he	w those furth	or the ora	anization's avoma	tourpoco	in Port
4	XIII.				er the orga		i puipose	III Fall
5	During the year, did the organization	n solicit or receive o	lonations of art.	historical trea	sures, or of	ther similar		
•	assets to be sold to raise funds rath					_	Yes	No
Ра	rt IV Escrow and Custodial A		•	0		_		
	Complete if the organiza	tion answered "Ye	s" on Form 99	0, Part IV, lir	ne 9, or re	ported an amoui	nt on For	m
	990, Part X, line 21.							
1a	Is the organization an agent, trust			-		_		
	included on Form 990, Part X?						Yes	No
b	If "Yes," explain the arrangement in	n Part XIII and comp	plete the following	g table:				
						Amount		
C L	Beginning balance							
a e	Additions during the year				d			
f	Ending balance							
2a	Did the organization include an am					ccount liability?	Yes	No
	If "Yes," explain the arrangement in							
	rt V Endowment Funds.		•		•			
	Complete if the organiza	tion answered "Ye	s" on Form 99	0, Part IV, lir	ne 10.			
		(a) Current year	(b) Prior year	(c) Two y	ears back	(d) Three years back	(e) Four ye	ears back
1a	Beginning of year balance	1,664,458.	1,800,843	1,674	1,713.	1,762,953.	1,80)5,759.
b	Contributions							
с	Net investment earnings, gains,							
	and losses	130,082.	-99,993	185	5,860.	53,492.	2	29,767.
	Grants or scholarships							
е	Other expenditures for facilities	25.016	26.20			141 520		
	and programs	35,216.	36,392	2. 5 <u>5</u>	9,730.	141,732.		72,573.
t	Administrative expenses	1,759,324.	1,664,458	1 800	,843.	1,674,713.	1 76	52,953.
g	End of year balance					1,0,1,,10,	1//0	277551
2 a	Board designated or quasi-endowm		%	rg, column (a	()) Heiu as.			
b	Permanent endowment 94.000							
с	Term endowment6.0000 %							
	The percentages on lines 2a, 2b, a							
3a	Are there endowment funds not in	the possession of th	ne organization t	hat are held a	and adminis	stered for the		
	organization by:							es No
	(i) Unrelated organizations						3a(i)	X
L	(ii) Related organizations If "Yes" on line 3a(ii), are the related						3a(ii) 3b	X
4	Describe in Part XIII the intended u	•					30	
	rt VI Land, Buildings, and Equ							
I U	Complete if the organization	ation answered "Ye	1					
	Description of property	(a) Cost or (invest		Cost or other basis (other)	(c) Accu depred		 Book value 	е
1a	Land		,	3,064,351			3,064	,351.
b	Buildings			8,938,797		8,325.	11,820	
с	Leasehold improvements		1	1,058,416	. 9,47	9,647.	1,578	,769.
d	Equipment	••••		1,663,837		3,755.	150	,082.
e				2,716,998		7,511.		,487.
Tota	I. Add lines 1a through 1e. (Column	(d) must equal Form	n 990, Part X, co	lumn (B), line	10c.)		18,993	,161.

Schedule D (Form 990) 2022

Part VII	Investments - Other Securities. Complete if the organization answered	d "Voc" on Form 000) Part IV line 11h See Form 000	Part V line 12
	· · ·			
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year marke	
(1) Financia	al derivatives			
(2) Closely	held equity interests			
(3) Other _				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
,	n (b) must equal Form 990, Part X, col. (B) line 12.)	-		
Part VIII	Investments - Program Related.			
	Complete if the organization answered	d "Yes" on Form 990), Part IV, line 11c. See Form 990,	Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year marke	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets. Complete if the organization answered	d "Yes" on Form 990). Part IV. line 11d. See Form 990.	Part X. line 15.
	·	escription		(b) Book value
	ITY DEPOSITS			10,063.
	ROM MTC PRODUCTIONS, INC.			332,181.
	-OF-USE ASSET			38,246,339.
	OF OSE ASSET			50,240,555.
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	umn (b) must equal Form 990, Part X, col. (B)	lino 15)		20 500 502
Part X	Other Liabilities.	iiiie 10.)		38,588,583.
Fart A	Complete if the organization answered line 25.	d "Yes" on Form 990), Part IV, line 11e or 11f. See Forn	n 990, Part X,
1.	(a) Descrip	otion of liability		(b) Book value
(1) Feder	ral income taxes	· ·		
	LIABILITIES			39,176,748.
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				

(9)

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 39,176,748.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII . JSA 2E1270 1.000

x

Schedu	JIE D (Form 990) 2022 MANHATTAN THEATRE CLUB, INC.	23-	-7086643 Page 4
Part		n.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	1	28,507,195.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
с	Recoveries of prior year grants		
d	Other (Describe in Part XIII.) 2d		
е	Add lines 2a through 2d	2e	1,635,648.
3	Subtract line 2e from line 1	3	26,871,547.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b. 4a 6, 333.		
b	Other (Describe in Part XIII.) 4b		
С	Add lines 4a and 4b	4c	6,333.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	26,877,880.
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Ret	Jrn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1		1	28,579,353.
1 2	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	1	28,579,353.
	Total expenses and losses per audited financial statements	1	28,579,353.
2	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	1	28,579,353.
2 a	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	1	28,579,353.
2 a b	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	1	28,579,353.
2 a b c	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	1 2e	28,579,353.
2 a b c d	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	-	
2 a b c d e	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1	2e	49,074.
2 b c d 8 3	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	2e	49,074.
2 b c d e 3 4	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2e	49,074.
2 b c d e 3 4 a	Total expenses and losses per audited financial statementsAmounts included on line 1 but not on Form 990, Part IX, line 25:Donated services and use of facilitiesPrior year adjustmentsOther lossesOther (Describe in Part XIII.)Add lines 2a through 2dSubtract line 2e from line 1Amounts included on Form 990, Part IX, line 25, but not on line 1:Investment expenses not included on Form 990, Part VIII, line 7b4a6, 333.Other (Describe in Part XIII.)	2e 3	49,074.
2 b c d e 3 4 a b	Total expenses and losses per audited financial statementsAmounts included on line 1 but not on Form 990, Part IX, line 25:Donated services and use of facilitiesPrior year adjustmentsOther lossesOther lossesOther (Describe in Part XIII.)Add lines 2a through 2dSubtract line 2e from line 1Amounts included on Form 990, Part IX, line 25, but not on line 1:Investment expenses not included on Form 990, Part VIII, line 7b4a6, 333.4b	2e 3	49,074. 28,530,279.

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

SEE SUPPLEMENTAL PAGE

PART V, LINE 4

THE ENDOWMENT FUNDS ARE INTENDED TO PROVIDE LONG TERM STABILITY TO MTC WITH ANNUAL FUNDS FROM INVESTMENT INCOME TO FUND ONGOING OPERATIONS. THE PRINCIPAL OF THESE FUNDS CAME FROM DESIGNATED DONATIONS AND IS PERMANENTLY RESTRICTED. THE INVESTMENT EARNINGS ON THESE FUNDS ARE GOVERNED BY THE GRANT TERMS.

PART X, LINE 2

THE ORGANIZATION BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR ANY TAX POSITIONS TAKEN, AND AS SUCH, DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS THAT ARE MATERIAL TO THE CONSOLIDATED FINANCIAL STATEMENTS. THERE ARE NO INCOME TAX RELATED PENALTIES AND INTEREST INCLUDED IN THESE CONSOLIDATED FINANCIAL STATEMENTS.

PART XII, LINE 2D - OTHER ADJUSTMENTS

ELIMINATE CONSOLIDATION OF MTC PRODUCTIONS, INC. EXPENSES OF \$1,057 (EIN 13-3636769) FORM 1120 FILED SEPARATELY

(Form 990)		Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.						
Department of the Treasury				or Form 990			Open to Public	
Internal Revenue Service	Go	to www.irs.gov/Form9	90 for instru	uctions and t	he latest information.		Inspection	
Name of the organization						Employer identification		
MANHATTAN THEAT	RE CLUB, INC.					23-708664		
	g Activities. Comp EZ filers are not re				Yes" on Form 98	90, Part IV, line 1	1.	
	the organization rais				activities Check	all that apply		
a X Mail solicita	-	-		-	non-government g			
	email solicitations	f			government grant			
c X Phone solic		q			ising events	5		
d X In-person so		9	0 p0		ienig erenie			
2a Did the organiza		r oral agreement w	ith anv in	dividual (ir	ncludina officers. d	lirectors. trustees.		
	es listed in Form 990,						X Yes No	
	10 highest paid indiv		(fundraise	ers) pursua	int to agreements	under which the	fundraiser is to be	
compensated at	least \$5,000 by the o	organization.						
(i) Name and add	ess of individual	(ii) Activity		ndraiser have or control of	(iv) Gross receipts	(v) Amount paid to (or retained by)	(vi) Amount paid to (or retained by)	
or entity (fu	indraiser)	(II) Activity		butions?	from activity	fundraiser listed in col. (i)	organization	
SEE SUPPLEMENT	INFORMATION		Yes	No				
1	1111 011 111 1011							
2								
3								
4								
4								
5								
6								
7								
8								
9								
10								
10								
Tatal				-	1 806 100	500.050	1 100 140	
Total 3 List all states in	which the organizat	ion is registered o	or license	d to solicit	1,706,190.	599,050. has been notified		
registration or lic	0					 		
CA,CT,DC,FL,MD,	MA,NJ,NY,PA,TX	, VA ,						

Supplemental Information Regarding Fundraising or Gaming Activities

SCHEDULE G

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		gross receipts greater than \$5,00	0.				
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
			SPRING GALA	WINTER GALA	NONE	(add col. (a) through	
			(event type)	(event type)	(total number)	col. (c))	
ne							
en	1	Gross receipts	1,624,616.	564,649.		2,189,265.	
Revenue	•		1,021,010.	501,015.		2,100,200.	
æ	2	Less: Contributions	1,203,944.	379,855.		1,583,799.	
	3	Gross income (line 1 minus	1,205,944.	575,055.		±,303,799.	
	Ŭ	line 2)	120 672	101 701			
_		mic 2)	420,672.	184,794.		605,466.	
	4	Cash prizes					
	-	Cash ph2C3					
	5	Noncoch prizoc					
	5	Noncash prizes					
Direct Expenses	6	Dent/feeility/eeete					
	6	Rent/facility costs					
<pre>be</pre>	-	Food and haverages					
Ê	'	Food and beverages					
ec	0	Entertainment		16.004			
Dir	8	Entertainment	337,661.	16,924.		354,585.	
	9	Other direct eveness	0.2 0.1.1	160.000		050 001	
	9	Other direct expenses	83,011.	167,870.		250,881.	
	10	Direct expense summary. Add lir	as 1 through 9 in colu	umn (d)			
	11	Net income summary. Subtract I	ine 10 from line 3 col	lumn (d)		605,466.	
Pa	rt II					reported more than	
		\$15,000 on Form 990-EZ, lin	e 6a.				
Ø				(b) Pull tabs/instant		(d) Total gaming (add	
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c)	
sve							
R	1	Gross revenue					
_							
SS	2	Cash prizes					
JSE							
rect Expenses	3	Noncash prizes					
ЕX	Ū	Noneach philoe					
ct	4	Rent/facility costs					
	-						
	5	Other direct expenses					
	5		Yes %	Yes %	Yes %		
	6	Volunteer labor					
	U		Νο	No	No		
	7	Direct expense summary. Add lir	nes 2 through 5 in colu	umn (d)			
	'	Encor expense summary. Add in					
	8	Net gaming income summary	ubtract line 7 from line	e 1. column (d)			
8 Net gaming income summary. Subtract line 7 from line 1, column (d)							

9 Enter the state(s) in which the organization conducts gaming activities:

a Is the organization licensed to conduct gaming activities in each of these states?
 b If "No," explain:

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?
 Yes
 No
 If "Yes," explain:

Schedule G (Form 990) 2022

Sched	lule G (Form 990 or 990-EZ) 2022 MANHATTAN THEATRE CLUB, INC.	23-7	086643	Page 3
11	Does the organization conduct gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entit	у		
	formed to administer charitable gaming?		Yes	No
13	Indicate the percentage of gaming activity conducted in:			
а	The organization's facility	13a		%
b	An outside facility	13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events book records:	s and		
	Name			
	Address ►			
15 a	Does the organization have a contract with a third party from whom the organization receives g	gaming		
	revenue?		Yes	No
b		and the		
	amount of gaming revenue retained by the third party \blacktriangleright			
C	If "Yes," enter name and address of the third party:			
	Name ►			
	Address ►			
16	Gaming manager information:			
	Name			
	Gaming manager compensation ► \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming pro			
	retain the state gaming license?			No
b	Enter the amount of distributions required under state law to be distributed to other exempt orga	Inizations	5	
Dor	or spent in the organization's own exempt activities during the tax year s	(iii) and	(v) and	
Par	Supplemental Information. Provide the explanation required by Part I, line 2b, columns Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any addition (see instructions).			

Schedule G (Form 990 or 990-EZ) 2022

FORM 990, SCHEDULE G, LINE 2B - HIGHEST PAID INDIVIDUALS/ENTITIES

NAME: DCM, INC. ACTIVITY : TELE- FUNDRAISING CUSTODY OR CONTROL OF CONTRIBUTION? NO GROSS RECEIPTS FROM ACTIVITY : 1,706,190. AMOUNT PAID TO (OR RETAINED BY) FUNDRAISER : 599,050. AMOUNT PAID TO (OR RETAINED BY) ORGANIZATION : 1,107,140.

STATEMENT 1

SCHEDULE J		Compensation Information						OMB No. 1545-0047		
(Form 990)		For certain Officers, Dire	എന	໑ຓຐຐ						
				nsated Employees swered "Yes" on Form 990, Part IV, line 2	3.	ZU	L			
	nent of the Treasury	A	Attac	h to Form 990.	-	Open to				
	Revenue Service of the organization	Go to www.irs.gov/Formas	90 10	r instructions and the latest information.	Employer identificat		ectio	n		
	-	ATRE CLUB, INC.			23-70866					
Part		ns Regarding Compensation				10				
							Yes	No		
1a		propriate box(es) if the organization pro				n				
		Section A, line 1a. Complete Part III to	prov		-					
		ss or charter travel		Housing allowance or residence for						
		or companions		Payments for business use of perso						
		emnification and gross-up payments		Health or social club dues or initiation						
	Discretio	onary spending account		Personal services (such as maid, ch	auffeur, chef)					
b	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to									
•										
2	-	anization require substantiation prior			-					
		stees, and officers, including the CEC			checked on in	e 2				
•						2				
3		n, if any, of the following the organization CEO/Executive Director. Check all the								
		ization to establish compensation of the								
		nsation committee		Written employment contract						
	· ·	dent compensation consultant	X	Compensation survey or study						
		00 of other organizations	Х	Approval by the board or compensation	ation committee					
4	During the ye	ar, did any person listed on Form 990, or a related organization:	Par	t VII, Section A, line 1a, with respect t	o the filing					
а	Receive a severance payment or change-of-control payment?							Х		
b		or receive payment from a supplemen					Х			
С	Participate in	or receive payment from an equity-bas	ed c	compensation arrangement?		4c		Х		
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.									
	-	501(c)(3), 501(c)(4), and 501(c)(29) or	-	-						
5	•	listed on Form 990, Part VII, Secti	on	A, line 1a, did the organization pa	ay or accrue an	У				
2	-	n contingent on the revenues of: ion?				5a		X		
		rganization?				5a 5b		X		
U	•	e 5a or 5b, describe in Part III.	• •			50				
6		listed on Form 990, Part VII, Secti	on	A, line 1a, did the organization pa	ay or accrue an	v				
-	-	n contingent on the net earnings of:		, ., <u>.</u>	, u	·				
а	The organizat	ion?				6a		Х		
		rganization?				6b		Х		
	If "Yes" on lin	e 6a or 6b, describe in Part III.								
7		listed on Form 990, Part VII, Sectio								
Ē		described on lines 5 and 6? If "Yes," d				7		X		
8	-	ounts reported on Form 990, Part VII,		-	-					
		I contract exception described in I	-							
•		line Q did the experimentian also fall						X		
9		line 8, did the organization also foll								
	iveguiations s	ection 53.4958-6(c)?	• •			9				

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

Schedule J (Form 990) 2022

 Schedule J (Form 990) 2022
 MANHATTAN THEATRE CLUB, INC.
 23-7086643
 Page 2

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

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

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

		(B) Breakdown of W-2 a	nd/or 1099-MISC and/or	1099-NEC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990	
CAROLYN MEADOW	(i)	505,758.	NONE	NONE	8,700.	22,119.	536,577.	NONE	
1 ARTISTIC DIRECTOR	(ii)								
BARRY GROVE	(i)	498,515.	NONE	100,000.	8,700.	42,591.	649,806.	NONE	
2 EXEC. PRODUCER THRU 06/2023	(ii)								
LINDSEY B. SAG	(i)	87,113.	NONE	NONE	4,237.	50,406.	141,756.	NONE	
3 GENERAL MANAGER	(ii)								
MATTHEW D. SVIGALS	(i)	126,480.	NONE	NONE	4,495.	55,419.	186,394.	NONE	
4 DIRECTOR OF FINANCE	(ii)								
LYNNE S. RANDALL	(i)	176,579.	NONE	NONE	5,833.	33,167.	215,579.	NONE	
5 DIRECTOR OF DEVELOPMENT	(ii)								
JEFFREY W. DODSON	(i)	152,169.	NONE	NONE	NONE	NONE	152,169.	NONE	
6 MASTER ELECTRICIAN	(ii)								
AMY G. LOE	(i)	123,603.	NONE	NONE	4,362.	58,136.	186,101.	NONE	
7 DIR. OF ARTISTIC OPERATIONS	(ii)								
DEBRA A. WAXMAN-PILLA	(i)	122,655.	NONE	NONE	4,234.	37,727.	164,616.	NONE	
8 DIRECTOR OF MARKETING	(ii)								
	(i)								
9	(ii)								
	(i)								
10	(ii)								
	(i)								
11	(ii)								
	(i)								
12	(ii)								
	(i)								
13	(ii)								
	(i)								
14	(ii)								
	(i)								
15	(ii)								
-	(i)								
16	(ii)								

Schedule J (Form 990) 2022

Schedule J (Form 990) 2022

Part III Supplemental Information

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

PART II (EXECUTIVES COMPENSATION)

IN RECOGNITION OF ALMOST FIFTY YEARS OF SERVICE FROM THE EXECUTIVE PRODUCER, THE ORGANIZATION ENTERED INTO A DEFERRED COMPENSATION AGREEMENT. UNDER THIS AGREEMENT, THE ORGANIZATION CREDITS TO THE EXECUTIVE'S ACCOUNT \$100,000 FOR SERVICES RENDERED EACH FISCAL YEAR UNTIL THE ACCOUNTS HAVE BEEN CREDITED \$1,000,000. UNDER THE TERMS OF THE EXECUTIVE'S AGREEMENT, THE CONTRIBUTED FUNDS ARE INVESTED IN A 457(F) PLAN ACCOUNT AND ALL INVESTMENT INCOME ACCUMULATED IS PAID TO THE EXECUTIVE UPON VESTING. THE EXECUTIVE RECEIVED A FULL DISTRIBUTION IN JULY 2017. FOR THE REMAINING OBLIGATION AFTER JULY 1, 2018, THE EXECUTIVE IS CREDITED WITH \$100,000 ANNUALLY FOR THE NEXT FOUR YEARS (PERIOD ENDING JUNE 30, 2022) AND THE ANNUAL AMOUNT VESTS EACH YEAR. THE ACCOUNT BALANCES MAY BECOME VESTED AND PAID EARLIER UPON DEATH, DISABILITY, DISCHARGE WITHOUT CAUSE, OR RESIGNATION FOR GOOD REASON. UNVESTED BALANCES ARE FORFEITED UPON DISCHARGE FOR CAUSE OR RESIGNATION WITHOUT GOOD REASON. THE ORGANIZATION HAS TITLE TO AND BENEFICIAL OWNERSHIP OF THE INVESTED FUNDS UNTIL THE ACCOUNT BALANCES ARE VESTED AND PAID. THE

Schedule J (Form 990) 2022

MANHATTAN THEATRE CLUB, INC.

23-7086643

Part III Supplemental Information

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

EXECUTIVE HAS A SIGNIFICANT RISK OF FORFEITURE.

Page 3

SCHE	DULE	L
(Form	990)	

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

Attach to Form 990 or Form 990-EZ.

Department of the Treasury Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service

	Ins	pection

\$

OMB No. 1545-0047

Open To Public

Name of the organization

Employer	identification number	
23-	-7086643	

MANHATTAN THEATRE CLUB, INC. Part I

Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only). Complete if the organization answered "Yes" on Form 990. Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and	(a) Description of transaction							
<u> </u>	(a) Name of disqualmed person	organization	(c) Description of transaction	Yes	No					
(1)										
(2)										
(3)										
(4)										
(5)										
(6)										
2	Enter the amount of tax incurred by	the organization managers or disqualified	persons during the year							
	under section 4958									

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of Ioan	fron	an to or n the zation?	(e) Original principal amount	(f) Balance due	(g) In c	default?		ard or	(i) W agreer	
			То	From			Yes	No	Yes	No	Yes	No
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												
Total						\$						

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

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

Schedule L (Form 990) 2022

Schedule L (Form 990 or 990-EZ) 2022

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organi	aring of zation's nues?
				Yes	No
(1) EQUITY LEAGUE HEALTH & PENSION	OFFICER - TRUSTEE	196,246.	PAYMENTS MADE BY MTC		х
(2)BONEAU/BRYAN-BROWN	VENDOR	149,462.	FAMILY RELATIONSHIP		х
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
Part V Supplemental Information					

mental information

Provide additional information for responses to questions on Schedule L (see instructions).

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS

(A) NAME OF PERSON: EQUITY LEAGUE HEALTH & PENSION

(D) DESCRIPTION OF TRANSACTION: PAYMENTS MADE BY MTC TO THE EQUITY-LEAGUE HEALTH & PENSION FUNDS TO FULFILL OBLIGATIONS UNDER LORT-EQUITY COLLECTIVE BARGAINING AGREEMENT. BARRY GROVE (EXECUTIVE PRODUCER) SERVES AS AN UNPAID MANAGEMENT TRUSTEE FOR THE FUNDS AND AS AN OFFICER OF MTC.

(A) NAME OF PERSON: BONEAU/BRYAN-BROWN

(D) DESCRIPTION OF TRANSACTION: FAMILY RELATIONSHIP - ONE OF THE OWNERS OF BONEAU/BRYAN-BROWN (MTC'S PRESS AGENCY) HAS A FAMILY RELATIONSHIP WITH ONE OF MTC'S KEY EMPLOYEES (KEY EMPLOYEE RESIGNED IN JUNE 2020). IN ADDITION, THE OWNER GIVING RISE TO THE DISCLOSURE DOES NOT WORK ON MTC'S ACCOUNT.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.



Department of the Treasury Internal Revenue Service Name of the organization

MANHATTAN THEATRE CLUB, INC.

Employer identification number 23-7086643

i ai								
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(Method of noncash contr			
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household							
-	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded		15	289,442.	FMV			
10	Securities - Closely held stock							
11	Securities - Partnership, LLC,							
	or trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation							
	contribution - Historic							
	structures							
14	Qualified conservation							
	contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ►()							
26	Other ►()							
27	Other ►()							
28	Other ►()							
29	Number of Forms 8283 received which the organization completed I		u u		29			
	which the organization completed i	-0111 0203,	Part V, Donee Acknowledge		23		Yes	No
30a	During the year, did the organizat	ion receive	by contribution any prope	rty reported in Part I line	s 1 through			
oou	28, that it must hold for at least the							
	to be used for exempt purposes for					30a		Х
b	If "Yes," describe the arrangement i							
31	Does the organization have a		tance policy that require	s the review of any i	nonstandard			
	contributions?					31	х	
32a	Does the organization hire or use							
	contributions?	•	•			32a		Х
b	If "Yes," describe in Part II.							
	If the organization didn't report an	amount in c	olumn (c) for a type of pro	perty for which column (a)	is checked,			
	describe in Part II.				,			
For Pa	aperwork Reduction Act Notice, see the Inst	ructions for Fo	rm 990.		Schedule	M (Fo	rm 990) 2022

Supplemental Information to Form 990 or 990-EZ

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



Department of the Treasury Internal Revenue Service Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Name of the organization Employer ide

MANHATTAN THEATRE CLUB, INC.

Employer identification number

FORM 990, PART VI, SECTION B, LINE 11

A DRAFT OF FORM 990 IS SENT TO THE FULL BOARD OF DIRECTORS AND OFFICERS

FOR REVIEW AND APPROVAL.

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

BOARD MEMBERS AND OFFICERS ARE REQUESTED TO COMPLETE ANNUAL

CERTIFICATIONS TO REPRESENT ADHERENCE TO THE CONFLICT OF INTEREST POLICY.

FORM 990, PART VI, SECTION B, LINE 15

EXECUTIVE SALARIES ARE REVIEWED AND SET BY THE COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS USING DATA COMPARING SALARIES TO SIMILAR NON-PROFITS IN NEW YORK CITY AND TO THEATRES OF COMPARATIVE SIZE NATIONALLY. SALARIES FOR OTHER OFFICERS AND KEY EMPLOYEES ARE SET USING COMPARATIVE DATA FOR OTHER NON-PROFIT THEATRES OF SIMILAR SIZE LOCALLY AND THROUGHOUT THE COUNTRY.

FORM 990, PART VI, SECTION C, LINE 19

FORM 990 IS AVAILABLE ON GUIDESTAR.ORG. FULL AUDITED FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST AND ARE POSTED ON THE MTC'S WEBSITE AND THE NEW YORK STATE CHARITIES BUREAU WEBSITE.

FORM 990, PART XII, LINE 2C

THE AUDIT COMMITTEE ASSUMES RESPONSIBILITY FOR THE OVERSIGHT OF THE AUDIT.

Schedule O (Form 990 or 990-EZ) 2022				
Name of the organization	Employer identification number			
MANHATTAN THEATRE CLUB, INC.	23-7086643			

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

MTC'S WORK INCLUDES PRODUCING AND DEVELOPING NEW WORK ON AND OFF-BROADWAY, NURTURING ARTISTS THROUGHOUT THEIR CAREERS, AND POSITIVELY IMPACTING THE LIVES OF MANY THROUGH INNOVATIVE EDUCATION PROGRAMS. WE ARE COMMITTED TO EQUITY, DIVERSITY AND INCLUSION IN ALL OF OUR WORK, BOTH ON AND OFF THE STAGE. FORM 990, PART III - PROGRAM SERVICE

LINE 4A, PROGRAM SERVICE

MANHATTAN THEATRE CLUB'S MISSION SINCE 1972 HAS BEEN TO DEVELOP AND PRESENT NEW WORK IN A DYNAMIC, SUPPORTIVE ENVIRONMENT; TO IDENTIFY AND COLLABORATE WITH THE MOST EXCITING NEW AS WELL AS ACCOMPLISHED ARTISTS; AND TO PRODUCE A DIVERSE REPERTOIRE OF INNOVATIVE, ENTERTAINING, AND THOUGHT-PROVOKING PLAYS AND MUSICALS BY AMERICAN AND INTERNATIONAL WRITERS. SINCE 1989, MTC EDUCATION, WHICH USES THE POWER OF LIVE THEATRE AND PLAYWRITING TO AWAKEN MINDS, IGNITE IMAGINATIONS, OPEN HEARTS, AND CHANGE LIVES, HAS ALSO BEEN AN IMPORTANT PART OF OUR WORK. IN THE YEAR ENDING JUNE 30, 2023, MANHATTAN THEATRE CLUB PRODUCED A ROBUST SLATE OF PLAYS WHICH WERE ATTENDED BY 152,449 AUDIENCE MEMBERS: THE BROADWAY PREMIERE OF MARTYNA MAJOK'S "COST OF LIVING"; THE AMERICAN PREMIERE OF "THE COLLABORATION" BY ANTHONY MCCARTEN, AND THE WORLD PREMIERE OF "SUMMER, 1976" BY DAVID AUBURN AT THE SAMUEL J. FRIEDMAN THEATRE ON BROADWAY; AND THE NEW YORK PREMIERE OF "WHERE THE MOUNTAIN MEETS THE SEA" BY JEFF AUGUSTIN WITH MUSIC BY THE BENGSONS, THE WORLD PREMIERE OF "THE BEST WE COULD" BY EMILY FELDMAN, AND THE NEW YORK PREMIERE OF "KING JAMES" BY RAJIV JOSEPH OFF-BROADWAY AT NY CITY CENTER STAGE I. IN THE SAME YEAR, MTC COMMISSIONED 13 NEW PLAYS, HELD 26 DEVELOPMENTAL READINGS AND WORKSHOPS, CONTINUED INSTITUTIONAL WORK TOWARDS BECOMING AN ANTI-RACIST ORGANIZATION, AND REACHED 3,431 STUDENTS AND LIFELONG LEARNERS, MANY OF WHOM WERE EXPERIENCING LIVE THEATRE FOR THE FIRST TIME, THROUGH THE PORTFOLIO OF PROGRAMS RUN BY MTC EDUCATION.

LINE 4B, PROGRAM SERVICE

THROUGH CLASSROOM AND ON-SITE WORKSHOPS AND INFORMED ENCOUNTERS WITH THE WORKS ON OUR STAGES, MTC EDUCATION AWAKENS MINDS, IGNITES IMAGINATIONS, OPENS HEARTS, AND CHANGES LIVES. WE ENGAGE LEARNERS OF ALL AGES AND FROM DISPARATE COMMUNITIES - LOCALLY, NATIONALLY, AND INTERNATIONALLY - IN AN ARRAY OF PROGRAMS TAILORED TO THEIR RESPECTIVE NEEDS AND CIRCUMSTANCES. THESE INCLUDE IN-SCHOOL RESIDENCIES, STUDENT AND FAMILY MATINEES, TEACHER WORKSHOPS, AN AFTER-SCHOOL PLAYWRITING PROGRAM, AND AN INTERNET-BASED DISTANCE-LEARNING PLAYWRITING AND PRODUCTION PROJECT. STARGATE THEATRE, OUR WORKFORCE READINESS AND THEATRE MAKING PROJECT, ENABLES YOUNG MEN FROM DIFFICULT CIRCUMSTANCES TO CREATE,

JSA

Schedule O (Form 990 or 990-EZ) 2022		Page
Name of the organization	Employer identification number	
MANHATTAN THEATRE CLUB, INC.	23-7086643	

FORM 990, PART III - PROGRAM SERVICE

REHEARSE, AND PERFORM AN ORIGINAL PLAY IN OUR OFF-BROADWAY BLACK-BOX THEATRE. OUR ROBUST THEATRE MANAGEMENT TRAINING PROGRAM CULTIVATES THE NEXT GENERATION OF THEATRE PROFESSIONALS. IN RESPONSE TO THE PANDEMIC, MTC EDUCATION RECONFIGURED MOST OF OUR PROGRAMS FOR REMOTE DELIVERY, THEREBY ENABLING STUDENTS AND TEACHERS TO CONTINUE TO PARTICIPATE IN CREATIVE, INTERACTIVE THEATRE-BASED LEARNING EXPERIENCES VIA LIVE AND PRE-RECORDED VIDEO.

LINE 4C, PROGRAM SERVICE

ARTISTIC DEVELOPMENT: MTC FOCUSES ON PRESENTING NEW YORK, AMERICAN AND WORLD PREMIERES OF INNOVATIVE THEATRE OF THE HIGHEST QUALITY. MTC'S ARTISTIC DEVELOPMENT DEPARTMENT OVERSEES THE DEVELOPMENT OF NEW WORKS, NURTURING THE GROWTH OF PLAYS THAT GO ON TO BE PRODUCED AT MTC AND AT OTHER THEATRES AROUND THE COUNTRY AND THE WORLD. WE STRIVE TO BUILD ONGOING RELATIONSHIPS WITH PLAYWRIGHTS, SUPPORTING THEM THROUGHOUT THEIR CAREERS AND CREATING AN ENVIRONMENT IN WHICH WRITERS AND THEATRE ARTISTS ARE SUPPORTED BY THE FINEST PROFESSIONALS IN EVERY ASPECT OF PRODUCTION. MTC'S ARTISTIC DEVELOPMENT PROGRAM OFFERS COMMISSIONS, SCRIPT EVALUATION, DRAMATURGICAL SUPPORT, READINGS AND WORKSHOPS. THIS YEAR, WE HAVE REAFFIRMED OUR COMMITMENT TO EQUITY, DIVERSITY AND INCLUSION AND UNDERTAKEN PLANS TO PRIORITIZE, EXPAND, AND RE-ENVISION OUR POLICIES AND ACTIONS. IN THIS PROCESS, WE ARE GUIDED BY OUR DESIRE TO SUPPORT BLACK, INDIGENOUS, AND POC THEATRE-MAKERS AND TO AMPLIFY THEIR VOICES-A DESIRE WHICH HAS IMPACTED OUR PROGRAMMING AND ARTISTIC PLANNING, INCLUDING COMMISSIONS AND VIRTUAL OFFERINGS, AS WELL AS OUR ADMINISTRATIVE POLICIES AND INITIATIVES REGARDING OUR STAFF, BOARD OF DIRECTORS AND PRODUCING PRACTICES, INCLUDING AUDIENCE DEVELOPMENT. MORE INFORMATION CAN BE FOUND AT WWW.MANHATTANTHEATRECLUB.COM.

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Schedule O (Form 990 or 990-EZ) 2022		Page 2
Name of the organization	Employer	identification number
MANHATTAN THEATRE CLUB, INC.	23-7	086643
FORM 990, PART VII-COMPENSATION OF THE 5 HI		
NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
SERINO COYNE		
437 MADISON AVENUE		
NEW YORK, NY 10022	ADVERTISING	3,280,323.
CITY CENTER		
1101 BRICKELL AVE		
C/O 311 WEST 43RD STR., NY 10036	RENT	890,177.
JRM CONSTRUCTION MANAGEMENT, LLC		
242 W 36TH ST.		
NEW YORK, NY 10018	CONSTRUCTION	791,446.
DCM, INC.		
PO BOX 4707		
SUNNYSIDE, NY 11104	TELEMARKETING	555,664.
EMPIRE TECHNICAL FABRICATION		
90 NEWARK POMPTON TURNPIKE		
WAYNE, NJ 07470	SET DESIGN	299,045.

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SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

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

Department of the Treasury Internal Revenue Service Name of the organization

MANHATTAN THEATRE CLUB, INC.

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

				-	
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)	-				
(2)	-				
(3)	-				
(4)	-				
(5)	-				
(6)					

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g Section 5 contr ent	rolled
						Yes	No
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							

Schedule R (Form 990) 2022



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MANHATTAN THEATRE CLUB, INC.

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Page **2**

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

	more related org	amzador		ararererip aaring ar	e tax year.		-					
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512 - 514)	(f) Share of total income	(g) Share of end-of- year assets	Disprop	h) portionate ations?	amount in box 20 r		j) eral or aging tner?	(k) Percentage ownership
		,,		,			Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)		(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?
								Yes No
(1) MTC PRODUCTIONS, INC. 13-3636769								
311 WEST 43RD STREET NEW YORK, NY 10036	THEATRICAL	NY	MTC	CORP	-1,057.	11,736.	100.0000	x
(2)	-							
(3)	-							
(4)	-							
(5)	-							
(6)	-							
(7)	-							

Schedule R (Form 990) 2022

е	Loans or loan guarantees by related organization(s)				1e	X
f	Dividends from related organization(s)				1f	X
g	Sale of assets to related organization(s)				1g	X
h	Purchase of assets from related organization(s)				1h	X
i	Exchange of assets with related organization(s).				1 i	X
j	Lease of facilities, equipment, or other assets to related organization(s)				1j	X
k	Lease of facilities, equipment, or other assets from related organization(s)				1k	X
I	Performance of services or membership or fundraising solicitations for related organization(s)				11	X
m	Performance of services or membership or fundraising solicitations by related organization(s)				1m	X
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	X
0	Sharing of paid employees with related organization(s)				10	X
р	· · · · · · · · · · · · · · · · · · ·				1p	X
q	Reimbursement paid by related organization(s) for expenses				1q	X
r	Other transfer of cash or property to related organization(s)				1r	X
	Other transfer of cash or property from related organization(s).				1s	X
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete			action thre		i
_2	If the answer to any of the above is "Yes," see the instructions for information on who must complete (a) Name of related organization	this line, including cove (b) Transaction	(c) (c) Amount involved		(d)	
_2	(a)	(b)	(c)	Method	(d)	mining
2	(a)	(b) Transaction	(c)	Method	(d) of dete	mining
	(a)	(b) Transaction	(c)	Method	(d) of dete	mining
2	(a)	(b) Transaction	(c)	Method	(d) of dete	mining
(1)	(a)	(b) Transaction	(c)	Method	(d) of dete	mining
	(a)	(b) Transaction	(c)	Method	(d) of dete	mining
(1)	(a)	(b) Transaction	(c)	Method	(d) of dete	mining
(1)	(a)	(b) Transaction	(c)	Method	(d) of dete	mining
(1) (2) (3)	(a)	(b) Transaction	(c)	Method	(d) of dete	mining
(1)	(a)	(b) Transaction	(c)	Method	(d) of dete	mining
(1) (2) (3) (4)	(a)	(b) Transaction	(c)	Method	(d) of dete	mining
(1) (2) (3)	(a)	(b) Transaction	(c)	Method	(d) of dete	mining
(1) (2) (3) (4) (5)	(a)	(b) Transaction	(c)	Method	(d) of dete	mining
(1) (2) (3) (4) (5) (6)	(a)	(b) Transaction	(c) Amount involved	Method	(d) of dete unt invo	rmining lved
(1) (2) (3) (4) (5) (6) JSA	(a) Name of related organization	(b) Transaction	(c) Amount involved	Method amou	(d) of dete unt invo	rmining lved
(1) (2) (3) (4) (5) (6) JSA	(a)	(b) Transaction	(c) Amount involved	Method amou	(d) of dete unt invo	rmining lved

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s).

d Loans or loan guarantees to or for related organization(s)

During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

MANHATTAN THEATRE CLUB, INC.

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Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

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Х

Yes No

1a

1b 1c

1d 1e

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Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under	sec 501(organiz	e) partners ction (c)(3) zations?	(f) Share of total income	(g) Share of end-of-year assets	Disprop	h) ortionate ations?	(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	man	(j) eral or aging mer?	(k) Percentage ownership
			sections 512 - 514)	Yes	No			Yes	No	(1 0 1 0 0 0)	Yes	No	
(1)	_												
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													
(16)													

Schedule R (Form 990) 2022

 Part VII
 Supplemental Information

 Provide additional information for responses to questions on Schedule R. See instructions.