

Return of Organization Exempt From Income Tax

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

2003

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2003 calendar year, or tax year beginning 7/1/2003, and ending 6/30/2004

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return
 Amended return
 Application pending

C Name of organization
COCOA VILLAGE PLAYHOUSE, INC.
 Number and street (or P O box if mail is not delivered to street address) Room/suite
1519 CLEARLAKE ROAD
 City or town State or country ZIP + 4
COCOA FL 32922

D Employer identification number
59-2612709

E Telephone number
321.433.7030

F Accounting method: Cash Accrual
 Other (specify) **▶**

G Website: **▶** N/A

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

K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 **▶** 759,587

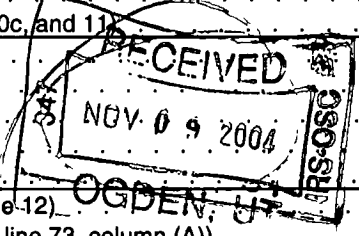
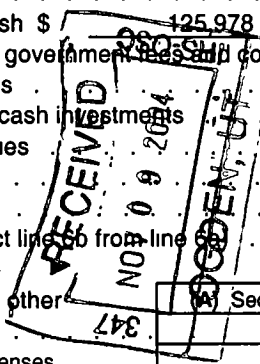
H and I are not applicable to section 527 organizations
H(a) Is this a group return for affiliates? Yes No
H(b) If "Yes," enter number of affiliates **▶** _____
H(c) Are all affiliates included? Yes No (If "No," attach a list. See instructions.)
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No
I Group Exemption Number **▶** _____
M Check if the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF)

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 18 of the instructions.)

1	Contributions, gifts, grants, and similar amounts received:			
a	Direct public support	1a	114,213	
b	Indirect public support	1b		
c	Government contributions (grants)	1c	11,765	
d	Total (add lines 1a through 1c) (cash \$ <u>125,978</u> noncash \$ _____)	1d		125,978
2	Program service revenue including government fees and contracts (from Part VII, line 93)	2		583,853
3	Membership dues and assessments	3		0
4	Interest on savings and temporary cash investments	4		9,202
5	Dividends and interest from securities	5		0
6a	Gross rents	6a		
b	Less: rental expenses	6b		
c	Net rental income or (loss) (subtract line 6b from line 6a)	6c		0
7	Other investment income (describe _____)	7		0
8a	Gross amount from sales of assets other than inventory	8a	0	
b	Less: cost or other basis and sales expenses	8b	0	
c	Gain or (loss) (attach schedule)	8c	0	
d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8d		0
9	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>			
a	Gross revenue (not including \$ <u>114,213</u> of contributions reported on line 1a)	9a	27,346	
b	Less: direct expenses other than fundraising expenses	9b	0	
c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c		27,346
10a	Gross sales of inventory, less returns and allowances	10a		
b	Less: cost of goods sold	10b		
c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c		0
11	Other revenue (from Part VII, line 103)	11		13,208
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12		759,587
13	Program services (from line 44, column (B))	13		543,876
14	Management and general (from line 44, column (C))	14		187,404
15	Fundraising (from line 44, column (D))	15		46,213
16	Payments to affiliates (attach schedule)	16		0
17	Total expenses (add lines 16 and 44, column (A))	17		777,493
18	Excess or (deficit) for the year (subtract line 17 from line 12)	18		-17,906
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19		403,774
20	Other changes in net assets or fund balances (attach explanation)	20		0
21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21		385,868

For Paperwork Reduction Act Notice, see the separate instructions.

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Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See page 22 of the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ 0 noncash \$ 0)	0	0		
23	Specific assistance to individuals (attach schedule)	0	0		
24	Benefits paid to or for members (attach schedule)	0	0		
25	Compensation of officers, directors, etc.	0	0	0	0
26	Other salaries and wages	237,880	174,994	43,633	19,253
27	Pension plan contributions	8,640	4,320	3,456	864
28	Other employee benefits	9,235	4,617	3,695	923
29	Payroll taxes	17,398	12,994	3,338	1,066
30	Professional fundraising fees	0	0	0	0
31	Accounting fees	2,675	0	2,675	0
32	Legal fees	0	0	0	0
33	Supplies	52,897	12,578	40,319	0
34	Telephone	4,823	0	4,823	0
35	Postage and shipping	2,274	0	2,274	0
36	Occupancy	10,835	10,835	0	0
37	Equipment rental and maintenance	13,876	8,969	4,907	0
38	Printing and publications	41,793	22,089	13,559	6,145
39	Travel	8,202	4,556	3,646	0
40	Conferences, conventions, and meetings	0	0	0	0
41	Interest	0	0	0	0
42	Depreciation, depletion, etc. (attach schedule)	0	0	0	0
43	Other expenses not covered above (itemize). a ADVERTISING	67,571	65,645	1,926	0
	b ROYALTY/ARTIST FEES	45,089	45,089	0	0
	c OTHER EVENT RELATED EXPENSES	61,539	48,694	0	12,845
	d CONTRACTED SERVICES	98,832	91,269	7,563	0
	e CAPITAL OUTLAY	91,569	37,227	49,225	5,117
	f MISC.	2,365	0	2,365	0
44	Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15.	777,493	543,876	187,404	46,213

Joint Costs. Check if you are following SOP 98-2.
 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ 0; (ii) the amount allocated to Program services \$;
 (iii) the amount allocated to Management and general \$; and (iv) the amount allocated to Fundraising \$

Part III Statement of Program Service Accomplishments (See page 25 of the instructions.)

What is the organization's primary exempt purpose? CULTURAL ACTIVITIES	Program Service Expenses Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others
a DIRECTED AND PRODUCED CULTURAL PERFORMANCES BENEFITING BREVARD COUNTY PROVIDED HISTORIC COCOA VILLAGE PLAYHOUSE TO OTHER CULTURAL PERFORMING ARTS GROUPS (Grants and allocations \$)	543,876
b (Grants and allocations \$)	
c (Grants and allocations \$)	
d (Grants and allocations \$)	
e Other program services (attach schedule) (Grants and allocations \$)	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	543,876

Part IV Balance Sheets (See page 25 of the instructions.)

				(A)		(B)	
				Beginning of year		End of year	
Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.							
Assets	45	Cash—non-interest-bearing		700	45	700	
	46	Savings and temporary cash investments		335,107	46	355,484	
	47 a	Accounts receivable	47a 47,214				
	b	Less: allowance for doubtful accounts	47b 0	42,707	47c	47,214	
	48 a	Pledges receivable	48a 12,850				
	b	Less: allowance for doubtful accounts	48b 0	102,334	48c	12,850	
	49	Grants receivable		11,700	49	11,765	
	50	Receivables from officers, directors, trustees, and key employees (attach schedule)		0	50	0	
	51 a	Other notes and loans receivable (attach schedule)	51a 0				
	b	Less: allowance for doubtful accounts	51b 0	0	51c	0	
	52	Inventories for sale or use			52		
	53	Prepaid expenses and deferred charges		1,113	53	1,581	
	54	Investments—securities (attach schedule)		0	54	0	
	55 a	Investments—land, buildings, and equipment: basis	55a 0				
b	Less: accumulated depreciation (attach schedule)	55b 0	0	55c	0		
56	Investments—other (attach schedule)		0	56	0		
57 a	Land, buildings, and equipment: basis	57a 0					
b	Less: accumulated depreciation (attach schedule)	57b 0	0	57c	0		
58	Other assets (describe)		0	58	0		
59	Total assets (add lines 45 through 58) (must equal line 74)		493,661	59	429,594		
Liabilities	60	Accounts payable and accrued expenses		58,949	60	41,096	
	61	Grants payable		0	61		
	62	Deferred revenue		30,750	62	2,250	
	63	Loans from officers, directors, trustees, and key employees (attach schedule)		0	63	0	
	64 a	Tax-exempt bond liabilities (attach schedule)		0	64a	0	
	b	Mortgages and other notes payable (attach schedule)		0	64b	0	
	65	Other liabilities (describe)		188	65	380	
66	Total liabilities (add lines 60 through 65)		89,887	66	43,726		
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.						
	67	Unrestricted		364,857	67	308,907	
	68	Temporarily restricted		38,917	68	76,961	
	69	Permanently restricted		0	69		
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.						
	70	Capital stock, trust principal, or current funds			70		
	71	Paid-in or capital surplus, or land, building, and equipment fund			71		
	72	Retained earnings, endowment, accumulated income, or other funds			72		
73	Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)		403,774	73	385,868		
74	Total liabilities and net assets / fund balances (add lines 66 and 73)		493,661	74	429,594		

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

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See page 27 of the instructions.)

a	Total revenue, gains, and other support per audited financial statements	a	759,587
b	Amounts included on line a but not on line 12, Form 990:		
(1)	Net unrealized gains on investments . . . \$		
(2)	Donated services and use of facilities . . . \$		
(3)	Recoveries of prior year grants \$		
(4)	Other (specify):		
	----- \$		
	----- \$		
	Add amounts on lines (1) through (4) . . .	b	0
c	Line a minus line b	c	759,587
d	Amounts included on line 12, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 \$		
(2)	Other (specify):		
	----- \$		
	----- \$		
	Add amounts on lines (1) and (2) . . .	d	0
e	Total revenue per line 12, Form 990 (line c plus line d)	e	759,587

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

a	Total expenses and losses per audited financial statements	a	777,493
b	Amounts included on line a but not on line 17, Form 990:		
(1)	Donated services and use of facilities . . . \$		
(2)	Prior year adjustments reported on line 20, Form 990 \$		
(3)	Losses reported on line 20, Form 990 \$		
(4)	Other (specify):		
	----- \$		
	----- \$		
	Add amounts on lines (1) through (4) . . .	b	0
c	Line a minus line b	c	777,493
d	Amounts included on line 17, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 \$		
(2)	Other (specify):		
	----- \$		
	----- \$		
	Add amounts on lines (1) and (2) . . .	d	0
e	Total expenses per line 17, Form 990 (line c plus line d)	e	777,493

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated; see page 27 of the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
Name SEE ATTACHED Str VARIOUS City ST ZIP	Title Hr/WK	0	0	0
Name City ST ZIP	Title Hr/WK			
Name City ST ZIP	Title Hr/WK			
Name City ST ZIP	Title Hr/WK			
Name City ST ZIP	Title Hr/WK			
Name City ST ZIP	Title Hr/WK			
Name City ST ZIP	Title Hr/WK			
Name City ST ZIP	Title Hr/WK			
Name City ST ZIP	Title Hr/WK			
Name City ST ZIP	Title Hr/WK			

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? Yes No
If "Yes," attach schedule—see page 28 of the instructions.

Part VI Other Information (See page 28 of the instructions.)		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76	X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77	X
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	X
b	If "Yes," enter the name of the organization BREVARD COMMUNITY COLLEGE and check whether it is <input checked="" type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.		
81 a	Enter direct and indirect political expenditures. See line 81 instructions	81a	
b	Did the organization file Form 1120-POL for this year?	81b	X
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	82b	279,174
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.	85b	
c	Dues, assessments, and similar amounts from members	85c	
d	Section 162(e) lobbying and political expenditures	85d	
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	0
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12	86a	
b	Gross receipts, included on line 12, for public use of club facilities	86b	
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders	87a	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 0 ; section 4912 0 ; section 4955 0		
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization		0
90 a	List the states with which a copy of this return is filed		
b	Number of employees employed in the pay period that includes March 12, 2003 (See instructions.)	90b	14
91	The books are in care of BREVARD COMMUNITY COLLEGE Telephone no 321.433.7030 Located at 1519 CLEARLAKE ROAD City COCOA ST FL Zip + 4 32922-6598		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year	92	N/A

Part VII Analysis of Income-Producing Activities (See page 33 of the instructions.)

Note: Enter gross amounts unless otherwise indicated:

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a TICKET SALES					470,369
b STARS OF TOMORROW					19,508
c CORPORATE SPONSORS					25,552
d SERVICE CHARGES					68,424
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					9,202
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					27,346
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a MISC.					13,208
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0		0	633,609
105 Total (add line 104, columns (B), (D), and (E))					633,609

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

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 34 of the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
93A	PROCEEDS OF TICKET SALES USED TO MAINTAIN THE HISTORIC COCOA VILLAGE PLAYHOUSE
93B	PERFORMANCE LESSONS FOR CHILDREN
93C	SPONSORS FOR CULTURAL SHOWS AND EVENTS
93D	PER TICKET FEES TO COVER BOX OFFICE COMPUTER EQUIPMENT PURCHASES AND UPGRADES

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 34 of the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%		0	0
	%		0	0
	%		0	0
	%		0	0

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 34 of the instructions.)

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

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

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

Under penalties of perjury, I declare that I have examined this return, including attachments, and believe that it is true, correct, and complete. Declaration of preparer (other than the taxpayer) is based on all information of which preparer has any knowledge.

Please Sign Here

Signature of officer: Mark C. Cherry

MARK C. CHERRY AVP, FINANCIAL SERVICES
Type or print name and title

Paid Preparer's Use Only

Preparer's signature: _____ Date: _____

Firm's name (or yours if self-employed), address, and ZIP + 4: XXXXXXXXXXXXXX

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust
Supplementary Information—(See separate instructions.)

OMB No 1545-0047

2003

Department of the Treasury
Internal Revenue Service

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

Name of the organization

Employer identification number

COCOA VILLAGE PLAYHOUSE, INC.

59-2612709

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Name ANASTACIA HAWKINS-SMITH Str 1519 CLEARLAKE ROAD City COCOA ST FL Zip 32922 Country	Title EXECUTIVE DIR. Avg hr/wk 40	58,644	5,186	0
Name Str City Zip Country	Title Avg hr/wk			
Name Str City Zip Country	Title Avg hr/wk			
Name Str City Zip Country	Title Avg hr/wk			
Name Str City Zip Country	Title Avg hr/wk			
Total number of other employees paid over \$50,000	1			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
Name Str City ST ZIP Country Check here if a business <input type="checkbox"/>		
Name Str City ST ZIP Country Check here if a business <input type="checkbox"/>		
Name Str City ST ZIP Country Check here if a business <input type="checkbox"/>		
Name Str City ST ZIP Country Check here if a business <input type="checkbox"/>		
Name Str City ST ZIP Country Check here if a business <input type="checkbox"/>		
Total number of others receiving over \$50,000 for professional services		

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

		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ <u>0</u> (Must equal amounts on line 38, Part VI-A, or line I of Part VI-B.)		X
Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a	Sale, exchange, or leasing of property?		X
b	Lending of money or other extension of credit?		X
c	Furnishing of goods, services, or facilities?		X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?		X
e	Transfer of any part of its income or assets?		X
3a	Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.)		X
b	Do you have a section 403(b) annuity plan for your employees?		X
4	Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?		X

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)

The organization is not a private foundation because it is: (Please check only ONE applicable box.)

- 5 A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ▶ _____ City _____ ST _____ Country _____
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11 a An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11 b A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)

Provide the following information about the supported organizations. (See page 5 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) *Use cash method of accounting.*

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	268,694	45,813	31,692	38,975	385,174
16 Membership fees received					0
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	624,819	614,101	550,161	461,630	2,250,711
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	5,433	8,801	14,981	3,481	32,696
19 Net income from unrelated business activities not included in line 18					0
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					0
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					0
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets		5,117	8,016	5,534	18,667
23 Total of lines 15 through 22	898,946	673,832	604,850	509,620	2,687,248
24 Line 23 minus line 17	274,127	59,731	54,689	47,990	436,537
25 Enter 1% of line 23	8,989	6,738	6,049	5,096	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 8,731
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1999 through 2002 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b 0
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c 436,537
d Add: Amounts from column (e) for lines: 18 32,696 19 0					26d 51,363
22 18,667 26b 0					26e 385,174
e Public support (line 26c minus line 26d total)					26f 88.23%
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: (2002) (2001) (2000) (1999)					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2002) (2001) (2000) (1999)					
c Add: Amounts from column (e) for lines: 15 0 16 0					27c 0
17 0 20 0 21 0					27d 0
d Add: Line 27a total and line 27b total					27e 0
e Public support (line 27c total minus line 27d total)					27f 0
f Total support for section 509(a)(2) test: Enter amount from line 23, column (e)					27g 0.00%
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27h 0.00%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1999 through 2002, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

Part V Private School Questionnaire (See page 7 of the instructions.)

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

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
29			
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
30			
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)		
31			
32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?		
32a			
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
32b			
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
32c			
d	Copies of all material used by the organization or on its behalf to solicit contributions?		
32d			
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)		
33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges?		
33a			
b	Admissions policies?		
33b			
c	Employment of faculty or administrative staff?		
33c			
d	Scholarships or other financial assistance?		
33d			
e	Educational policies?		
33e			
f	Use of facilities?		
33f			
g	Athletic programs?		
33g			
h	Other extracurricular activities?		
33h			
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)		
34 a	Does the organization receive any financial aid or assistance from a governmental agency?		
34a			
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.		
34b			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation		
35			

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.)

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

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

Limits on Lobbying Expenditures

(The term "expenditures" means amounts paid or incurred.)

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

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

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
See the instructions for lines 45 through 50 on page 11 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
45 Lobbying nontaxable amount					0
46 Lobbying ceiling amount (150% of line 45(e))					0
47 Total lobbying expenditures					0
48 Grassroots nontaxable amount					0
49 Grassroots ceiling amount (150% of line 48(e))					0
50 Grassroots lobbying expenditures					0

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 12 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:

- a** Volunteers
- b** Paid staff or management (Include compensation in expenses reported on lines c through h.)
- c** Media advertisements
- d** Mailings to members, legislators, or the public
- e** Publications, or published or broadcast statements
- f** Grants to other organizations for lobbying purposes
- g** Direct contact with legislators, their staffs, government officials, or a legislative body
- h** Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i** Total lobbying expenditures (Add lines c through h.)

Yes	No	Amount
	X	
	X	
	X	
	X	
	X	
	X	
	X	
	X	
		0

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

THE HISTORIC COCOA VILLAGE PLAYHOUSE, INC.
BOARD OF DIRECTORS
Updated March 2, 2004

Voting Members

<u>APPOINTED</u>	<u>TERM</u>	<u>DATE</u>
Scott Baughan Attorney at Law Johnson & Baughan, P.A. P.O. Box 560695 Rockledge, FL 32956-0695 e-mail: sbaughan@jbclaw.com 636-9600, fax: 632-4866 cell: 403-4078	1 st term (11/02 – 11/05)	11/02
Joan Cerow Realtor McCluskey Realty Inc. GMAC 4100 N. Wickham Road Suite #127 Melbourne, FL 32935 254-0908 (home) 752-0460 (work) 751-2966 (fax) 960-8500 (cell) JCerow@cfl.rr.com	2 nd term (3/01-3/04) Secretary (6/03 – 6/04)	3/98
Dr. Brenda Fettrow Campus President Cocoa Campus 1519 Clearlake Road Cocoa, FL 32922 433-7060, cell: 403-2635 fax: (321)433-7064 FettrowB@brevardcc.edu	BCC President Appointed Position, (6/02 -)	6/02
Walt Gilfilen 912 Jefferson Road Rockledge, FL 32955 e-mail: wlgilf@wmconnect.com 631-1138	1 st term (1/01-1/04)	1/01
Dewey Harris Harris and Satterfield, P.A. 976 Brevard Avenue Suite B Rockledge, FL 32955 Dewey@harrisandsatterfield.com 452-7654 (home) 433-1191 (work)	1 st term (8/01 – 8/04) Treasurer (6/03 – 6/04)	8/01

<p>Ned Kellar Community Leader 3950 Old Settlement Road Merritt Island, FL 32952 e-mail: ntk@digital.net nkellar@cfl.rr.com 453-5130, 455-2262 (fax)</p>	<p>3rd term (10/01-10/04) President Elect 1998 President 1999</p>	<p>10/95</p>
<p>C.R. "Rick" McCotter III McCotter Ford P.O. Box 5729 Titusville, FL 32783 rick@mccotter.com 267-2112</p>	<p>1st term (9/01 – 9/03) BCC Trustee Appointed Position</p>	<p>8/01</p>
<p>Larry McIntyre President, Clear Channel Outdoor 2890 Harper Road Melbourne, FL 32904 Larrymcintyre@clearchannel.com 726-6611 x201 (Office) 726-1565 (FAX)</p>	<p>2nd term (9/02-9/05) President Elect (6/00–6/01) President (6/01-6/02) President (6/02-6/03) Past President (6/03 – 6/04)</p>	<p>9/99</p>
<p>Judy Parrish 37 Derby Street Cocoa, FL. 32922 636-7384 (Home) 302-2837 (Cell) * flsunshine03@msn.com</p>	<p>1st Term (1/04-1/07)</p>	<p>1/04</p>
<p>Susan Freeland Perers Vice President, Corporate Development American Business Interiors 2015 South Waverly Place Melbourne, FL 32901 e-mail: susanp@abinteriors.com www.abinteriors.com; ab12015@aol.com 723-5003 ext. 21, (fax) 984-4221</p>	<p>2nd term (2/01-2/04) President Elect (6/03 – 6/04)</p>	<p>2/98</p>
<p>Leona Pick 104 Riverside Drive #903 Cocoa, FL. 32922 636-9715 (Home) LEOPICK@aol.com</p>	<p>1st Term (12/03-12/06)</p>	<p>12/03</p>

<p>Tom Price President, Tom Price Enterprises 1996 Highway U.S. 1 Rockledge, FL 32955 Tprice3261@aol.com 632-2554 work 639-0109 home</p>	<p>1st term (6/02 –6/05)</p>	<p>6/02</p>
<p>Dixie Sansom Director of Public Relations, Canaveral Port Authority P. O. Box 98 Cocoa, FL 32923-0098 Dsansom@portcanaveral.org 783-7831 ex.244 (work), 633-8001 (home) 676-6824 (pager), 783-3748 (fax)</p>	<p>2nd term (9/02-9/05)</p>	<p>9/99</p>
<p>Kathi Schillo President/CEO Cocoa Beach Area Chamber of Commerce 400 Fortenberry Road Merritt Island, FL 32952 e-mail: kschillo@cocoabeachchamber.com on-line: www.cocoabeachchamber.com 454-2020 (work), 459-2200 (home) (229) 395-2175 (cell)</p>	<p>1st term (12/03-12/06)</p>	<p>12/03</p>
<p>Jean Starkey Aladdin Real Estate - ERA 1365 N. Courtenay Pkwy., Ste. C Merritt Island, FL 32953-4484 e-mail: CJStarkey2@aol.com on-line: www.aladdinera.com 452-1910 (work), 452-6676 (home) 427-5060 (cell) 452-7074 (fax)</p>	<p>2nd term (1/02 – 1/05) Treasurer (6/00–6/01) President Elect (6/01-6/02) President Elect (6/02-6/03) President (6/03 – 6/04)</p>	<p>8/99</p>

Non-Voting Members

Anastacia Hawkins-Smith
Executive Director
Cocoa Village Playhouse
1604 Harvard Drive
Cocoa, FL 32922
636-5050 (work), 632-4722 (work)
591-5007 (cell)
635-4621 (digital pager)

Non-Voting Members (continued)

Patti Larson
Accounting Manager
Brevard Community College
5575 Datura Street
Cocoa, FL. 32927
637-1745 home
302-9212 cell
433-7040 work
larsonp@brevard.cc.edu

CAPITAL CAMPAIGN

Chairperson: Jean Starkey (see information above)

Honorary Chairperson

Dr. Maxwell C. King
1384 Walton Heath Ct.
Rockledge, FL 32955
(321)632-5659

C:\My Documents\Board Meeting\Address List 2002-2003 NEW.doc

Revised: 3/2/04

Line 1a (990) - Direct public support

1	Contributions	1	114,213
2	Non Cash Contributions	2	
3	Special events contributions (Line 9 - Special Events)	3	0
4	.....	4	
5	.....	5	
6	.....	6	
7	.....	7	
8	.....	8	
9	.....	9	
10	Total	10	114,213

Line 9 (990) - Special events and activities

	Event A	Event B	Event C	All others	Totals
1	Special event name	STARS FNDRS			
1a	Number of special events	1			
2	Gross receipts	27,346			27,346
3	Less contributions				0
4	Gross revenue	27,346	0	0	27,346
5	Less direct expenses				0
6	Net income or (loss)	27,346	0	0	27,346

Line 47 (990) - Accounts receivable

	Accounts receivable		Allowance for doubtful accounts	
	Beginning	End	Beginning	End
1	CAST CONSIGNMENTS	226	341	
2	BCC AGENCY FUND	42,481	46,873	
3	.....		
4	.....		
5	.....		
6	.....		
7	.....		
8	.....		
9	.....		
10	.....		
11	Total accounts receivable	42,707	47,214	0

Line 48 (990) - Pledges receivable

	Pledges receivable		Allowance for doubtful accounts	
	Beginning	End	Beginning	End
1	CITY OF COCOA REDEVELOPMENT AGENC	100,000	0	
2	ANDERSON, J. PATRICK	1,000	1,000	
3	BARNHART, SARA	500	500	
4	KIRKLAND, KAREN	500	500	
5	MCINTYRE, LARRY	334	0	
6	.....		
7	SEE CAPITAL CAMPAIGN REPORT	0	10,850	
8	.....		
9	.....		
10	.....		
11	Total pledges receivable	102,334	12,850	0

Line 65 (990) - Other liabilities

		Beginning	End
1	GIFT CERTIFICATES	188	380
2			
3			
4			
5			
6			
7			
8			
9			
10			
11	Total other liabilities	188	380