

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)

2002

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

For the 2002 calendar year, or tax year beginning JUNE 01, 2002, and ending MAY 31, 2003

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

Please use IRS label or print or type. See Specific Instructions

Name of organization: TITUSVILLE PLAYHOUSE, INC.
Number and street (or P O box if mail is not delivered to street address): 301 JULIA STREET
City or town, state or country, and ZIP + 4: Titusville FL 32796-3520

Employer identification number: 59-6177447
Telephone number: (321) 268-3711
Acctg method: [] Cash [X] Accrual [] Other (specify)

Web site

Organization type (check only one) [X] 501(c)(3) [] 4947(a)(1) or [] 527

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.

H & I are not applicable to section 527 organizations
H(a) Is this a group return for affiliates? [] Yes [X] No
H(b) If "Yes," enter number of affiliates
H(c) Are all affiliates included? (if "No," attach a list. See instructions) [] Yes [] No
H(d) Is this a separate return filed by an organization covered by a group ruling? [] Yes [X] No
I Enter 4-digit GEN

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 321,477

M Check [] if 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 Specific Instructions)

Table with 21 rows and 4 columns (a, b, c, d) for revenue and expenses. Includes sub-rows for contributions, program service revenue, membership dues, interest, dividends, gross rents, investment income, sales of assets, special events, inventory, and total revenue/expenses.

10/23/03

OCT 23 2003

SCANNED EXPENSES

NET ASSETS

For Paperwork Reduction Act Notice, see the separate instructions.

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 Specific Instructions)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 18 of Part I	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____)	22			
23 Specific assistance to individuals (attach schedule)	23			
24 Benefits paid to or for members (attach schedule)	24			
25 Compensation of officers, directors, etc	25 24,380		24,380	
26 Other salaries and wages	26 59,743	47,652	12,091	
27 Pension plan contributions	27			
28 Other employee benefits	28			
29 Payroll taxes	29 5,123	2,920	2,203	
30 Professional fundraising fees	30			
31 Accounting fees	31 2,099		2,099	
32 Legal fees	32			
33 Supplies	33 1,070		1,070	
34 Telephone	34 3,717		3,717	
35 Postage and shipping	35 3,558		3,558	
36 Occupancy	36 26,428		26,428	
37 Equipment rental and maintenance	37 16,075		16,075	
38 Printing and publications	38 1,233	1,233		
39 Travel	39			
40 Conferences, conventions, and meetings	40			
41 Interest	41 4,862		4,862	
42 Depreciation, depletion, etc (attach schedule)	42 19,554		19,554	
43 Other expenses not covered above (itemize) a PROMOTIONS	43a 6,078		6,078	
b INSURANCE	43b 15,248		15,248	
c BANK CHARGES/OTHER	43c 1,881		1,881	
d DUES/SUB	43d 1,413		1,413	
e See attachment 7	43e			
44 Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44 237,668	94,497	143,171	0

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) aggregate amount of these joint costs \$ _____, (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 Specific Instructions)

What is the organization's primary exempt purpose? **LIVE THEATRE PERFORMANCES & EDUCATION**
 All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others)

Program Service Expenses (Required for 501(c)(3) & (4) orgs & 4947(a)(1) trusts, but optional for others)

a PRODUCTION OF LIVE THEATRICAL PRODUCTIONS FOR A TOTAL OF 81 PERFORMANCES OF LIVE PLAYS WITH 14322 AUDIENCE MEMBERS AND APPROXIMATELY 1131 PARTICIPANTS AND VOLUNTEERS. (Grants and allocations \$ _____)	52,621
b PROGRAM ADVERTISING - SALE OF PROGRAM SPACE TO RAISE FUNDS TO OFFSET PROGRAM PREPARATION AND PRINTING (Grants and allocations \$ _____)	1,233
c SALE OF BEVERAGES AND SNACKS DURING LIVE PERFORMANCES FOR THE BENEFIT AND COMFORT OF PATRONS. PROCEEDS ARE USED TO OFFSET PRODUCTION COSTS WHICH BENEFITS THE EXEMPT PURPOSE OF THE ORGANIZATION. (Grants and allocations \$ _____)	7,575
d CLASSES, WORKSHOPS, AND OTHER ACTIVITIES CONDUCTED TO EDUCATE ADULTS AND CHILDREN ABOUT ARTISTIC AND TECHNICAL THEATRE. THERE WERE 64 WORKSHOPS, 3 CAMPS, 12 PERFORMANCES WITH 3389 ATTENDEES AND 687 PARTICIPANTS (Grants and allocations \$ _____)	33,068
e Other program services (attach schedule) (Grants and allocations \$ _____)	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	94,497

Part IV Balance Sheets (See Specific Instructions)

Note		Where required, attached schedules and amounts within the description column should be for end-of-year amounts only		(A)		(B)
				Beginning of year		End of year
ASSETS	45	Cash -- non-interest-bearing		8,493	45	20,292
	46	Savings and temporary cash investments		4,250	46	251
	47a	Accounts receivable	47a 5,374			
	b	Less allowance for doubtful accounts	47b	374	47c	5,374
	48a	Pledges receivable	48a			
	b	Less allowance for doubtful accounts	48b		48c	
	49	Grants receivable			49	
	50	Receivables from officers, directors, trustees, and key employees (attach schedule)			50	
	51a	Other notes and loans receivable (attach schedule)	51a			
	b	Less allowance for doubtful accounts	51b		51c	
	52	Inventories for sale or use			52	
	53	Prepaid expenses and deferred charges		11,873	53	5,183
	54	Investments -- securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> FMV			54	
	55a	Investments -- land, buildings, and equipment basis	55a			
	b	Less accumulated depreciation (attach schedule)	55b		55c	
	56	Investments -- other (attach schedule)			56	
	57a	Land, buildings, and equipment basis	57a 755,854			
	b	Less accumulated depreciation (attach schedule)	57b 416,298	348,635	57c	339,556
	58	Other assets (describe <input type="checkbox"/>)		299	58	299
59	Total assets (add lines 45 through 58) (must equal line 74)		373,924	59	370,955	
LIABILITIES	60	Accounts payable and accrued expenses		10,190	60	3,749
	61	Grants payable			61	
	62	Deferred revenue		28,201	62	10,353
	63	Loans from officers, directors, trustees, and key employees (attach schedule)			63	
	64a	Tax-exempt bond liabilities (attach schedule)			64a	
	b	Mortgages and other notes payable (attach schedule)		41,042	64b	33,330
	65	Other liabilities (describe <input type="checkbox"/>)			65	
	66	Total liabilities (add lines 60 through 65)		79,433	66	47,432
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74					
	67	Unrestricted		294,491	67	323,523
	68	Temporarily restricted			68	
	69	Permanently restricted			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)		294,491	73	323,523
	74	Total liabilities and net assets / fund balances (add lines 66 and 73)		373,924	74	370,955

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 Specific Instructions)

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

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

a Total expenses and losses per audited financial statements	▶	a
b Amounts included on line a but not on line 17, Form 990		
(1) Donated services & 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
c Line a minus line b	▶	c
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
e Total expenses per line 17, Form 990 (line c plus line d)	▶	e 0

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated, see Specific 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 comp	(E) Expense account and other allowances
NANCY WOLFORD 4907 CURADOC CIRCLE TITUSVILLE, FL	PRESIDENT 4	0		
ANDY BOYD 2870 DUTTON DRIVE TITUSVILLE, FL	VP PLANNING 4	0		
NINA NICOLAISEN 3749 OAK HILL DRIVE TITUSVILLE, FL	TREASURER 4	0		
ANDREW VILLAIN 4150 SHERWOOD DRIVE TITUSVILLE, FL	VP PRODUCTION 4	0		
MARY ANN JAMESON 4030 INDIAN RIVER DRIVE See attachment 8	SECRETARY 4	0		

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 Specific Instructions

Part VI Other Information (See Specific Instructions)		Yes	No
76	Did organization engage in any activity not previously reported to IRS? If "Yes," attach detailed description of each activity		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		X
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
78b	If "Yes," has it filed a tax return on Form 990-T for this year?		X
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		X
80a	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?		X
80b	If "Yes," enter the name of the organization <input type="checkbox"/> and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt		
81a	Enter direct or indirect political expenditures See line 81 instructions	81a	N/A
81b	Did the organization file Form 1120-POL for this year?	81b	N/A
82a	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
82b	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	N/A
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
83b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	N/A
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
84b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A
85a	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?	85a	N/A
85b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? 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	N/A
85c	Dues, assessments, and similar amounts from members	85c	N/A
85d	Section 162(e) lobbying and political expenditures	85d	N/A
85e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A
85f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A
85g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	N/A
85h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A
86a	501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12	86a	N/A
86b	Gross receipts, included on line 12, for public use of club facilities	86b	N/A
87a	501(c)(12) orgs Enter a Gross income from members or shareholders	87a	N/A
87b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87b	N/A
88	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
89a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 <input type="checkbox"/> N/A, section 4912 <input type="checkbox"/> N/A, section 4955 <input type="checkbox"/> N/A		
89b	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
89c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		N/A
89d	Enter Amount of tax on line 89c, above, reimbursed by the organization		N/A
90a	List the states with which a copy of this return is filed <input type="checkbox"/> FLORIDA		
90b	Number of employees employed in the pay period that includes March 12, 2002 (See instructions)	90b	N/A
91	The books are in care of <input type="checkbox"/> STACY JOHNSON Telephone no <input type="checkbox"/> (321) 268-3711 Located at <input type="checkbox"/> 301 JULIA STREET, TITUSVILLE, FL ZIP + 4 <input type="checkbox"/> 32780		
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 <input type="checkbox"/> 92	92	N/A

Part VII Analysis of Income-Producing Activities (See Specific Instructions)

	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	
Note Enter gross amounts unless otherwise indicated					
93 Program service revenue					
a LIVE THEATRICAL PE					116,844
b PROGRAM ADVERTISIN					4,522
c HOSPITALITY - PERF					20,523
d RISING STARS/ADULT					14,134
e CHILDRENS THEATRE					18,299
f Medicare/Medicaid payments					
g Fees & contracts from govt agencies					
94 Membership dues & assessments					
95 Interest on savings and temporary cash investments			14	9	
96 Dividends & interest from securities					
97 Net rental income or (loss) from real estate					
a debt-financed property			01	10,788	
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			01	33,883	
102 Gross profit/(loss) from sales of inventory					
103 Other revenue a					
b OTHER INCOME			01	178	
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0		44,858	174,322
105 Total (add line 104, columns (B), (D), and (E))					219,180

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 Specific 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	LIVE PERFORMANCES ARE PRIMARY METHOD OF ACCOMPLISHING EXEMPT PURPOS
93B	INCOME FROM PROGRAM ADVERTISING IS USED TO OFFSET EXPENSE OF PROGRA
93C	SALE OF BEVERAGES AND SNACKS ADDS TO REVENUES AND PATRON COMFORT
93D&E	PROGRAMS DESIGNED TO TRAIN FUTURE PERFORMERS AND TECHNICIANS

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See Specific Instructions)

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

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See Specific Instructions)

(a) Did 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, in belief it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has knowledge.

Please Sign Here

Signature of officer: *Stacy Johnson*
 STACY JOHNSON
 Type or print name and title

Paid Preparer's Use Only

Preparer's signature: *Charles R Hunt, CPA*
 Firm's name (or yours if self-employed), address, and ZIP + 4: CHARLES R HUNT CP
 310 CHENEY HWY
 Titusville FL 327

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

OMB No 1545-0047

2002

Department of the Treasury
Internal Revenue Service

Supplementary Information — (See separate instructions.)

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

Name of the organization

TITUSVILLE PLAYHOUSE, INC.

Employer identification number

59-6177447

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

(See 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 empl benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$50,000	0			

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

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

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

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

Schedule A (Form 990 or 990-EZ) 2002

Part III Statements About Activities (See 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 ▶ \$ _____ (Must equal amounts on line 38 Part VI-A, or line I of Part VI-B) 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.	1	X
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) # 5		
a Sale, exchange, or leasing of property?	2a	X
b Lending of money or other extension of credit?	2b	X
c Furnishing of goods, services, or facilities?	2c	X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	X
e Transfer of any part of its income or assets?	2e	X
3 Does the organization make grants for scholarships, fellowships, student loans, etc? (See Note below)	3	X
4 Do you have a section 403(b) annuity plan for your employees?	4	X
Note: Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments.		

Part IV Reason for Non-Private Foundation Status (See the instructions)								
The organization is not a private foundation because it is (Please check only ONE applicable box)								
5 <input type="checkbox"/> A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)								
6 <input type="checkbox"/> A school Section 170(b)(1)(A)(ii) (Also complete Part V)								
7 <input type="checkbox"/> A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)								
8 <input type="checkbox"/> A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)								
9 <input type="checkbox"/> A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state ▶ _____								
10 <input type="checkbox"/> An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the Support Schedule in Part IV-A)								
11a <input type="checkbox"/> An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)								
11b <input type="checkbox"/> A community trust Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)								
12 <input checked="" type="checkbox"/> 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 <input type="checkbox"/> 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 the instructions)								
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:75%;">(a) Name(s) of supported organization(s)</th> <th style="width:25%;">(b) Line number from above</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> </tbody> </table>	(a) Name(s) of supported organization(s)	(b) Line number from above						
(a) Name(s) of supported organization(s)	(b) Line number from above							
14 <input type="checkbox"/> An organization organized and operated to test for public safety Section 509(a)(4) (See 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) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	52,973	32,352	36,947	25,218	147,490
16 Membership fees received		1,050	725	980	2,755
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	164,852	175,113	163,504	140,892	644,361
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	6,265	4,939	2,224	978	14,406
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets #6	8,326	5,156	34,098	6,162	53,742
23 Total of lines 15 through 22	232,416	218,610	237,498	174,230	862,754
24 Line 23 minus line 17	67,564	43,497	73,994	33,338	218,393
25 Enter 1% of line 23	2,324	2,186	2,375	1,742	

26 Organizations described on lines 10 or 11	a Enter 2% of amount in column (e), line 24	26a	N/A
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 1998 through 2001 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts		26b	N/A
c Total support for section 509(a)(1) test. Enter line 24, column (e)		26c	N/A
d Add: Amounts from column (e) for lines 18 _____ 19 _____ 22 _____ 26b _____		26d	N/A
e Public support (line 26c minus line 26d total)		26e	N/A
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))		26f	N/A %

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 (2001) _____ (2000) _____ (1999) _____ (1998) _____
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 (2001) _____ (2000) _____ (1999) _____ (1998) _____	
c Add: Amounts from column (e) for lines 15 _____ 147,490 16 _____ 2,755 17 _____ 644,361 20 _____ 21 _____	27c 794,606
d Add: Line 27a total _____ and line 27b total _____	27d _____
e Public support (line 27c total minus line 27d total)	27e 794,606
f Total support for section 509(a)(2) test. Enter amount from line 23, column (e) 27f 862,754	27g 92.10 %
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))	27h 1.67 %
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 1998 through 2001, 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 the instructions)

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

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

Part VI-A Lobbying Expenditures by Electing Public Charities (See the instructions)

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

N/A

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	
39 Other exempt purpose expenditures	39	
40 Total exempt purpose expenditures (add lines 38 and 39)	40	
41 Lobbying nontaxable amount Enter the amount from the following table --		
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	
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	
Over \$17,000,000	\$1,000,000	
42 Grassroots nontaxable amount (enter 25% of line 41)	42	
43 Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43	
44 Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44	

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

4-Year Averaging Period Under Section 501(h)

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

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities

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

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes	No	Amount
a Volunteers			
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)			

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

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See the instructions)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a Transfers from the reporting organization to a noncharitable exempt organization of

- (i) Cash
(ii) Other assets

b Other transactions

- (i) Sales or exchanges of assets with a noncharitable exempt organization
(ii) Purchases of assets from a noncharitable exempt organization
(iii) Rental of facilities, equipment, or other assets
(iv) Reimbursement arrangements
(v) Loans or loan guarantees
(vi) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received

Table with 3 columns: Question, Yes, No. Rows include 51a(i), a(ii), b(i), b(ii), b(iii), b(iv), b(v), b(vi), and c.

Table with 4 columns: (a) Line no, (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, & sharing arrangements. Content includes SECTION N/A.

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes No

b If "Yes," complete the following schedule

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship. Content includes SECTION N/A.

Depreciation and Amortization (Including Information on Listed Property)

Department of the Treasury
Internal Revenue Service

▶ See separate instructions. ▶ Attach to your tax return

Attachment
Sequence No **67**

Name(s) shown on return TITUSVILLE PLAYHOUSE, INC.	Business or activity to which this form relates FOR FORM 990	Identifying number 59-6177447
--	--	---

Part I Election To Expense Certain Tangible Property Under Section 179

Note If you have any listed property, complete Part V before you complete Part I

1 Maximum amount See the instructions for a higher limit for certain businesses	1	\$24,000
2 Total cost of section 179 property placed in service (see the instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation	3	\$200,000
4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	4	0
5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see the instructions	5	24,000

(a) Description of property	(b) Cost (business use only)	(c) Elected cost
6		

7 Listed property Enter the amount from line 29	7	
8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8	
9 Tentative deduction Enter the smaller of line 5 or line 8	9	
10 Carryover of disallowed deduction from line 13 of your 2001 Form 4562	10	
11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	24,000
12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	
13 Carryover of disallowed deduction to 2003 Add lines 9 and 10, less line 12 ▶	13	

Note Do not use Part II or Part III below for listed property Instead, use Part V

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property)

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see the instructions)	14	
15 Property subject to section 168(f)(1) election (see the instructions)	15	
16 Other depreciation (including ACRS) (see the instructions)	16	

Part III MACRS Depreciation (Do not include listed property) (See the instructions)

Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2002	17	18,801
18 If you are electing under section 168(i)(4) to group any assets placed in service during the tax year into one or more general asset accounts, check here ▶ <input type="checkbox"/>		

Section B -- Assets Placed In Service During 2002 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depr (business/investment use only -- see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27 5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	

Section C -- Assets Placed In Service During 2002 Tax Year Using the Alternative Depreciation System

20a Class life		10,475	15	HY	S/L	701
b 12-year		1,250	12 yrs	HY	S/L	52
c 40-year			40 yrs	MM	S/L	

Part IV Summary (See the instructions)

Copyright Forms (Software Only) - 2002 TWNL

21 Listed property Enter amount from line 28	21	
22 Total Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations -- see instr	22	19,554
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

2002 Federal Depreciation Schedule

00009 TITUSVILLE PLAYHOUSE, INC , 05-31-2003

10-13-2003

Description	Date	Method	Year	Cost	Land/ Other	§179	Spec Allow	Basis	Prior	Current
Land										
LAND	06-01-84	S/L	0	22,459	22,459	0	0	0	0	0
1 Asset	Totals			22,459	22,459	0	0	0	0	0
Improvements										
INTERIOR & FIXTURES	01-01-85	150DBHY	15	29,303	0	0	0	29,303	29,303	0
BALCONY IMPROVEMENTS	07-21-86	S/LHY	40	6,938	0	0	0	6,938	2,682	173
BUILDING IMPROVEMENT	01-21-89	S/LHY	35	93,734	0	0	0	93,734	35,707	2,678
STORAGE	07-07-89	S/L	12	1,489	0	0	0	1,489	1,612	0
DRESSING ROOM PAS	01-30-90	S/LHY	12	209	0	0	0	209	78	9
AWNINGS	11-01-91	S/L	12	2,800	0	0	0	2,800	2,661	139
EXTERIOR REPAIR	11-01-91	S/LHY	40	35,235	0	0	0	35,235	10,058	881
MATERIAL FOR STOR	05-31-92	S/L	7	2,896	0	0	0	2,896	2,896	0
AC UNIT & THERMO	07-01-92	S/L	7	4,347	0	0	0	4,347	4,347	0
ROOF REPAIR	03-31-93	S/LHY	12	18,083	0	0	0	18,083	16,954	1,129
MARQUEE SIGN	05-18-98	S/L	10	750	0	0	0	750	300	75
AC UNIT	10-16-98	S/L	10	1,200	0	0	0	1 200	440	120
AWNINGS	05-29-02	S/L	15	1,250	0	0	0	1,250	0	42
AWNINGS	07-16-02	S/L	12	1,250	0	0	0	1,250	0	52
AC UNIT	09-01-02	S/LHY	7	9,225	0	0	0	9,225	0	659
15 Assets	Totals			208,709	0	0	0	208,709	107,038	5,957
Buildings										
BUILDING	06-01-84	S/LMM	40	390 000	0	0	0	390,000	175,500	9,750
1 Asset	Totals			390,000	0	0	0	390,000	175,500	9,750
Furniture & Fixtures										
DESK & REGISTER	06-01-85	S/L	12	1,000	0	0	0	1,000	1,000	0
2 FILE CABINETS	07-07-89	S/L	12	280	0	0	0	280	280	0
ART BOOKS	07-01-91	S/L	7	146	0	0	0	146	146	0
3 CHAIRS	07-01-91	S/L	7	75	0	0	0	75	75	0
BIFOLDING TABLE	07-01-91	S/L	7	305	0	0	0	305	305	0
CARPET	08-01-91	S/L	7	1,443	0	0	0	1,443	1,443	0
POSTAGE SCALE	07-01-92	S/L	5	158	0	0	0	158	158	0
BATTERY BACKUP	06-24-94	S/L	5	185	0	0	0	185	185	0
OFFICE CHAIR	05-15-97	S/L	7	94	0	0	0	94	73	13
SAFE	12-31-99	S/L	12	313	0	0	0	313	65	26
CHAIR	06-30-01	S/L	10	140	0	0	0	140	14	14
11 Assets	Totals			4,139	0	0	0	4 139	3,744	53

* Asset disposed this year

-C Carryover basis in like-kind exchange transaction

-B Excess basis in like-kind exchange transaction

2002 Federal Depreciation Schedule

00009 TITUSVILLE PLAYHOUSE, INC , 05-31-2003

10-13-2003

Description	Date	Method	Year	Cost	Land/ Other	\$179	Spec Allow	Basis	Prior	Current
Office Equipment										
FAX MACHINE	10-16-00	S/L	5	240	0	0	0	240	76	0
VACUUM CLEANER	02-18-88	S/L	12	476	0	0	0	476	476	0
MAC PLUS COMPUTER	02-19-88	S/L	12	3,422	0	0	0	3,422	3,422	0
LASER PRINTER	06-24-88	S/L	12	2,077	0	0	0	2,077	2,077	0
COMPUTER DRIVE & PRO	12-01-88	S/L	12	1,469	0	0	0	1,469	1,469	0
CANISTER VACUUM	06-26-89	S/L	12	123	0	0	0	123	123	0
TYPEWRITER	10-09-89	S/L	5	489	0	0	0	489	489	0
COMPUTER UPGRADE	11-06-90	S/L	5	613	0	0	0	613	613	0
TELEPHONE SYSTEM	12-05-90	S/L	7	774	0	0	0	774	774	0
MISC EQUIPMENT	06-01-91	S/L	7	269	0	0	0	269	269	0
ANSWER MACHINE	07-01-91	S/L	5	132	0	0	0	132	132	0
PAYROLL PROGRAM	09-01-91	S/L	5	279	0	0	0	279	279	0
TYPEWRITER	05-01-92	S/L	5	200	0	0	0	200	200	0
MAC PROFORMA COM	12-23-94	S/L	5	1,502	0	0	0	1,502	1,502	0
CASH REGISTER	05-13-95	S/L	5	167	0	0	0	167	167	0
SCANNER	06-01-97	S/L	5	244	0	0	0	244	244	0
COMPUTER	04-27-98	S/L	5	2,362	0	0	0	2,362	1,928	434
PRINTER	10-16-00	S/L	5	411	0	0	0	411	130	82
GATEWAY PC COMPUTER	10-31-00	S/L	5	739	0	0	0	739	234	148
19 Assets			Totals	15,988	0	0	0	15,988	14,604	664

* Asset disposed this year

~C Carryover basis in like-kind exchange transaction

~B Excess basis in like-kind exchange transaction

2002 Federal Depreciation Schedule

00009 TITUSVILLE PLAYHOUSE, INC , 05-31-2003

10-13-2003

Description	Date	Method	Year	Cost	Land/ Other	\$179	Spec Allow	Basis	Prior	Current
Equipment & Machinery										
THEATRE EQUIPMENT	06-01-84	S/L	7	57,304	0	0	0	57,304	57,304	0
THEATRE ASSETS	08-12-85	S/L	12	595	0	0	0	595	595	0
STAGE EQUIPMENT	03-21-87	S/L	12	1,890	0	0	0	1,890	1 890	0
ICE MACHINE	08-01-87	S/L	12	1,597	0	0	0	1,597	1,597	0
STREET LIGHTS	09-01-87	S/L	12	2,500	0	0	0	2,500	2,500	0
LIGHT EQUIPMENT	11-01-87	S/L	12	1,111	0	0	0	1,111	1,111	0
BAR	12-27-87	S/L	12	1,627	0	0	0	1,627	1,627	0
PIANO & RISERS	03-03-88	S/L	12	4,387	0	0	0	4,387	4,387	0
SOUND ANALYSIS	02-06-89	S/L	12	175	0	0	0	175	175	0
PLATFORM SEATS	04-30-89	S/L	12	889	0	0	0	889	889	0
THEATRE EQUIPMENT	07-03-89	S/L	12	1,440	0	0	0	1,440	1,440	0
SCRIM	08-01-90	S/L	3	555	0	0	0	555	555	0
EQUIPMENT	09-01-90	S/L	7	3,412	0	0	0	3,412	3,412	0
LIGHTS, CURTAIN, ETC	03-01-91	S/L	7	4,135	0	0	0	4,135	4,135	0
THEATRE EQUIP	07-01-91	S/L	3	3,303	0	0	0	3,303	3,303	0
THEATRE EQUIPMENT	07-01-91	S/L	3	277	0	0	0	277	277	0
SOUND SYSTEM	11-01-94	S/L	7	2,494	0	0	0	2,494	2,494	0
CD PLAYER	07-24-96	S/L	5	318	0	0	0	318	318	0
NEW CHAIRS	11-01-96	S/L	10	4,800	0	0	0	4,800	2,640	480
SOUND	07-31-98	S/L	5	506	0	0	0	506	396	101
SOUND EQUIPMENT	08-31-98	S/L	5	203	0	0	0	203	157	41
CD PLAYER	09-01-99	S/L	5	95	0	0	0	95	73	19
AMPLIFIER	11-10-99	S/L	7	450	0	0	0	450	171	64
ORCHESTRA LIGHT	11-18-99	S/L	5	204	0	0	0	204	106	41
FOG MACHINE	03-31-00	S/L	12	463	0	0	0	463	46	39
DISHWASHER	03-31-00	S/L	7	273	0	0	0	273	88	39
TRAVELER & CURTAIN	03-31-00	S/L	5	3,975	0	0	0	3,975	1,789	795
KEYBOARD	05-19-00	S/L	7	1,500	0	0	0	1,500	428	214
ICE MACHINE	05-26-00	S/L	10	482	0	0	0	482	96	48
ICE MACHINE	08-09-00	S/L	10	386	0	0	0	386	78	39
CARPET	08-10-00	S/L	12	4,940	0	0	0	4,940	755	412
STAGE LIGHTS	08-31-00	S/L	12	3,606	0	0	0	3,606	524	300
POPCORN MACHINE RST	04-27-01	S/L	10	509	0	0	0	509	55	51
CURTAINS & TEASERS	07-13-01	S/L	10	3,155	0	0	0	3,155	316	316
BLINDS	09-13-01	S/L	10	190	0	0	0	190	19	19
HANDHELD MICS	09-22-01	S/L	7	338	0	0	0	338	48	48

* Asset disposed this year

~C Carryover basis in like-kind exchange transaction

~B Excess basis in like-kind exchange transaction

2002 Federal Depreciation Schedule

00009 TITUSVILLE PLAYHOUSE, INC , 05-31-2003

10-13-2003

Description	Date	Method	Year	Cost	Land/ Other	§179	Spec Allow	Basis	Prior	Current
Equipment & Machinery										
HANDHELD MICS	10-18-01	S/L	7	375	0	0	0	375	54	54
FREEZER	11-09-01	S/L	10	100	0	0	0	100	10	10
38 Assets			Totals	114,559	0	0	0	114,559	95,858	3,130
85 Assets			Grand Totals	755,854	22,459	0	0	733,395	396,744	19,554

* Asset disposed this year
 ~C Carryover basis in like-kind exchange transaction
 ~B Excess basis in like-kind exchange transaction

Schedule of Special Events and Activities

Open to Public Inspection	For calendar year 2002 or tax period beginning 06-01, and ending 05-31-2003.	
Name of Organization	TITUSVILLE PLAYHOUSE, INC.	Employer Identification Number 59-6177447

Description of Largest Three Special Events

(A) STEPPING OUT

(B) CONCERT SERIES

(C) FASHION SHOW

Type and Number of Other Events

DINNER, BRICK SALES, COMEDY SHOW, VARIETY SHOW

Special Event.	(A)	(B)	(C)	All Other	Total
Gross Receipts	25,656	11,514	5,706	11,901	54,777
Less Contributions					
Gross Revenue	25,656	11,514	5,706	11,901	54,777
Less Direct Expenses	14,689	3,944	782	1,479	20,894
Net Income or (loss)	10,967	7,570	4,924	10,422	33,883

Schedule of Other Expenses

Open to Public

Inspection

For calendar year 2002 or tax period beginning 06-01

, and ending 05-31-2003

Name of Organization

TITUSVILLE PLAYHOUSE, INC.

Employer Identification Number

59-6177447

Other Expenses	(A) Total	(B) Program Services	(C) Management and General	(D) Fundraising
TAXES & LICENSES	2,514		2,514	
HOSPITALITY EXPENSE	7,575	7,575		
ADULT THEATRE CLASSES	187	187		
RISING STARS DRAMA CAMP	7,321	7,321		
RISING STARS EXPENSES	2,098	2,098		
CTA MISC EXPENSES	1,227	1,227		
JR CTA DEXPENSES	289	289		
SCRIPTS & ROYALTIES	11,124	11,124		
PROGRAMS & FLYERS	862	862		
TICKETS	1,232	1,232		
SETS & PROPS	533	533		
COSTUMES	488	488		
MAKEUP & HAIR	51	51		
LIGHT & SOUND	169	169		
EQUIPMENT & TOOLS	88	88		
ADVERTISING & PROMO	7,485	7,485		
MUSICAL PRODUCTION	1,750	1,750		
MISCELLANEOUS PROG	213	213		
Page Total	45,206	42,692	2,514	
TOTAL	69,826	42,692	27,134	

Schedule of Other Assets

Open to Public Inspection	For calendar year 2002 or tax period beginning 06-01, and ending 05-31-2003	
Name of Organization	TITUSVILLE PLAYHOUSE, INC	Employer Identification Number 59-6177447

Description	End of Year Book Value	End of Year FMV (Form 990-PF Only)
UTILITY DEPOSITS	299	
Page Totals	299	
Totals	299	

Explanation of Transactions

Open to Public Inspection	For calendar year 2002 or tax period beginning 06-01 , and ending 05-31-2003 .
Name of Organization	Employer Identification Number
TITUSVILLE PLAYHOUSE, INC.	59-6177447

Line No	Explanation
2	EXECUTIVE DIRECTOR IS A SALARIED EMPLOYEE

List of Officers, Directors, Trustees, and Key Employees

Open to Public Inspection For calendar year 2002 or tax period beginning 06-01, and ending 05-31-2003

Name of Organization Employer Identification Number
59-6177447

(A) Name and Address	(B) Title and Average Hrs per Week	(C) Compensation (if not paid, enter 0)	(D) Cont to Employee Ben Plans & Def Comp	(E) Expense Account & Other Allowances
COCOA, FL RUSS BAUSCH 4145 POLARIS AVENUE	DIRECTOR 2	0		
TITUSVILLE, FL VICKI CHEEK 4614 ROSEBUD STREET	DIRECTOR 2	0		
COCOA, FL LYNNE LIBRIZZI 3825 HICKORY HILL BLVD	DIRECTOR 2	0		
TITUSVILLE, FL KEN JOSEPH 4607 ZOLTAN DRIVE	DIRECTOR 2	0		
TITUSVILLE, FL CLAUDIA THOMAS 6940 HUNDRED ACRE DRIV	DIRECTOR 2	0		
COCOA, FL BRUCE WAUGH 1459 BROOK DRIVE	DIRECTOR 2	0		
COCOA, FL STACY E. JOHNSON 300 COLUMBIA DR # 1305	EX DIRECTOR 40	24380		
CAPE CANAVERAL, FL MARGARET DAVENPORT 2006 CLIFTON COURT	TECH DIRECTOR 40	24960		
TITUSVILLE, FL				

Schedule of Other Income

Open to Public Inspection For calendar year 2002 or tax period beginning 06-01, and ending 05-31-2003

Name of Organization: TITUSVILLE PLAYHOUSE, INC. Employer Identification Number: 59-6177447

Description	(A) 2001	(B) 2000	(C) 1999	(D) 1998	(E) TOTAL
SPECIAL ACTIVIT	7,332	3,483	33,770	5,656	50,241
MISCELLANEOUS	994	1,673	328	506	3,501
PAGE TOTALS	8,326	5,156	34,098	6,162	53,742
TOTALS	8,326	5,156	34,098	6,162	53,742