$_{\text{Form}}$ 990

Return of Organization Exempt From Income Tax

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

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public. ► Information about Form 990 and its instructions is at www.irs.gov/form990.

A F	or the 2	2015 calendar year, or tax year beginning $$ JUL $1,$ 2015 $$ and ending	JUN 30, 2016	
	heck if oplicable:	C Name of organization	D Employer identif	ication number
a				
	Address change	TRINITY REPERTORY COMPANY		
	Name change	Doing business as		2547262
	Initial return	Number and street (or P.O. box if mail is not delivered to street address) Room/si		
	Final return/	201 WASHINGTON STREET	401-	521-1100
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	8,985,007.
	Amende return	PROVIDENCE, RI 02903-3297	H(a) Is this a group	return
	Applica- tion	IF Name and address of principal officer. Thought 2 1111112 211		s? Yes X No
	pending	201 WASHINGTON STREET, PROVIDENCE, RI 029	03 H(b) Are all subordinates	
I T	ax-exen	inpl status. [22] 50 i(c)(b) [23] 50 i(c)	527 If "No," attach a	a list. (see instructions)
JV	Vebsite	· ▶ WWW.TRINITYREP.COM	H(c) Group exemption	
		rganization: X Corporation Trust Association Other ► L	ear of formation: 1963	M State of legal domicile; RI
_	rt I	Summany		
_	1 B	riefly describe the organization's mission or most significant activities: TO REINV	ENT THE "PUBI	IC SQUARE"
Governance	Į N	ITH DRAMATIC ART THAT STIMULATES, EDUCATES	AND ENGAGES T	CHE
na	2 0	heck this box 🕨 🔲 if the organization discontinued its operations or disposed of r	nore than 25% of its net a	issets.
Ş		lumber of voting members of the governing body (Part VI, line 1a)		42
Ğ		lumber of independent voting members of the governing body (Part VI, line 1b)	4	
Activities &		otal number of individuals employed in calendar year 2015 (Part V, line 2a)		
iŧie		otal number of volunteers (estimate if necessary)	I -	
휹		otal unrelated business revenue from Part VIII, column (C), line 12	7a	72,140.
ĕ		let unrelated business taxable income from Form 990-T, line 34		-4,923.
	 '	intermination business taxable income was in	Prior Year	Current Year
-	8 0	Contributions and grants (Part VIII, line 1h)	3,659,404	
Jue	1	Program service revenue (Part VIII, line 2g)	5,569,706	
Revenue		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	43,831	73,190.
æ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	. 0.
		otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	9,272,941	8,533,120.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0	. 0.
		Renefits paid to or for members (Part IX, column (A), line 4)	0	. 0.
		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	5,436,435	5,781,271.
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)	15,000	. 0.
Sen		otal fundraising expenses (Part IX, column (D), line 25) 701,821.		
Ä		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	3,084,220	3,398,489.
		otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	8,535,655	
		Revenue less expenses. Subtract line 18 from line 12	737,286	-646,640.
or Ses		revenue less expenses. Oubtract line 10 from line 12	Beginning of Current Year	End of Year
ets c	20 T	Fotal assets (Part X, line 16)	10,377,684	. 8,853,173.
ASSE	20 1	Total liabilities (Part X, line 26)	5,378,408	
Net Assets	21 7	Net assets or fund balances. Subtract line 21 from line 20	4,999,276	. 4,270,178.
	art II	Signature Block		
Ling	ler nenal	ties of perjury, I declare that I have examined this return, including accompanying schedules and s	tatements, and to the best of	my knowledge and belief, it is
true	correct	, and complete. Declaration of preparer (other than officer) is based on all information of which pre	parer has any knowledge.	
	, 0011001	Guild dompioles bookd action of property	11/2	8/16
c:.		Signature of officer	Date	
Sig	1	THOMAS PARRISH III, EXECUTIVE DIRECTOR		
He	re	Type or print name and title		
		Print/Type preparer's name Preparer's signature	Date Check	PTIN
Pai		KAREN A. KOWGIOS	if self-emp	P01461372
	L	Firm's name FRIED AND KOWGIOS PARTNERS CPA'S LI		45-0494838
	eparer e Only	The state of the s		
บร	e only	Firm's address 441 LEXINGTON AVENUE 16TH FL NEW YORK, NY 10017	Phone no. 2	12-490-2200
-	<u> </u>	RS discuss this return with the preparer shown above? (see instructions)	11 110110 110.22	X Yes No
Ma	iv the IF	(5 discuss this return with the preparer shown above? (see instructions)		00 110

Par	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission: TO REINVENT THE "PUBLIC SQUARE" WITH DRAMATIC ART THAT STIMULATE	ES,
	EDUCATES AND ENGAGES THE COMMUNITY IN A CONTINUING DIALOGUE THRO	
	STAGE PRODUCTIONS, A RESIDENT ACTING COMPANY, GRADUATE TRAINING	
	PROGRAMS, LIFELONG LEARNING AND K-12 EDUCATION PROGRAMS.	
2	Did the organization undertake any significant program services during the year which were not listed on	
_	the prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O.	
3		Yes X No
3	If "Yes," describe these changes on Schedule O.	_ 162 [11 NO
4	· · · · · · · · · · · · · · · · · · ·	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by ex	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expensions are required to report the amount of grants and allocations to others, the total expensions are required to report the amount of grants and allocations to others, the total expensions are required to report the amount of grants and allocations to others, the total expensions are required to report the amount of grants and allocations to others, the total expensions are required to report the amount of grants and allocations to others, the total expensions are required to report the amount of grants and allocations to others, the total expensions are required to report the amount of grants and allocations to others, the total expensions are required to report the amount of grants and allocations to other the property of the propert	enses, and
	revenue, if any, for each program service reported.) E O 221 .
4a	DURING THE 2015-2016 SEASON, TRINITY REPERTORY COMPANY PRODUCED	
	PLAYS: "JULIUS CAESAR", "A CHRISTMAS CAROL", "THE HEIDI CHRONICI	ıES",
	"THE HUNCHBACK OF SEVILLE", "TO KILL A MOCKINGBIRD" WITH THE LIM	IITED
	ENGAGEMENT COMPANION PIECE "BLUES FOR MISTER CHARLIE", THE WORLI)
	PREMIERE OF "ARNIE LOUIS AND BOB", AND "OKLAHOMA!". PAY-WHAT-YOU	J-CAN,
	OPEN-CAPTIONING, AND ASL INTERPRETATION WERE PROVIDED FOR SELECT	1
	PERFORMANCES. TRINITY REP BOOKED IN A PRODUCTION OF "LATE NITE	
	CATECHISM".	
	TRINITY REP'S WIDE RANGE OF EDUCATION PROGRAMS, INCLUDING PROJEC	T
	DISCOVERY STUDENT MATINEES, IN-SCHOOL ARTIST RESIDENCIES AND WOR	KSHOPS,
	PROFESSIONAL DEVELOPMENT FOR TEACHERS, YOUNG ACTORS STUDIO AFTER	R-SCHOOL
4b	(Code:) (Expenses \$ 2,817,092. including grants of \$) (Revenue \$ 2,2	246,851.)
	THE BROWN UNIVERSITY/TRINITY REP MFA PROGRAMS IN ACTING AND DIRE	ECTING
	ENROLLED 50 STUDENTS. THIS 3-YEAR PROGRAM COMBINES CONSERVATORY	
	TRAINING WITH THE PRACTICAL EXPERIENCE OF BEING CONNECTED TO A	
	PROFESSIONAL THEATER AND THE ACADEMIC CREDENTIALS OF AN IVY LEAD	;UE
		AND
	"THE TEMPEST", BOTH OF WHICH TOURED TO LOCAL SCHOOLS; "THE LOVE	
	NIGHTINGALE"; "THESE SEVEN SICKNESSES"; "PROMETHEUS BOUND"; "SII	ESHOW"
	AND SEVERAL OTHER CLASSIC, CONTEMPORARY AND NEW WORKS.	
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ► 7,813,452.	
		Form 990 (2015)

SEE SCHEDULE O FOR CONTINUATION(S) 2

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	X	
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			٠
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			٠
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			٦,
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			٦,
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		7.7	
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			37
	complete Schedule G, Part III	19		X

Part IV Checklist of Required Schedules (continued)

			Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26	Х	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	X	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	X	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			١
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	1		,,
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			_v
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			7.7
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			_v
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			_v
00	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		Х	
	Note. All Form 990 filers are required to complete Schedule O	38	000	<u> </u>

Part V Statements Regarding Other IRS Filings and Tax Compliance

tender the number reported in Box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2 a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? b If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a Was the organization a party to a prohibited tax shelter transaction? c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5b Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	X X X
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b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	Х
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6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	Х
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	Х
	X
any contributions that were not tax deductible as charitable contributions? 6a	
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	1
were not tax deductible?	
7 Organizations that may receive deductible contributions under section 170(c).	
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a X	<u> </u>
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	<u> </u>
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	1 37
to file Form 8282?	X
d If "Yes," indicate the number of Forms 8282 filed during the year	v
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f	<u>├</u> ^
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g	<u> </u>
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8	
9 Sponsoring organizations maintaining donor advised funds.	
a Did the sponsoring organization make any taxable distributions under section 4966? 9a	
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b	
10 Section 501(c)(7) organizations. Enter:	
a Initiation fees and capital contributions included on Part VIII, line 12	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	
11 Section 501(c)(12) organizations. Enter:	
a Gross income from members or shareholders	
b Gross income from other sources (Do not net amounts due or paid to other sources against	
amounts due or received from them.)	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.	
a Is the organization licensed to issue qualified health plans in more than one state?	
Note. See the instructions for additional information the organization must report on Schedule O.	
b Enter the amount of reserves the organization is required to maintain by the states in which the	
organization is licensed to issue qualified health plans	
c Enter the amount of reserves on hand 13c	V
14a Did the organization receive any payments for indoor tanning services during the tax year? 14a If "Yea" has it filed a Form 700 to report these payments? If "No." provide an explanation in Schadule O.	X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	(2015

532005 12-16-1 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

_	Crieck if Scriedule O contains a response or note to any line in this Part VI				77
Sec	tion A. Governing Body and Management				
	1 1	4.0		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	42			
	If there are material differences in voting rights among members of the governing body, or if the governing				
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.				
b	Enter the number of voting members included in line 1a, above, who are independent 1b	37			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other				
	officer, director, trustee, or key employee?		2	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervis	ion			
	of officers, directors, or trustees, or key employees to a management company or other person?		3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		Х
6	Did the organization have members or stockholders?		6		Х
7a					
	more members of the governing body?		7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or				
	persons other than the governing body?		7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
а	The governing body?		8a	Х	
b	Each committee with authority to act on behalf of the governing body?		8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the		OD		
3	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		Х
Sec	etion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		9		
000	Tion D. 1 Onoics (This dection b requests information about policies not required by the internal nevenue code.)			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a	163	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates		ioa		
b	and branches to ensure their operations are consistent with the organization's exempt purposes?		10b		
110			11a	Х	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the	5 1011111	па		
120			12a	х	
12a	1 , , , ,		12b	X	
b	, , , , , , , , , , , , , , , , , , , ,		IZD	21	
С			40-	Х	
40	in Schedule O how this was done		12c	X	
13	Did the organization have a written whistleblower policy?		13	X	
14	Did the organization have a written document retention and destruction policy?		14	Λ	
15	Did the process for determining compensation of the following persons include a review and approval by independer	ΙŢ			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		4=	v	
а ,	The organization's CEO, Executive Director, or top management official		15a	X	
b	Other officers or key employees of the organization		15b	Λ	
16	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				
ioa	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a		40		v
1.	taxable entity during the year?		16a		X
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	n			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's		401		
800	exempt status with respect to such arrangements?		16b		
	tion C. Disclosure				
17 10	List the states with which a copy of this Form 990 is required to be filed RI Section 6104 requires an experientian to make its Forms 1003 (or 1004 if applicable) 000 and 000 T (Section 501(s))	(2) 0 0 0 1 1 1	e!I-I	lo.	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)	اری)s oniy) a	ıvallab	ie	
	for public inspection. Indicate how you made these available. Check all that apply.				
40	Own website Another's website X Upon request Other (explain in Schedule O)				
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest process in the conflict of interest process.	policy, and	i tinan	cıal	
	statements available to the public during the tax year.	_			
20	State the name, address, and telephone number of the person who possesses the organization's books and records	-			
	KATIE BYRNES, GENERAL MANAGER - 401-521-1100				
	201 WASHINGTON STREET, PROVIDENCE, RI 02903				

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

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

X

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A)	(B)	l	411120		C)	про	iout	(D)	(E)	(F)
Name and Title	Average	(do	not c	Pos	ition		one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson i	is bot	h an	compensation	compensation	amount of
	week	_	Jer an	luau	II ecid	ii us	lee)	from	from related	other
	(list any hours for	Individual trustee or director				_		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	96 Or (stee			ısatec		(W-2/1099-MISC)	(***2/1099*****100)	organization
	organizations	trust	al tru		yee	educ		,		and related
	below	/idual	Institutional trustee	-e-	Key employee	Highest compensated employee	ner			organizations
	line)	Indi	Insti	Officer	Key	High emp	Former			
(1) SUZANNE MAGAZINER	5.00							_	_	_
CHAIR		Х		Х				0.	0.	0.
(2) PAUL CHOQUETTE	5.00							_	_	_
VICE CHAIRMAN		Х		Х				0.	0.	0.
(3) BARBARA SCHOENFELD	5.00								_	_
VICE CHAIRMAN		Х		Х				0.	0.	0.
(4) JOHN S. LOMBARDO	5.00							_	_	_
TREASURER		Х		Х				0.	0.	0.
(5) JOE MADDEN	5.00								_	_
SECRETARY		Х		Х				0.	0.	0.
(6) JONATHAN DUFFY	2.00							_	_	_
BOARD MEMBER		Х						0.	0.	0.
(7) HANNAH BELL-LOMBARDO	2.00							_	_	_
BOARD MEMBER		Х						0.	0.	0.
(8) RICHARD BERETTA	2.00							_	_	_
BOARD MEMBER		Х						0.	0.	0.
(9) CHARLIE THURSTON	2.00								_	_
ACTING COMPANY (SCH O FOR COMP INFO)		Х						16,332.	0.	0.
(10) CURT COLUMBUS	40.00								_	
ARTISTIC DIRECTOR		Х		Х				190,991.	0.	9,094.
(11) LINDA M. COHEN	2.00							_	_	_
BOARD MEMBER		Х						0.	0.	0.
(12) BRIAN DANIELS	2.00							_	_	_
BOARD MEMBER		Х						0.	0.	0.
(13) JONATHAN FEINSTEIN	2.00							_	_	_
BOARD MEMBER		Х						0.	0.	0.
(14) JOSEPH L. DOWLING, JR.	2.00									
BOARD MEMBER		Х						0.	0.	0.
(15) MARK K.W. GIM	2.00									
BOARD MEMBER		Х						0.	0.	0.
(16) PHILIP GOULD	2.00									_
BOARD MEMBER		Х						0.	0.	0.
(17) WILLIAM F. GREENE	2.00									_
BOARD MEMBER		Х						0.	0.	0.
532007 12-16-15										Form 990 (2015)

532007 12-16-15

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Yes No Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual X 3 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 4 Х Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services X rendered to the organization? If "Yes," complete Schedule J for such person

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

	, ,	
(A) Name and business address	(B) Description of services	(C) Compensation
· · · · · · · · · · · · · · · · · · ·	CONTRACTOR	178,009.
RM2, 375 COMMERCE PARK ROAD, NORTH KINGSTOWN, RI 02852	MFA RENT	147,000.
•	WAREHOUSE RENT	120,000.
ARTIST GROUP, LLC, 46 ABORN STREET, 4TH FLOOR, PROVIDENCE, RI 02903	OFFICE & MFA RENT	108,000.

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

SEE PART VII, SECTION A CONTINUATION

Form 990 TRINITY I	REPERTOR	<u> </u>	CC	MI	'AI	NΥ			22-254	7262
Part VII Section A. Officers, Directors, Tru	ıstees, Key Eı	mplo	yee	s, a	nd F	ligh	est	Compensated Employ	ees (continued)	
(A)	(B)			(((D)	(E)	(F)
Name and title	Average			Pos	-	ı		Reportable	Reportable	Estimated
	hours	(cl		call t			ly)	compensation	compensation	amount of
	per	Ť				Ė	Ť	from	from related	other
	week					yee		the	organizations	compensation
	(list any	director				em plc		organization	(W-2/1099-MISC)	from the
	hours for	or di	8			ated		(W-2/1099-MISC)		organization
	related organizations	ustee	frust		96	suadı				and related
	below	lual tr	tional		nploy	st con	_			organizations
	line)	Individual trustee or	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) JOHN J. MCCONNELL, JR.	2.00									
BOARD MEMBER		Х						0.	0.	0.
(28) BRENDAN MCCARTHY	2.00									
BOARD MEMBER		Х						0.	0.	0.
(29) BRIAN MCGUIRK	2.00									
BOARD MEMBER		Х						0.	0.	0.
(30) HEIDI KELLER MOON	2.00									
BOARD MEMBER		Х						0.	0.	0.
(31) JOHN PALUMBO	2.00									
BOARD MEMBER (SCH O FOR COMP INFO)		Х						0.	0.	0.
(32) MARC PERLMAN (SEE SCHEDULE O)	2.00									
BOARD MEMBER		Х						0.	0.	0.
(33) KIBBE REILLY	2.00									
BOARD MEMBER		Х						0.	0.	0.
(34) KATHRYN SABATINI	2.00									
BOARD MEMBER		Х						0.	0.	0.
(35) ALLISON VAREIKA	2.00									
BOARD MEMBER		Х						0.	0.	0.
(36) MARYBETH Q. WILLIAMSON	2.00									
BOARD MEMBER		Х						0.	0.	0.
(37) DAVID NIGRI	2.00									
BOARD MEMBER		Х						0.	0.	0.
(38) CLAY PELL	2.00									
BOARD MEMBER		Х						0.	0.	0.
(39) DONNA VANDERBECK	2.00									
BOARD MEMBER		Х						0.	0.	0.
(40) PATRICIA WATSON	2.00									
BOARD MEMBER		Х						0.	0.	0.
(41) SEAN REDFERN	2.00	l							•	
BOARD MEMBER	4.0.00	Х						0.	0.	0.
(42) THOMAS PARRISH III	40.00							05.465	•	
EXECUTIVE DIRECTOR	40.00			Х				25,165.	0.	2,985.
(43) STEPHEN BERENSON	40.00	-				l		101 150	•	240
DIRECTOR OF BROWN/TRINITY REP ACTING	40.00					Х		121,178.	0.	342.
(44) BRIAN MCELENEY	40.00							105 505	•	1 070
HEAD, MFA ACTING/TRINITY REP ACTING						Х		125,527.	0.	1,872.
		-								
Total to Part VII, Section A, line 1c								271,870.		5,199.
Total to Fait VII, Occion A, into 10								= . = , 5 . 5 .		-,

Га	T V	<u> </u>	Statement of Rever			5			
			Check if Schedule O cont	ains a response	or note to any lir	ne in this Part VIII (A)	(B)	(C)	(D)
						Total revenue	Related or	Unrelated	(D) Revenue excluded from tax under
							exempt function	business	sections 512 - 514
(0 (0				1.1			revenue	revenue	512 - 514
ant			Federated campaigns						
ig of			Membership dues		152 025				
Ŧ,			Fundraising events		153,925.				
ia ia			Related organizations		264 224				
ons,			Government grants (contribut	· —	364,224.				
atio er.	1		All other contributions, gifts, gran		764 456				
gi H			similar amounts not included abo		764,456.				
Contributions, Gifts, Grants and Other Similar Amounts			Noncash contributions included in lines		123,242.	2 202 605			
a C		h '	Total. Add lines 1a-1f		1	2,282,605.			
			ADMICCIONC		Business Code		2 051 062		
ice	2 8		ADMISSIONS	OME	611710	3,051,963.	3,U31,903.		
er.	ı		MFA PROGRAM INC		711110	2,246,851.	420,001.		
m S	•		SERVICE CHARGE	INCOME	711110	430,297.	430,297.		
gra	•		TUITION INCOME	MIR NIEM	711110	02 077	243,567.		
Program Service Revenue	•		CONCESSION INCO		541800	93,077.		72,140.	
-			All other program service reve			111,570. 6,177,325.	39,430.	72,140.	
_			Total. Add lines 2a-2f			0,111,323.			
	3		Investment income (including	•	•	16,784.			16,784.
	4		other similar amounts)			10,701.			10,7010
	5		Royalties		•				
	3		noyanies	(i) Real	(ii) Personal				
	6 4		Gross rents	(i) Neai	(II) Personal				
			Gross rents Less: rental expenses						
			Rental income or (loss)						
			Net rental income or (loss)						
			Gross amount from sales of	(i) Securities	(ii) Other				
	, ,		assets other than inventory	158,886.					
			Less: cost or other basis						
			and sales expenses	102,480.					
		c (Gain or (loss)	56,406.					
		d I	Net gain or (loss)	-		56,406.			56,406.
a			Gross income from fundraisin		,				
Other Revenue		i	including \$ 153,9	25. of					
eve		(contributions reported on line						
μ Ε		-	Part IV, line 18	а	349,407.				
Ĕ.	ı		Less: direct expenses		349,407.				
١	(c I	Net income or (loss) from fund	draising events	>	0.			
	9 a	а	Gross income from gaming ac						
		-	Part IV, line 19	а					
	ı	b	Less: direct expenses	b					
	(c I	Net income or (loss) from gam	ning activities	<u></u>				
	10 a	а	Gross sales of inventory, less	returns					
		;	and allowances	а					
	ı	b	Less: cost of goods sold	b					
		С	Net income or (loss) from sale	s of inventory	_				
			Miscellaneous Revenu	ie	Business Code				
	11 a	a .							
	ı	b .							
		C .	<u></u>						
			All other revenue						
		e į	Total. Add lines 11a-11d		>	Q 522 120	6 105 105	72 140	72 100
	12		Total revenue. See instructions.			U,JJJ,IZU•	O, TOO, TOO •	/4,14U•	73,190.

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (D) (C) Do not include amounts reported on lines 6b. Program service expenses Total expenses Management and general expenses Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 323,755. 217,363. 35,464. 70,928. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 4,359,690. 3,780,302. 260,348. 319,040. Other salaries and wages 7 Pension plan accruals and contributions (include 189,680. 189,680 section 401(k) and 403(b) employer contributions) 25,395. 402,063. 343,190. 33,478. Other employee benefits 9 506,083. 431,979. 31,965. 42,139. Payroll taxes 10 Fees for services (non-employees): a Management 1,528. 1,528. Legal 32,387. 32,387. Accounting Lobbying Professional fundraising services. See Part IV, line 17 30,230. 30,230. Investment management fees Other, (If line 11g amount exceeds 10% of line 25, 120,295 7,500. 57,434 55,361. column (A) amount, list line 11g expenses on Sch O.) 347,875. 347,875. Advertising and promotion 12 432,959. 372,455. 26,604. 33,900. 13 Office expenses 14 Information technology 15 Royalties 687,438. 43,316. 55,198. 588,924. 16 Occupancy 96,810. 114,160. 2,413. 14,937. 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 203,287. 123,975. 79,312. 20 Payments to affiliates 21 384,384. 28,272. 448,683. 36,027. Depreciation, depletion, and amortization 22 70,749. 60,610. 4,458. 5,681. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) PRODUCTION COSTS 727,156. 727,156. MFA PROGRAM AND MISCELL 63,716. 54,586. 4,015. 5,115. 56,381. 56,381. **ARTISTIC EXPENSES** 47,228. 30,282. 1,346. 15,600. DUES AND MEMBERSHIPS 14,417. 14,417. e All other expenses 9,179,760. 7,813,452. 664,487. 701,821. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

Form **990** (2015)

Check here

if following SOP 98-2 (ASC 958-720)

Form 990 (2015)
Part X | Balance Sheet

Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response or not	e to ar	ny line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			108,464.	1	108,005.
	2	Savings and temporary cash investments			387,839.	2	1,092,565.
	3	Pledges and grants receivable, net			2,791,514.	3	836,811.
	4	Accounts receivable, net			, - , -	4	,
	5	Loans and other receivables from current and for					
	•	trustees, key employees, and highest compensa		· · · · · · · · · · · · · · · · · · ·			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disquali					
		section 4958(f)(1)), persons described in section	-	·			
		employers and sponsoring organizations of sect					
Ø		employees' beneficiary organizations (see instr).		·		6	
Assets	7	Notes and loans receivable, net		F		7	
As	8	Inventories for sale or use			10,326.	8	
	9				77,907.	9	117,977.
		Land, buildings, and equipment: cost or other	 				
		basis. Complete Part VI of Schedule D	10a	11,095,639.			
	b	Less: accumulated depreciation	10b	6,617,501.	4,711,529.	10c	4,478,138.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line 1		12			
	13	Investments - program-related. See Part IV, line	2,286,905.	13	2,216,477.		
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11			3,200.	15	3,200.
	16	Total assets. Add lines 1 through 15 (must equal			10,377,684.	16	8,853,173.
	17	Accounts payable and accrued expenses			217,159.	17	163,002.
	18	Grants payable		18			
	19	Deferred revenue	1,197,010.	19	1,198,538.		
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete I	Part IV	of Schedule D		21	
es	22	Loans and other payables to current and former	office	rs, directors, trustees,			
≣		key employees, highest compensated employee			4 4-0 000		4 400 0
Liabilities		Complete Part II of Schedule L			1,653,000.	22	1,629,975.
_	23	Secured mortgages and notes payable to unrela			2,311,239.	23	1,591,480.
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pa		l l			
		parties, and other liabilities not included on lines	17-24). Complete Part X of			
		Schedule D	_	5,378,408.	25	4 502 005	
	26	Total liabilities. Add lines 17 through 25			5,370,400.	26	4,582,995.
		Organizations that follow SFAS 117 (ASC 958		ck here 🕨 🔼 and			
Ses		complete lines 27 through 29, and lines 33 and			1,854,464.		1,073,286.
lan	27	Unrestricted net assets			1,243,331.	27	1,198,932.
Fund Balances	28	Temporarily restricted net assets			1,901,481.	28 29	1,997,960.
Pun	29	Permanently restricted net assets Organizations that do not follow SFAS 117 (A		9) abadi bara	1,701,401.	29	1,001,000
			3C 93	o), check here			
<u>8</u>	20	and complete lines 30 through 34.				20	
se	30	Capital stock or trust principal, or current funds				30	
Net Assets or	31	Paid-in or capital surplus, or land, building, or ed				31 32	
Red	32	Retained earnings, endowment, accumulated in		_	4,999,276.	33	4,270,178.
	33	Total liabilities and not assets/fund balances			10,377,684.	34	8,853,173.
	34	Total liabilities and net assets/fund balances			±0,511,00±•	34	Form 990 (2015)

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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

TRINITY REPERTORY COMPANY

Employer identification number 22-2547262

organization answered "Yes" on Form 990, Part IV, line 6. Total number at end of year	Pai	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	s or Accounts. Complete if the
Total number at end of year 2 Aggregate value of contributions to (during year) 3 Aggregate value of contributions to (during year) 4 Aggregate value of and of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization in property, subject to the organizations exclusive legal control? 6 Did the organization inform all grantess, donors, and donor advisors in writing that the assets held in donor advised funds are the organization inform all grantess, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of part public use (e.g., generation or education) Preservation of a certified historic structure Preservation of part part preservation of a certified historic structure Preservation of part part passes 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. a Trial number of conservation easements in a certified historic structure included in (a) b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) White organization have a writing place of the part of conservation easements on a certified historic structure included in (a) White organization have a writing place present in the part of conservation easements by the organization during the tax year No Hald at the End of the Tax Year No Hald at the End of the Tax Year The Hald at the End of the Tax Year No Hald at the End of the Tax Year No Hald at the End of the Tax Year No Hald at the End of the Tax Year No Hald		organization answered "Yes" on Form 990, Part IV, lin	ne 6.	
2 Aggregate value of contributions to (during year) 4 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization is properly, subject to the organization's properly, subject to the organization's properly, subject to the organization's exclusive legal control?			(a) Donor advised funds	(b) Funds and other accounts
3 Aggregate value of grants from (during year) 4 Aggregate value of grants from (during year) 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization in property, subject to the organization's exclusive legal control? Yes No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible pivrate benefit? Part II Conservation Easements. Complete if the organization check at that apply). Part II Conservation easements held by the organization check at that apply). Protection of natural habitat Prosesvation of a late frough 2d if the organization held a qualified conservation or a conservation easement on the last Prosesvation of conservation easements I Protection of natural habitat Protection of conservation easements Protection of conservation easements I I Valuation of conservation easements on a certified historic structure included in (a) I Valuation of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of states where property subject to conservation easements in located Number of states where property subject to conservation easements in this revenue and expenses statement, and balance sheet, and include, if applicable, the text of the footnote to the organization easements in this revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the orga	1	Total number at end of year		
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are the organization's property, subject to the organization's exclusive legal control?	4	Aggregate value at end of year		
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Protection of natural habitat	1	Purpose(s) of conservation easements held by the organization	ion (check all that apply).	
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2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ 4 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 5 Does and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcement of the conservation easements it holds? 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcement of the conservation easements in the section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization assements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on For		Protection of natural habitat	Preservation of a cert	tified historic structure
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listed in the National Register	С			
Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ Noes each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part X II. If the organizat	d			l l
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2015

3 Using the organization is acquisition, accession, and other records, check any of the following that are a significant use of its collection flems (checks aft that apoly): a Public exhibition	Pai	t III Organizations Maintaining C	ollections of Ar	t, Historical T	reasures, c	or Othe	er Similar	Asse	ts (continu	red)
a Public exhibition d	3	Using the organization's acquisition, accession	on, and other record	s, check any of the	following tha	t are a si	ignificant use	of its	collection	items
b Scholarly research c		(check all that apply):								
c	а	Public exhibition	d	Loan or exc	change progra	ams				
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be solid to raise funds rather than to be maintained as part of the organization and soliditors. Ves	b	Scholarly research	е	Other						
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be minitanied as part of the organization's collection? Part IV Scorow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an angent, flustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? If "Yes," explain the arrangement in Part XIII and complete the following table: □ Beginning balance □ Beginning balance □ Beginning balance □ Beginning the year □ But the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? □ Yes □ No □ If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. 1a Beginning of year balance □ alourent year □ alourent year □ alourent year (b) Prior year □ (c) Two years back (d) Tinre years back (e) Four years	С	Preservation for future generations								
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Describing the raise funds rather than to be maintained as part of the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1b If "Yes," explain the arrangement in Part XIII and complete the following table: C	5									
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on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table: Amount		reported an amount on Form 990, Par	t X, line 21.							
b If "Yes," explain the arrangement in Part XIII and complete the following table: C Beginning balance 1c Id Id Id Id Id Id Id I	1a	Is the organization an agent, trustee, custodi	an or other intermed	liary for contributio	ns or other as	sets not	included			
b !f "Yes," explain the arrangement in Part XIII and complete the following table: c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b f "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part N, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part N, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part N, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part N, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part N, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part N, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part N, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part N, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part N, line 10. Part V Endowment Funds and loss of the organization state and programs Part N, line 10. Part V Endowment Funds not in the possession of the organization that are held and administered for the organization by: Part V Endowment Funds not in the possession of the organization that are held and administered for the organization by: Part V Endowment Funds not in the possession of the organization that are held and administered for the organization by: Part V Endowment Funds not in the possession of the organization that are held and administered for the organization by: Part V Endowment Funds not in the possession of the organization sendowment funds. Part V Endowment Funds not in the possession of		on Form 990, Part X?						\square	Yes	X No
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d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? b I* "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part X, line 10. [a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back									Amount	
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Ending balance										
Finding balance 1f										
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?	_									
Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.	2a								Yes	☐ No
Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.	b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planation has beer	n provided on	Part XIII				
1a Beginning of year balance 1,901,481. 1,816,508. 1,796,462. 1,735,658. 1,717,575. b Contributions 96,479. 84,973. 20,046. 60,804. 18,083. c Net investment earnings, gains, and losses of Grants or scholarships 0 Charts o										
1a Beginning of year balance 1,901,481. 1,816,508. 1,796,462. 1,735,658. 1,717,575. b Contributions 96,479. 84,973. 20,046. 60,804. 18,083. c Net investment earnings, gains, and losses of Grants or scholarships 0 Charts o								s back	(e) Four y	ears back
b Contributions 96,479. 84,973. 20,046. 60,804. 18,083. c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 1,997,960. 1,901,481. 1,816,508. 1,796,462. 1,735,658. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ 100.00 % c Temporarily restricted endowment ▶ 96 The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (ii) related organizations 5b f'Yes' on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) basis (investment) basis (investment) B Buildings 6,114,734, 3,891,960, 2,222,774, c Leasehold improvements 2,406,406,560,158, 1,846,248,	1a	Beginning of year balance	• • •	1,816,508	1,796					
c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 1,997,960. 1,901,481. 1,816,508. 1,796,462. 1,735,658. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶	_			84,973						
d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 1,997,960. 1,901,481. 1,816,508. 1,796,462. 1,735,658. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ 100.00 % c Temporarily restricted endowment ▶ % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) basis (investment) basis (other)			,	· · · · · · · · · · · · · · · · · · ·				,		
e Other expenditures for facilities and programs f Administrative expenses g End of year balance 1,997,960. 1,901,481. 1,816,508. 1,796,462. 1,735,658. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶										
and programs f Administrative expenses g End of year balance 1,997,960. 1,901,481. 1,816,508. 1,796,462. 1,735,658. Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶		Γ								
f Administrative expenses g End of year balance 1,997,960. 1,901,481. 1,816,508. 1,796,462. 1,735,658. Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ 100.00 % c Temporarily restricted endowment ▶ % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (iii) related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) 1a Land 100,000 1	Ū									
g End of year balance	f									
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶		T	1 997 960.	1 901 481	1 816	5 508.	1 796	462.	1 '	735 658.
a Board designated or quasi-endowment ▶	_	_		· · ·	<u> </u>	, , , , , ,		,		
b Permanent endowment ▶ 100 ⋅ 00		•	one your one balano	· -	a)) Hold do.					
Temporarily restricted endowment ▶			0/6							
The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) basis (investment) 1a Land 100,000 • 100,000 • b Buildings 6,114,734 • 3,891,960 • 2,222,774 • c Leasehold improvements 2,406,406 • 560,158 • 1,846,248 •										
Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other depreciation 1 Land 100,0000 100,0000 5 Buildings 6,114,734,3,891,960,2,222,774. c Leasehold improvements 2,406,406,560,158,1,846,248.	·									
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(ii) related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) basis (other) 1a Land 100,000. b Buildings 6,114,734. 3,891,960. 2,222,774. c Leasehold improvements 2,406,406. 560,158. 1,846,248.		-								
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) 1a Land 100,000. b Buildings 6,114,734. 3,891,960. 2,222,774. c Leasehold improvements 2,406,406. 560,158. 1,846,248.									(-)	
4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) 1a Land 100,000. Buildings 6,114,734. 3,891,960. 2,222,774. c Leasehold improvements 2,406,406. 560,158. 1,846,248.	h	If "Vos" on line 32(ii) are the related erganize	tions listed as requir	rad on Schadula D')				3h	
Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) 1a Land b Buildings C Leasehold improvements Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation 100,000 100,000 2,222,774 2,406,406 560,158 1,846,248									30	
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) 1a Land b Buildings C Leasehold improvements C Description answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. (b) Cost or other basis (other) (c) Accumulated depreciation 100,000. 100,000. 2,222,774. 2,406,406. 560,158. 1,846,248.				willetti turius.						
Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land 100,000. 100,000. 100,000. 2,222,774. b Buildings 6,114,734. 3,891,960. 2,222,774. c Leasehold improvements 2,406,406. 560,158. 1,846,248.	. u) Part IV line 11a	See Form 990	Dart Y	line 10			
basis (investment) basis (other) depreciation 1a Land 100,000. 100,000. b Buildings 6,114,734. 3,891,960. 2,222,774. c Leasehold improvements 2,406,406. 560,158. 1,846,248.					1				(d) Pook	voluo
1a Land 100,000. 100,000. b Buildings 6,114,734. 3,891,960. 2,222,774. c Leasehold improvements 2,406,406. 560,158. 1,846,248.		Description of property							(u) book	value
b Buildings 6,114,734. 3,891,960. 2,222,774. c Leasehold improvements 2,406,406. 560,158. 1,846,248.		Land	`	,	,	uep	J. 00:ati011		100	000
c Leasehold improvements 2,406,406. 560,158. 1,846,248.						3 5	391 960			
4 000 400 4 400 5445 005				-	-	•	•			
1 FORMULEUR 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				-	-				-	
1 101 000 000 000 100				-	-					
e Other 1,181,062 987,871 193,191 Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 4,478,138										•

Schedule D (Form 990) 2015

Dort VIII Investments Other Convities				
Part VIII Investments - Other Securities.	an Farma 000 Dart IV line	11h Can Farm 000 Dart	/ line 10	
Complete if the organization answered "Yes" (a) Description of security or category (including name of security)	(b) Book value	•		d-of-year market value
	(b) DOOK Value	(c) Method of Valuati	511. 0031 01 6110	1-01-year market value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A) (B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes"	on Form 000 Part IV line	110 Soo Form 000 Part \	/ line 12	
(a) Description of investment	(b) Book value	(c) Method of valuati	on: Cost or end	d-of-year market value
(1) CASH EQUIVALENTS (FUND)	127,343.			
(1) GILLIA (1) (1) (1) (2) MUTUAL FUNDS (FUND)	692,316.			
(3) EQUITIES (FUND)	645,598.	END-OF-YEAR		
(4) ALTERNATIVE INVESTMENTS	0 20 7 00 0			
(5) (FUND)	751,220.	END-OF-YEAF	MARKET	VALUE
(6)				
(7)				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)	2,216,477.			
Part IX Other Assets.				
Complete if the organization answered "Yes"	on Form 990. Part IV. line	11d. See Form 990. Part	K. line 15.	
	Description		,	(b) Book value
(1)	<u> </u>			
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line	9 15.)			
Part X Other Liabilities.	,		,	
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990	, Part X, line 25	
1. (a) Description of liability		(b) Book value	·	
(1) Federal income taxes				
(2)				
(3)				
(4)				
(5)				

Schedule D (Form 990) 2015

(6) (7) (8) (9)

Cobo	nedule D (Form 990) 2015 TRINITY REPERTOR	RY COMPANY			22-1	2547262 _{Page} 4
	art XI Reconciliation of Revenue per Audited Fi		nts With			
	Complete if the organization answered "Yes" on Form	990, Part IV, line 12a.		_		
1	Total revenue, gains, and other support per audited financial	statements			1	8,975,764
2	Amounts included on line 1 but not on Form 990, Part VIII, line	e 12:				
а	Net unrealized gains (losses) on investments		2a	-102,538.		
b	Donated services and use of facilities		2b	555,332.		
С	Recoveries of prior year grants		2c			
d	d Other (Describe in Part XIII.)		2d	20,080.		
е	Add lines 2a through 2d				2e	472,874
3	Subtract line 2e from line 1				3	8,502,890
4	Amounts included on Form 990, Part VIII, line 12, but not on li					
а	a Investment expenses not included on Form 990, Part VIII, line	7b	4a	30,230.		
b	Other (Describe in Part XIII.)		4b			
С	Add lines 4a and 4b				4c	30,230
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990)	, Part I, line 12.)			5	8,533,120
Pa	art XII Reconciliation of Expenses per Audited F	Financial Stateme	ents Wit	h Expenses per	Retu	rn.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 12a.				
1	Total expenses and losses per audited financial statements .				1	9,704,862
2	Amounts included on line 1 but not on Form 990, Part IX, line	25:				
а	Donated services and use of facilities		2a	555,332.		
b	Prior year adjustments		2b			
С	Other losses		2c			
d			2d			
е	Add lines 2a through 2d				2e	555,332
3	Subtract line 2e from line 1				3	9,149,530
4	Amounts included on Form 990, Part IX, line 25, but not on lin					
а	a Investment expenses not included on Form 990, Part VIII, line	7b	4a	30,230.		
b	Other (Describe in Part XIII.)		4b			
С	Add lines 4a and 4b				4c	30,230
	Total expenses. Add lines 3 and 4c. (This must equal Form 99	00, Part I, line 18.)			5	9,179,760
Pa	art XIII Supplemental Information.					
	vide the descriptions required for Part II, lines 3, 5, and 9; Part II s 2d and 4b; and Part XII, lines 2d and 4b. Also complete this pa				4; Part	X, line 2; Part XI,
PAI	RT V, LINE 4:					
THI	E EARNINGS ON THE ENDOWMENT FUNI	OS ARE TO BE	USEI	FOR THE V	ARIO	OUS PROGRAM
IN:	ITIATIVES AS STIPULATED BY THE I	DONORS AND I	HE OF	RGANIZATION	'ន ន	SPENDING
POI	LICY.					
PAI	RT X, LINE 2:					
$_{ m THI}$	E ORGANIZATION BELIEVES THAT IT	HAS APPROPR	IATE	SUPPORT FO	R Al	NY TAX

POSITIONS TAKEN, AND AS SUCH, DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

GAIN: UNREALIZED INTEREST SWAP 20,080.

Schedule D (Form 990) 2015	TRINITY REPERTORY	COMPANY	22-2547262 Page 5
Schedule D (Form 990) 2015 Part XIII Supplemental Info	ormation (continued)		
-			

SCHEDULE G

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

TRINITY REPERTORY COMPANY

Employer identification number

22-2547262 Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not Part I required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations Solicitation of non-government grants h Internet and email solicitations Solicitation of government grants ☐ Phone solicitations In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or No Yes key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid (iii) Did (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) have custody or control of contributions? (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) Yes No 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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

Schedule G (Form 990 or 990-EZ) 2015

Schedule G (Form 990 or 990-EZ) 2015 TRINITY REPERTORY COMPANY 22-2547262 Page 2 Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 **(b)** Event #2 (c) Other events (d) Total events (add col. (a) through LONDON TOUR 1 PELL EVENT col. (c)) (event type) (event type) (total number) 243,848. 206,445. 53,039. 503,332. 1 Gross receipts 140,909 13,016 0 153,925. 2 Less: Contributions 102,939 193,429. 53,039. 349,407. **3** Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes Direct Expense 16,654. 29,944. 23,109. 69,707. 6 Rent/facility costs 63,953. 13,962. 78,915. 1,000. 7 Food and beverages 1,200. 157,449. 12,524 171<u>,1</u>73. 8 Entertainment 6,036. 29,612. 9 Other direct expenses 21,132. 2,444. 349,407. 10 Direct expense summary. Add lines 4 through 9 in column (d) 11 Net income summary. Subtract line 10 from line 3, column (d) Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (a) Bingo (c) Other gaming Revenue bingo/progressive bingo col. (a) through col. (c)) Gross revenue .. 2 Cash prizes Direct Expenses 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses Yes Yes % Yes 6 Volunteer labor No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) **9** Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? No

Schedule G (Form 990 or 990-EZ) 2015

b If "No," explain:

b If "Yes," explain:

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

Schedule G (Form 990 or 990-EZ) 2015 TRINITI REPERIORI COMPANI ZZZ-	<u> </u>	Page 3
11 Does the organization conduct gaming activities with nonmembers?	Yes	└─ No
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed		
to administer charitable gaming?	Yes	☐ No
13 Indicate the percentage of gaming activity conducted in:		
a The organization's facility	13a	%
b An outside facility		%
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:	100	,,,
Name ▶		
Address >		
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	☐ No
b If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the amount of gaming revenue retained by the third party ▶\$		
c If "Yes," enter name and address of the third party:		
Name		
Address >		
16 Gaming manager information:		
Name		
Gaming manager compensation > \$		
Description of services provided		
Director/officer Employee Independent contractor		
17 Mandatory distributions:		
a Is the organization required under state law to make charitable distributions from the gaming proceeds to		
ratain the state gaming license?	Yes	□ No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	——	
organization's own exempt activities during the tax year > \$		
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III,	lings 0 Ob 10	7h 15h
15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).	iii les 9, 90, 10	JD, 13D,
15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).		

Schedule G	(Form 990 or 990-EZ)	TRINITY REPER	RTORY COMPAN	ſΥ	22-2547262	Page 4
Part IV	(Form 990 or 990-EZ) Supplemental Info	rmation (continued)				
		, ,				
-						

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

TRINITY REPERTORY COMPANY

Employer identification number 22-2547262

Pa	art I Questions Regarding Compensation			
	·		Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		<u> </u>
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee X Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
	Desire the control of the control of the desire of the control of			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
_	organization or a related organization:	40		х
a h	Receive a severance payment or change-of-control payment? Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4a 4b		X
0	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
·	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	70		
	The storage of lines 4a c, list the persons and provide the applicable amounts for each item in a tim.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		Х
	Any related organization?	5b		Х
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		Х
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		ı

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

Schedule J (Form 990) 2015

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

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

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

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Derients	(B)(i)-(D)	reported as deferred on prior Form 990
(1) CURT COLUMBUS	(i)	180,991.	10,000.	0.	0.	9,094.	200,085.	0.
ARTISTIC DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
SCHEDULE J, PART III
SEE SCHEDULE O FOR PROCESS USED IN DETERMINING COMPENSATION.

SCHEDULE L

Transactions With Interested Persons

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

➤ Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service

▶ Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open To Public Inspection

Name of the organization

Employer identification number

				EPERTO								4/2	62		
Part I	Excess Bene	efit Trans	acti	ons (sectio	n 501(c)(3), sect	ion 501(c)(4), and	501(c)(29) organizatior	ns only	/).				
	Complete if the o	organization	answ	vered "Yes"	on Form	990, P	art IV, line 25a or 2	5b, oı	r Form 990-EZ, P	art V,	line 40	Jb.			
1 ,,,,,,,,,			(b) R	Relationship	oetween	disqua	lified	(-) D		4! .			(d)	Corre	cted?
(a) Nar	me of disqualified p	person		person an	d organiz	ation		(C) D	escription of tran	isactic	n		Y	es	No
													_	_	
													_		
	the amount of tax i	,		J	Ū			·	,						
											S				
3 Enter	the amount of tax,	if any, on lin	ie 2, a	above, reimk	oursed by	the or	ganization				> \$				
Part II	Loans to and	l/or From	Int	erested F	ersons	<u>. </u>									
							, Part V, line 38a o	r Forn	n 000 Part IV lin	o 26.	or if th	ne oras	nizati	nn -	
	reported an amo	· ·					., Fait V, iiile 30a 0	1 1 011	11 990, Fait IV, III	le 20,	OI II LI	ie orga	ııızatı	JII	
(a) Name of	(b) Relation		(c) Purpos	e (d) L	oan to or	(e) Original	(1	f) Balance due	(a	In	(h) App by boa	proved	(i) W	ritten
	ested person	with organiz		of loan	tro	m the ization?	principal amount		,		ult?	comm	ard or nittee?	agree	ment?
					To	From				Yes	No	Yes	No	Yes	No
RM2 FC	DUNDATION	SCH O		SCH O	Х		1,800,000	.1,	629,975.		Х	Х		Х	
												Ш			
												igsquare			
								_				igsquare			
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								-				+			
Total								<u> </u>	629,975.						
Part III	Grants or As	sistance	Ber	nefitina In	tereste	ed Pe	rsons.	<u>р т ,</u>	025,515						
	Complete if the o			_											
(a) N	ame of interested p	-		b) Relations			(c) Amount o	f	(d) Type	of) Purp	nse ni	
(α) 11	anno or interested p	3010011	١ '	interested			assistance	•	assistan			٠,	assista		
				the orga											
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2015

JOHN	(a) Name of interested person	(b) Relationship between interested person and the organization	8b, or 28c. (c) Amount of transaction	(d) Description of transaction	(e) Sha organiz reven	aring of cation's lues?
JOHN					Yes	No
	PALUMBO	ADVERTISING	160,000	ADVERTISING		Х
Part V	Supplemental Information					
	Provide additional information for	responses to questions on Schedule L (see i	nstructions).			

SCHEDULE M (Form 990)

Noncash Contributions

TRINITY REPERTORY COMPANY

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

Attach to Form 990.

► Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Employer identification number 22-2547262

Pai	rt I Types of Property							
		(a) Check if	(b) Number of	(c) Noncash contribution	(d) Method of de			
		applicable		amounts reported on Form 990, Part VIII, line 1g	noncash contribu	ition amo	ounts	3
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods	X		10,762.	FAIR MARKET	VAL	UE	
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	X	13	102,480.	FAIR MARKET	VAL	UE	
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24 25	Archeological artifacts Other ► (AIRLINE TICKE)	X	1	10 000.	FAIR MARKET	WAT.	H	
26		21		10,000.		V 2 3 2 2		
27	Othor)							
28	Other ()							
29	Number of Forms 8283 received by the organization	zation durin	a the tax vear for c	ontributions				
	for which the organization completed Form 828		,					
	3	, ,	`			Y	'es	No
30a	During the year, did the organization receive by	y contribution	on any property rep	oorted in Part I, lines 1 throu	gh 28, that it			
	must hold for at least three years from the date							
	exempt purposes for the entire holding period?	?				30a		X
b	If "Yes," describe the arrangement in Part II.				•			
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?						Х	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash							
	contributions?					32a		X
b	If "Yes," describe in Part II.							
33	If the organization did not report an amount in	column (c) 1	for a type of prope	rty for which column (a) is ch	ecked,			
	describe in Part II.							

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) (2015)

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

Open to Public

OMB No. 1545-0047

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Inspection

Name of the organization

TRINITY REPERTORY COMPANY

Employer identification number 22-2547262

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: COMMUNITY IN A CONTINUING DIALOGUE THROUGH STAGE PRODUCTIONS, A RESIDENT ACTING COMPANY, GRADUATE TRAINING PROGRAMS, LIFELONG LEARNING AND K-12 EDUCATION PROGRAMS.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: AND SUMMER PROGRAMS, AND THE TRINITY REP ACTIVE IMAGINATION NETWORK FOR CHILDREN ON THE AUTISM SPECTRUM, SERVED MORE THAN 19,000 K-12 STUDENTS FROM ACROSS SOUTHERN NEW ENGLAND. LIFELONG LEARNING OPPORTUNITIES INCLUDED POST-SHOW TALKBACKS, COMMUNITY DISCUSSIONS, ENRICHMENT MATERIALS, AND CLASSES FOR ADULTS.

FORM 990, PART VI, SECTION A, LINE 2:

JOHN LOMBARDO AND HANNAH BELL-LOMBARDO ARE MARRIED.

FORM 990, PART VI, SECTION B, LINE 11:

DRAFT OF FORM 990 IS SENT TO THE FULL BOARD OF TRUSTEES, EXECUTIVE COMMITTEE, AUDIT COMMITTEE AND KEY EMPLOYEES FOR APPROVAL.

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

THE ORGANIZATION REQUESTS ALL BOARD MEMBERS AND KEY EMPLOYEES TO SIGN AN ANNUAL CONFLICT OF INTEREST POLICY CERTIFICATION. IN ADDITION, BOARD MEMBERS AND KEY EMPLOYEES ARE REQUESTED TO COMPLETE AN ANNUAL FORM 990 DISCLOSURE, WHICH REQUESTS DISCLOSURE OF ANY INTEREST THAT COULD GIVE RISE TO CONFLICTS.

Schedule O (Form 990 or 990-EZ) (2015) Page 2 Name of the organization **Employer identification number** TRINITY REPERTORY COMPANY 22-2547262 FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION OF KEY EMPLOYEES IS APPROVED BY THE BOARD AND/OR COMMITTEES. COMPENSATION IS BASED ON INDUSTRY STANDARDS DERIVED FROM COMPENSATION SURVEYS, FORM 990 OF OTHER ORGANIZATIONS, AND IN SOME CASES WRITTEN CONTRACT. FORM 990, PART VI, SECTION C, LINE 19: FORM 990 IS AVAILABLE ONLINE AT WWW.GUIDESTAR.ORG. ALL OTHER DOCUMENTS ARE AVAILABLE UPON REQUEST. FORM 990, PART VII, COLUMN (A) BOARD MEMBER(31) JOHN PALUMBO IS THE PRESIDENT AND PUBLISHER OF RI MONTHLY. RI MONTHLY PROVIDED PROGRAM PUBLISHING SERVICES. FORM 990, PART VII, COLUMN (A) BOARD MEMBER(32) AND SCHEDULE L PART II IN JUNE 2014, THE ORGANIZATION ENTERED INTO AN AGREEMENT WITH A PRIVATE FOUNDATION (RM2 FOUNDATION) CONTROLLED BY THE BOARD MEMBER FOR THE SALE OF 87 EMPIRE STREET PROPERTY. THE SALE PRICE (\$1,800,000) WAS DETERMINED BY AN INDEPENDENT APPRAISAL THAT WAS COMPLETED IN APRIL 2014. THE ORGANIZATION SIGNED A LEASE WITH THE FOUNDATION TO LEASE BACK THE PREMISES SOLD TO THE FOUNDATION. THE ORGANIZATION HAS REFLECTED THE CAPITAL LEASE AT THE APPRAISED FAIR MARKET VALUE OF \$1,800,000. \$1,629,975 IS NET PRINCIPAL DUE AS OF JUNE 30, 2016.

20,080.

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GAIN: UNREALIZED INTEREST SWAP

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS: